

UNITED STATES BANKRUPTCY COURT  
FOR THE EASTERN DISTRICT OF MICHIGAN

**COVER SHEET FOR AMENDMENTS**

**CASE NAME:** Thomas Michael Shaughnessy  
Catherine Caya Shaughnessy

**CASE NUMBER:** 07-57455

The enclosed documents amend the petition, schedule, statement of financial affairs, statement of income and expenses, matrix or summary of assets and liabilities.

**The purpose of this amendment is to:**

- ☐ Add creditors to schedule(s) \_\_\_\_\_. How many? \_\_\_\_ (Use second page of this form to list creditors added).
- ☐ Correct the addresses of creditors already listed on the schedules and matrix previously filed. (Use second page of this form).
- ☒ Other: (Please explain) Amend Schedule F to Add Debtors' Mortgage Company
- ☒ **\$26.00 Amendment Fee.** This fee is required whenever you add creditors to a case, delete creditors, change the amount of a debt or change the classification of a debt. The fee is not required when correcting addresses of previously listed creditors. It is not required when new schedules are filed in a converted case.
- ☒ **Amended Schedules and list of creditors.** Schedules must be verified by the debtor(s).
- ☐ **Matrix.** Send a matrix listing "only" the amended creditors being added. Please do not send a matrix adding creditors to a case unless you also send the amended schedules. Do not send a new matrix to correct an address-use the second page of this form.

**NOTE:** LBR 1009-1(b) requires the debtor to serve a copy of the amendment and the cover sheet for amendments on the trustee and all other entities affected by the amendment.

## CORRECTIONS AND ADDITIONS TO MAILING MATRIX

Use this section of the form to make corrections to the names and addresses of any creditors or parties in interest who are listed on the current matrix of the case.

**NAME OF CREDITOR** (As it now appears):

Previous address:

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(Please print)

Please change to:

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**NAME OF CREDITOR** (As it now appears):

Previous address:

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(Please print)

Please change to:

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**NAME OF CREDITOR** (As it now appears):

Previous address:

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(Please print)

Please change to:

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Use this section of the form to **IDENTIFY** creditors added to the schedules and matrix

**NAME OF CREDITOR** (As it now appears):

Address AMC Mortgage Services  
505 City Parkway W.  
Orange, CA 92868

(Please print)

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**NAME OF CREDITOR** (As it now appears):

Address

(Please print)

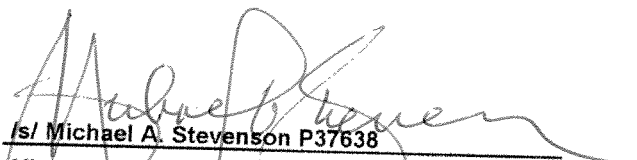
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**FOR ADDITIONAL CHANGES COPY THIS SHEET AND CONTINUE**

Signature:

  
/s/ Michael A. Stevenson P37638


Michael A. Stevenson P37638  
29200 Southfield Rd.  
Suite 210  
Southfield, MI 48076  
(248)423-8200

Signature:

  
/s/ Thomas Michael Shaughnessy

Thomas Michael Shaughnessy

Signature:

  
/s/ Catherine Caya Shaughnessy

Catherine Caya Shaughnessy

Thomas Michael Shaughnessy  
Catherin Caya Shaughnessy,

Bankruptcy Case No. 07-57455  
Honorable Steven W. Rhodes  
Chapter 7

**United States Bankruptcy Court  
Eastern District of Michigan**

In re Thomas Michael Shaughnessy  
Catherine Caya Shaughnessy

Debtor(s)

Case No. 07-57455  
Chapter 7

**STATEMENT OF AFFIRMATION**

Debtors declare under penalty of perjury that the information in the attached Amended Schedule F is true to the best of our knowledge, information and belief.

/s/ Thomas Michael Shaughnessy  
Thomas Michael Shaughnessy

/s/ Catherine Caya Shaughnessy  
Catherine Caya Shaughnessy

Date: April 27, 2008

Date: April 27, 2008

Penalty for making a false statement or concealing property: Fine up to \$500,000.00 or imprisonment for up to five (5) years or both. 18 U.S.C. Section 152 and Section 3571.

