

B8

# UNITED STATES BANKRUPTCY COURT

In re Andrea J. Cota Eigner  
Debtor

Case No. 12-32449  
Chapter 7

## CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A – Debts secured by property of the estate.** (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: <u>Andrea J. Cota Eigner</u>	Describe Property Securing Debt: <u>House</u>
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <u>Working with bank</u> (for example, avoid lien using 11 U.S.C. § 522(f)). <u>to try and have mitigation with mortgage.</u>	
Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

Property No. 2 (if necessary)	
Creditor's Name: <u>N/A</u>	Describe Property Securing Debt:
Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained	
If retaining the property, I intend to (check at least one): <input type="checkbox"/> Redeem the property <input type="checkbox"/> Reaffirm the debt <input checked="" type="checkbox"/> Other. Explain <u>Trying to get a job</u> (for example, avoid lien using 11 U.S.C. § 522(f)). <u>to pay my mortgages &amp; other bills</u>	
Property is (check one): <input type="checkbox"/> Claimed as exempt <input type="checkbox"/> Not claimed as exempt	

**PART B – Personal property subject to unexpired leases.** (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. 1	N/A	
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input type="checkbox"/> NO

\_\_\_\_\_ continuation sheets attached (if any)

**I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.**

Date: 11/5/12

Andrea J. Cole Eigner  
Signature of Debtor

\_\_\_\_\_  
Signature of Joint Debtor

Name of Debtor (if individual, enter Last, First, Middle): Cote Eigner, Andrea Jean

Name of Joint Debtor (Spouse) (Last, First, Middle):

All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):

All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): 1997

Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):

Street Address of Debtor (No. and Street, City, and State): Cromwell Ct. 15 Oak Ridge Drive ZIP CODE

Street Address of Joint Debtor (No. and Street, City, and State): ZIP CODE

County of Residence or of the Principal Place of Business: Madison

County of Residence or of the Principal Place of Business:

Mailing Address of Debtor (if different from street address):

Mailing Address of Joint Debtor (if different from street address):

Location of Principal Assets of Business Debtor (if different from street address above):

Type of Debtor (Form of Organization) (Check one box.)
 Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.
 Corporation (includes LLC and LLP)
 Partnership
 Other (If debtor is not one of the above entities, check this box and state type of entity below.)

Nature of Business (Check one box.)
 Health Care Business
 Single Asset Real Estate as defined in 11 U.S.C. § 101(51B)
 Railroad
 Stockbroker
 Commodity Broker
 Clearing Bank
 Other
N/A

Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)
 Chapter 7
 Chapter 9
 Chapter 11
 Chapter 12
 Chapter 13
 Chapter 15 Petition for Recognition of a Foreign Main Proceeding
 Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding

Chapter 15 Debtors
Country of debtor's center of main interests:
Each country in which a foreign proceeding by, regarding, or against debtor is pending:

Tax-Exempt Entity (Check box, if applicable.)
 Debtor is a tax-exempt organization under title 26 of the United States Code (the Internal Revenue Code).

Nature of Debts (Check one box.)
 Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
 Debts are primarily business debts.
Debts for Children Custody Case

Filing Fee (Check one box.)
 Full Filing Fee attached.
 Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.
 Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.

Check one box: N/A
 Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).
 Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).
Check if:
 Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment on 4/01/13 and every three years thereafter).
Check all applicable boxes:
 A plan is being filed with this petition.
 Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

Statistical/Administrative Information
Table with 10 columns for creditor and asset/liability ranges.
Debtor estimates that funds will be available for distribution to unsecured creditors.
Estimated Number of Creditors: 1-49
Estimated Assets: \$0 to \$50,000
Estimated Liabilities: \$0 to \$50,000

THIS SPACE IS FOR COURT USE ONLY
2012 OCT 22 AM 1:21
FILED

Chapter 11 Petition  
(Page must be completed and filed in every case.)

Name of Debtor(s):  
*Andrea Jean Cota Eigner*

All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)

Location Where Filed: <i>N/A</i>	Case Number:	Date Filed:
Location Where Filed: <i>N/A</i>	Case Number:	Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet.)

Name of Debtor: <i>N/A</i>	Case Number:	Date Filed:
District:	Relationship:	Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

*N/A*

Exhibit A is attached and made a part of this petition.

**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

*N/A no attorney*

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).

X \_\_\_\_\_  
Signature of Attorney for Debtor(s) (Date)

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and Exhibit C is attached and made a part of this petition.

No.

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D, completed and signed by the debtor, is attached and made a part of this petition.

If this is a joint petition:

Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**

(Check any applicable box.)

Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

*N/A*

**Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes.)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

\_\_\_\_\_  
(Name of landlord that obtained judgment)

\_\_\_\_\_  
(Address of landlord)

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Debtor's Petition

(page must be completed and filed in every case.)

Name of Debtor(s):

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

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

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] 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.

X [Signature of Debtor: Andrea J. Cote Esquire Chapter 7]

X [Signature of Joint Debtor]
[Telephone Number: 860-463-8946]
[Date: 10/31/12]

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

[ ] I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

[ ] Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X [Signature of Foreign Representative]

[Printed Name of Foreign Representative]

[Date]

Signature of Attorney\*

X [Signature of Attorney for Debtor(s)]

[Printed Name of Attorney for Debtor(s)]

[Firm Name]

[Address]

[Telephone Number]

[Date]

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

[Printed Name and title, if any, of Bankruptcy Petition Preparer]

[Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)]

[Address]

X [Signature]

[Date]

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X [Signature of Authorized Individual]

[Printed Name of Authorized Individual]

[Title of Authorized Individual]

[Date]

In re Andrea Jean Cota Figueras  
Debtor

Case No. 12-32449  
(if known)

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

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

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

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

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. * Chase Bank Credit Services PO Box 15298 Wilmington DE 19850	-	-	Will incur <del>more</del> interest				* 16,502.-
ACCOUNT NO. AAA Financial PO Box 15019 Wilmington DE 19886-5019	-	-	Will incur more interest				19,482.78
ACCOUNT NO. Middlesex Hospital 28 Crescent Street Middletown, CT 06457 Billing	-	-	-				370.-
ACCOUNT NO. Middlesex Primary Care 80 Shampoke Rd Cromwell CT 06416	-	-	11/5/11				ACE 259.- 259.-

Subtotal ▶ \$ 36,613.-

Total ▶ \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

36,613.-

continuation sheets attached

Andree Jean Cata Fajner,  
Debtor

Case No. 12-32449  
(if known)

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. John Dempsey Hosp. V-Coun Health Ctr. 263 Farmington Ave. Farmington, Ct. 06030 Billing	-	-	7/11/12				313.-
ACCOUNT NO. Julie Crawford Attorney 85 Broad Street Middletown, Ct 06457	-	-	4/2006				650.-
ACCOUNT NO. Susan Consineau Attorney 516 Main Street Middletown, Ct 06457	-	-	10/08/09				4,100.-
ACCOUNT NO.							
ACCOUNT NO.							

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

Subtotal ▶ \$ 5063.-  
Total ▶ \$ 36,613

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)

Total 41,676.-  
Previous Page

## Creditor Matrix

**Andrea Jean Cota Eigner      Case # 12-32449**

15 Oak Ridge Drive  
Cromwell, Ct. 06416  
860-463-8940

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Chase Credit Services  
PO Box 15298  
Wilmington, DE 19850

AAA Financial  
PO Box 15019  
Wilmington, DE 19886-5019

Middlesex Hospital  
28 Crescent Street  
Middletown, Ct. 06457

Middlesex Primary Care  
80 Shunpike Rd.  
Cromwell, Ct. 06416

John Dempsey Hospital  
U-Conn Health Ctr.  
263 Farmington Ave.  
Farmington, Ct. 06030

Atty. Jule Crawford  
85 Broad Street  
Middletown, Ct. 06457

Atty. Susan Cousineau  
516 Main Street, Ct.  
Middletown, Ct. 06457

*Andrea Cota Eigner 11/6/12*

**U.S. Bankruptcy Court  
 District of Connecticut (New Haven)  
 Bankruptcy Petition #: 12-32449  
 Internal Use Only**

Date filed: 11/01/2012

Assigned to: Chief Judge Lorraine Murphy Weil  
 Chapter 7  
 Voluntary  
 No asset

Means Flag: MEANSU

Case Type: bk	Office: 3	Docket Number: 12-32449
----- SARD Information -----		
Chapter : 7	Nature of Debt: c	Estimated...
Ch Subtype :	Type of Debtor: i	Creditors : A
Previous Ch :	Business Type :	Assets : A
Vol/Invol : v	-----	Liabilities : C
Asset Notice: n	Reopened : 0	Employees :
Fee Status : p	Joint Petition: n	Eq Sec Hldrs:

Title: Andrea Jean Cote Eigner etal:

**Debtor**  
**Andrea Jean Cote Eigner**  
 15 Oak Ridge Drive  
 Cronmwell, CT 06416  
 MIDDLESEX-CT  
 SSN / ITIN: 049-60-1997

represented by **Andrea Jean Cote Eigner**  
 PRO SE

✓ **Trustee**  
**George I. Roumeliotis**  
 Roumeliotis Law Group, P.C.  
 100 Pearl Street, 14th Floor  
 Hartford, CT 06103  
 860.249.7124

**U.S. Trustee**  
**U. S. Trustee**  
 Office of the U.S. Trustee  
 Gaiimo Federal Building  
 150 Court Street, Room 302  
 New Haven, CT 06510  
 (203)773-2210

Filing Date	#	Docket Text
11/01/2012	●	Receipt of Chapter 7 Voluntary Petition. Missing Document(s): Matrix, due at time of filing. Compliance with Section 521(i) due by

		12/17/2012. Debtors Declaration Page, Chapter 7 Means Test, Schedule A-J, Statement of Financial Affairs, Statistical Summary of Schedules Summary of Schedules due by 11/15/2012. Statement of Intent due by 12/3/2012. Filed by Andrea Jean Cote Eigner. (Leible, Beverly) (Entered: 11/01/2012)
11/01/2012	31	First Meeting of Creditors with 341(a) meeting to be held on 12/11/2012 at 10:00 AM at Office of the UST. Objections for Discharge and Reaffirmation Agreements due by 02/11/2013. Financial Management Certificate due from Debtor by 02/11/2013. (Leible, Beverly) (Entered: 11/01/2012)