In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

Debtors

## AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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

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

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

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

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR H W J C	Husband, Wife, Joint, or Community	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.						
<b>48th District Court (Case No. 07-32576) 4280 Telegraph Road PO Box 3200 Bloomfield Hills, MI 48302</b>	<b>J</b>	<b>Notice Only</b>				<b>0.00</b>
Account No.						
<b>AMC Mortgage Services 505 City Parkway W. Orange, CA 92868</b>	<b>J</b>	<b>Mortgage</b>			<b>X</b>	<b>450,474.00</b>
Account No. <b>xxxxxFxxx3407</b>						
<b>American Arbitration Association 950 Warren Ave East Providence, RI 02914</b>	<b>J</b>	<b>Arbitration Fees</b>		<b>X</b>		<b>175.00</b>
Account No. <b>5994</b>						
<b>American Express PO Box 297812 Fort Lauderdale, FL 33329</b>	<b>W</b>	<b>3/1/90 Credit Card</b>		<b>X</b>		<b>10,300.00</b>
Subtotal (Total of this page)						<b>460,949.00</b>

7 continuation sheets attached

In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>2342</b>  <b>American Express</b> <b>PO Box 297812</b> <b>Fort Lauderdale, FL 33329</b>		W	<b>4/1/2000</b> <b>Credit Card</b>		X		<b>22,000.00</b>
Account No. <b>2734</b>  <b>American Express</b> <b>PO Box 297812</b> <b>Fort Lauderdale, FL 33329</b>		X W	<b>6/1/90</b> <b>Credit Card</b>				<b>9,843.00</b>
Account No. <b>4396</b>  <b>American Express</b> <b>PO Box 297812</b> <b>Fort Lauderdale, FL 33329</b>		X W	<b>6/1/90</b> <b>Credit Card</b>		X		<b>13,600.00</b>
Account No. <b>8849</b>  <b>American Express</b> <b>PO Box 297812</b> <b>Fort Lauderdale, FL 33329</b>		X W	<b>5/1/05</b> <b>Credit Card</b>		X		<b>275.00</b>
Account No. <b>9739</b>  <b>Bank of America</b> <b>PO Box 1390</b> <b>Norfolk, VA 23501</b>		H	<b>5/1/00</b> <b>Credit Card</b>		X		<b>7,130.00</b>
Subtotal (Total of this page)							<b>52,848.00</b>

Sheet no. 1 of 7 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B I T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>9163</b>  <b>Bank of America</b> <b>PO Box 1390</b> <b>Norfolk, VA 23501</b>		H	<b>12/1/00</b> <b>Credit Card</b>		X		<b>1,190.00</b>
Account No. <b>1015</b>  <b>Capital One Bank</b> <b>PO Box 790217</b> <b>Saint Louis, MO 63179-0217</b>		J	<b>2001</b> <b>Credit Card</b>		X		<b>11,205.00</b>
Account No. <b>2664</b>  <b>Capital One Bank</b> <b>PO Box 790-0217</b>		X H	<b>2001</b> <b>Business Credit Card</b>		X		<b>2,126.00</b>
Account No.  <b>Eileen Caya</b> <b>20924 Mary Street</b> <b>Taylor, MI 48180</b>		J					<b>0.00</b>
Account No.  <b>Huntington Bank</b> <b>Court Order Processing (EA4W34)</b> <b>7 Easton Oval</b> <b>Columbus, OH 43219</b>		W					<b>0.00</b>
Subtotal (Total of this page)							<b>14,521.00</b>

Sheet no. **2** of **7** sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C						
Account No.			<b>2003 Income Taxes</b>					
<b>Internal Revenue Service SBSE/Insolvency Unit Box 330500, Stop 15 Detroit, MI 48232-6500</b>	<b>J</b>				<b>X</b>		<b>5,800.00</b>	
Account No.								
<b>Janet Ranville 24806 Hanover Dearborn, MI 48124</b>	<b>J</b>						<b>0.00</b>	
Account No. <b>3393</b>			<b>Business Loan</b>					
<b>LaSalle Bank RGS Financial 3333 Earhart Drive Suite 150 Carrollton, TX 75006-5154</b>	<b>X H</b>				<b>X</b>		<b>30,372.00</b>	
Account No.			<b>Overdraft Fees</b>					
<b>LaSalle Bank RGS Financial 3333 Earhart Drive Suite 150 Carrollton, TX 75006-5154</b>	<b>J</b>					<b>X</b>	<b>368.00</b>	
Account No. <b>4972</b>			<b>2001 Charge Card</b>					
<b>Macy's PO Box 183083 Columbus, OH 43218-3083</b>	<b>W</b>				<b>X</b>		<b>2,000.00</b>	
Sheet no. <b>3</b> of <b>7</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	<b>38,540.00</b>



In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

Debtors

**AMENDED**

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B I T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>7942</b>  <b>MBNA America</b> <b>PO Box 15137</b> <b>Wilmington, DE 19886-5137</b>		<b>H</b>	<b>2000</b> <b>Credit Card</b>		<b>X</b>		<b>28,170.00</b>
Account No. <b>7441</b>  <b>MBNA America</b> <b>PO Box 15137</b> <b>Wilmington, DE 19886-5137</b>		<b>J</b>	<b>2000</b> <b>Credit Card</b>		<b>X</b>		<b>17,940.00</b>
Account No.  <b>MCI</b> <b>Consumer Markets</b> <b>PO Box 105406</b> <b>Atlanta, GA 30348</b>		<b>W</b>	<b>Telephone Service</b>		<b>X</b>		<b>43.75</b>
Account No.  <b>MDSI</b> <b>Manufacturing Data Service, Inc.</b> <b>3885 Research Drive</b> <b>Suite A</b> <b>Ann Arbor, MI 48108</b>		<b>H</b>	<b>Software and Services</b>			<b>X</b>	<b>28,229.00</b>
Account No.  <b>Michael R. Stillman</b> <b>Stillman Law Office</b> <b>7091 Orchard Lake Rd.</b> <b>West Bloomfield, MI 48322-3651</b>		<b>J</b>	<b>Notice Only</b>				<b>0.00</b>
Subtotal (Total of this page)							<b>74,382.75</b>

Sheet no. **4** of **7** sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.			<b>1992 Loan</b>				
<b>Nancy B. Shaughnessy 6735 Alden Road West Bloomfield, MI 48324</b>		<b>J</b>			<b>X</b>		<b>6,000.00</b>
Account No.			<b>Notice Only</b>				
<b>Oakland County Treasurer 1200 N. Telegraph Pontiac, MI 48341</b>		<b>J</b>					<b>0.00</b>
Account No. <b>9125</b>			<b>2000 Charge Card</b>				
<b>Sams Club Discover PO Box 960013 Orlando, FL 32896-9125</b>		<b>W</b>			<b>X</b>		<b>1,000.00</b>
Account No.			<b>Attorney's Fees for TC Tech</b>				
<b>Schwartz Law Firm 37887 W. Twelve Mile Road Suite A Farmington, MI 48331</b>		<b>X H</b>			<b>X</b>		<b>1,442.00</b>
Account No. <b>8780</b>			<b>10/1/80 Credit Card</b>				
<b>Sears Citicard PO Box 182532 Columbus, OH 43218-2149</b>		<b>H</b>			<b>X</b>		<b>9,469.00</b>
Sheet no. <b>5</b> of <b>7</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							
Subtotal (Total of this page)							<b>17,911.00</b>

In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C					
Account No.			Notice Only				
<b>Shermeta, Adams &amp; Von Allmen, PC</b> <b>445 South Livernois Road</b> <b>Suite 333</b> <b>PO Box 5016</b> <b>Rochester, MI 48308</b>		<b>J</b>					<b>0.00</b>
Account No.			Notice Only				
<b>Timothy Baxter &amp; Accociates, PC</b> <b>PO Box 2669</b> <b>Farmington, MI 48333</b>		<b>J</b>					<b>0.00</b>
Account No.			Notice Only				
<b>Timothy E. Baxter &amp; Associates, PC</b> <b>37000 Grand River, Ste. 230</b> <b>Farmington Hills, MI 48335</b>		<b>J</b>					<b>0.00</b>
Account No. <b>9260</b>			2000 Credit Card				
<b>US Bank</b> <b>PO Box 790408</b> <b>Saint Louis, MO 63179-0408</b>		<b>H</b>			<b>X</b>		<b>12,780.00</b>
Account No. <b>6197</b>			9/1/2001 Credit Card				
<b>US Bank</b> <b>P.O. Box 790408</b> <b>Saint Louis, MO 63179-0408</b>		<b>J</b>			<b>X</b>		<b>19,070.00</b>
Subtotal (Total of this page)							<b>31,850.00</b>

Sheet no. **6** of **7** sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re **Thomas Michael Shaughnessy,  
Catherine Caya Shaughnessy**

Case No. **07-57455**

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

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D  W I F E  J O I N T  C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.			<b>Notice Only</b>				<b>0.00</b>
<b>Wolpoff &amp; Abramson, LLP Two Irvington Centre 702 King Farm Blvd. Rockville, MA 20850-5775</b>		<b>J</b>					
Account No.							
Account No.							
Account No.							
Account No.							
Account No.							
Subtotal (Total of this page)							<b>0.00</b>
Total (Report on Summary of Schedules)							<b>691,001.75</b>

Sheet no. **7** of **7** sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims