

FORM B1	United States Bankruptcy Court District of Oregon	Voluntary Petition
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Name of Debtor (if individual, enter Last, First, Middle): WEAVER, WhiteWind	Name of Joint Debtor (Spouse) (Last, First, Middle):
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All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names): Susan WhiteWind Swan; WhiteWind Swan Fisher; WhiteWind Swan Musumeci	All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names): 03-66649f
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Soc. Sec./Tax I.D. No. (if more than one, state all): 096-42-2665	Soc. Sec./Tax I.D. No. (if more than one, state all):
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Street Address of Debtor (No. & Street, City, State & Zip Code): 38684 Upper Camp Creek Rd. Springfield, OR 97478	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):
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County of Residence or of the Principal Place of Business: Lane	County of Residence or of the Principal Place of Business:
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Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
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Location of Principal Assets of Business Debtor (if different from street address above):

Information Regarding the Debtor (Check the Applicable Boxes)

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.

Type of Debtor (Check all boxes that apply)

<input checked="" type="checkbox"/> Individual(s)	<input type="checkbox"/> Railroad
<input type="checkbox"/> Corporation	<input type="checkbox"/> Stockbroker
<input type="checkbox"/> Partnership	<input type="checkbox"/> Commodity Broker
<input type="checkbox"/> Other _____	<input type="checkbox"/> Clearing Bank

Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)

<input checked="" type="checkbox"/> Chapter 7	<input type="checkbox"/> Chapter 11	<input type="checkbox"/> Chapter 13
<input type="checkbox"/> Chapter 9	<input type="checkbox"/> Chapter 12	
<input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding		

Nature of Debts (Check one box)

Consumer/Non-Business Business

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 No. 3.

Chapter 11 Small Business (Check all boxes that apply)

Debtor is a small business as defined in 11 U.S.C. § 101

Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)

Statistical/Administrative Information (Estimates only)

Debtor estimates that funds will be available for distribution to unsecured creditors.

Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors

1-15	16-49	50-99	100-199	200-999	1000-over
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Assets

\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Debts

\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THIS SPACE IS FOR COURT USE ONLY

RECEIVED
AUG 12 PM 3:20
DOCKETED
U.S. BANKRUPTCY COURT
DISTRICT OF OREGON

Voluntary Petition

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

Name of Debtor(s):

WEAVER, WhiteWind

FORM B1, Page 2

Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)

Location
Where Filed: **None**

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:
none

Case Number:

Date Filed:

District:

Relationship:

Judge:

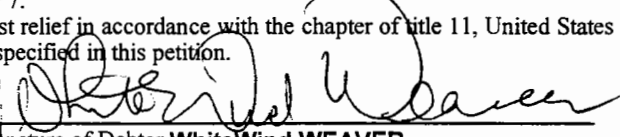
Signatures

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.

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

X 

Signature of Debtor **WhiteWind WEAVER**

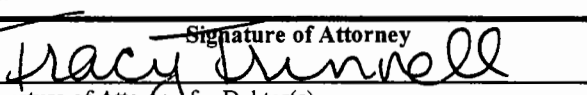
X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

8-11-2003

Date

Signature of Attorney

X 

Signature of Attorney for Debtor(s)

Tracy Trunnell 99382

Printed Name of Attorney for Debtor(s)

Sticka Trunnell Moore LLP

Firm Name

**401 East 10th Street, Ste. 470
Eugene, OR 97401**

Address

(541) 341-1700 Fax: (541) 344-2444

Telephone Number

8-12-03

Date

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 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

Exhibit A

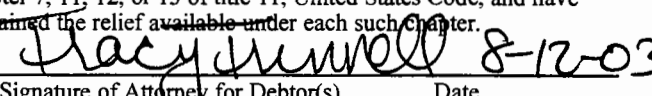
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)

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)

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.

X  8-12-03

Signature of Attorney for Debtor(s)

Date

Tracy Trunnell 99382

Exhibit C

Does the debtor own or have possession of any property that poses 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

Signature of Non-Attorney Petition Preparer

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed Name of Bankruptcy Petition Preparer

Social Security Number

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

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

X _____
Signature of Bankruptcy Petition Preparer

Date

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.

UNITED STATES BANKRUPTCY COURT
DISTRICT OF OREGON

In re
WhiteWind WEAVER

) Case No.

EXHIBIT "C"

) [(If not an Ex. on Petition Pg. 2, then to be
) FULLY completed by ALL debtors and
) attached to ALL copies of the Petition.]

Debtor(s)

(NOTE: You must answer ALL questions. Attach additional sheets if necessary. Use of "UNKNOWN" is NOT acceptable!)

1. Identify and briefly describe all real or personal property owned by or in possession of the debtor that, to the best of the debtor's knowledge, poses or is alleged to pose a threat of imminent and identifiable harm to the public health or safety:

NONE

2. With respect to each parcel of real property or item of personal property identified in question 1, describe the nature and location of the dangerous condition, whether environmental or otherwise, that poses or is alleged to pose a threat of imminent and identifiable harm to the public health or safety:

NONE

3. DESCRIBE ASSETS REQUIRING TRUSTEE'S IMMEDIATE ATTENTION:

NONE

4. Street address of principal assets (note property):

38684 Upper Camp Creek Rd.
Springfield OR 97478-0000

5. [If debtor(s) an individual] Is debtor(s), OR has debtor(s) ever been within the 6 years prior to filing, either: self-employed or a sole proprietor; a partner, other than a limited partner, of a partnership; or an officer, director, managing executive, or person in control of a corporation? YES NO

If YES, complete ALL questions in the Statement of Affairs.

6. [Unless EXACT question already answered on Petition] If debtor is CORPORATION, list name and address of chief executive officer; if debtor is PARTNERSHIP, list names and addresses of general partners:

N/A

7. Total GROSS income of the individual debtor(s) for the last tax year: \$ 8,724.00 (i.e., before any deductions).

8. Total amount of unsecured debt: \$ 718,498.55.

9. Total Noncontingent, Liquidated Farming Operation Debt: \$ 0.00.

10. Total GROSS income from farming operation for the individual debtor(s) for last tax year: \$ 0.00.

11. The BANKRUPTCY DOCUMENT PREPARER DECLARATION below has been completed for any person who helped, for compensation, prepare any of the bankruptcy papers if the debtor does not have an attorney.

I declare under penalty of perjury that the above information provided in this Exhibit "C" is true and correct.

DATED: 8/11/03

[Handwritten Signature]
Debtor's Signature

541 344-0110
Phone #

[Handwritten Signature]
Joint Debtor's Signature

BANKRUPTCY DOCUMENT PREPARER DECLARATION

I, the undersigned, declare under penalty of perjury that (1) neither I, nor anyone else listed herein, collected or received any payment from or on behalf of the debtor for court fees in connection with filing the petition; (2) I have received \$ _____ from or on behalf of the debtor within the previous 12 month period; (3) \$ _____ is the unpaid fee charged to the debtor; and (4) the following is true and accurate about myself and any other assistants:

Individual Name and Firm (Type or Print): _____

Address (Type or Print): _____

Social Security Number of all OTHER individuals who prepared or assisted in the preparation of these bankruptcy documents: _____

Signature: _____ Social Security #: _____ Phone#: _____

[NOTE: Penalties up to \$500 per item may be assessed for omission of any required information (11 USC §110; 18 USC §156) and Fed. Bankruptcy Rule 1006 prohibits any payment to any person for services until the court filing fees are paid in full.]

EXHIBIT C (12/1/01)

**United States Bankruptcy Court
District of Oregon**

In re WhiteWind WEAVER

Debtor

Case No. _____

Chapter 7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	AMOUNTS SCHEDULED		
			ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	3,000.00		
B - Personal Property	Yes	3	4,660.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		357,491.96	
E - Creditors Holding Unsecured Priority Claims	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	37		746,128.55	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			1,024.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			1,113.00
Total Number of Sheets of ALL Schedules		49			
		Total Assets	7,660.00		
			Total Liabilities	1,103,620.51	

Debtor

SCHEDULE A. REAL PROPERTY

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

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

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. (See Schedule D.) If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Pennsylvania property Lot 99, Map 1 Tanglewood North Blooming Grove Township	Fee simple	-	3,000.00	161.96

Sub-Total > **3,000.00** (Total of this page)

Total > **3,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

Debtor

SCHEDULE B. PERSONAL PROPERTY

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

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

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

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	Cash		-	10.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	None		-	0.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	None		-	0.00
4. Household goods and furnishings, including audio, video, and computer equipment.	Household goods		-	2,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Tool kit, framed art		-	350.00
6. Wearing apparel.	Misc. clothing		-	300.00
7. Furs and jewelry.	Costume Jewelry		-	1,000.00
8. Firearms and sports, photographic, and other hobby equipment.	None		-	0.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	None		-	0.00
			Sub-Total >	4,160.00
			(Total of this page)	

2 continuation sheets attached to the Schedule of Personal Property

Debtor

SCHEDULE B. PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	NONE	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	None		-	0.00
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	None		-	0.00
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	None		-	0.00
13. Interests in partnerships or joint ventures. Itemize.	none		-	0.00
14. Government and corporate bonds and other negotiable and nonnegotiable instruments.	none		-	0.00
15. Accounts receivable.	none		-	0.00
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	none		-	0.00
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	none		-	0.00
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	none		-	0.00
19. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	none		-	0.00

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

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

Debtor

SCHEDULE B. PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Social Security Claim (Jim Edmonson, Attorney)	-	0.00
21. Patents, copyrights, and other intellectual property. Give particulars.		Sphirical Reality	-	0.00
22. Licenses, franchises, and other general intangibles. Give particulars.		none	-	0.00
23. Automobiles, trucks, trailers, and other vehicles and accessories.		1980 Chevy PU 4x4 (Debtor's ex-husband owns vehicle & was awarded same in divorce)	-	500.00
24. Boats, motors, and accessories.		none	-	0.00
25. Aircraft and accessories.		none	-	0.00
26. Office equipment, furnishings, and supplies.		none	-	0.00
27. Machinery, fixtures, equipment, and supplies used in business.		none	-	0.00
28. Inventory.		none	-	0.00
29. Animals.		none	-	0.00
30. Crops - growing or harvested. Give particulars.		none	-	0.00
31. Farming equipment and implements.		none	-	0.00
32. Farm supplies, chemicals, and feed.		none	-	0.00
33. Other personal property of any kind not already listed.		none	-	0.00

Sub-Total >	500.00
(Total of this page)	
Total >	4,660.00

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

(Report also on Summary of Schedules)

Debtor

SCHEDULE C. PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:

[Check one box]

- 11 U.S.C. §522(b)(1): Exemptions provided in 11 U.S.C. §522(d). Note: These exemptions are available only in certain states.
- 11 U.S.C. §522(b)(2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemption
<u>Real Property</u>			
Pennsylvania property Lot 99, Map 1 Tanglewood North Blooming Grove Township	ORS § 23.160(1)(o)	390.00	3,000.00
<u>Cash on Hand</u>			
Cash	ORS § 23.160(1)(o)	10.00	10.00
<u>Security Deposits with Utilities, Landlords, and Others</u>			
None	ORS § 23.160(1)(o)	0.00	0.00
<u>Household Goods and Furnishings</u>			
Household goods	ORS § 23.160(1)(f)	2,500.00	2,500.00
<u>Books, Pictures and Other Art Objects; Collectibles</u>			
Tool kit, framed art	ORS § 23.160(1)(a)	350.00	350.00
<u>Wearing Apparel</u>			
Misc. clothing	ORS § 23.160(1)(b)	300.00	300.00
<u>Furs and Jewelry</u>			
Costume Jewelry	ORS § 23.160(1)(b)	1,000.00	1,000.00
<u>Interests in Insurance Policies</u>			
None	ORS §§ 743.046, 732.240	0.00	0.00

Debtor

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Code debtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Code debtors. If a joint petition is filed, state whether 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.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS, INCLUDING ZIP CODE	C O D E D E B T O R H U S B A N D W I F E J O I N T O R C O M M U N I T Y	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 WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN						
Account No. Blooming Grove Tax Collector Jeanine M. Tenzi HC8 Box 8235 Hawley, PA 18428								
		Federal Tax Lien						
		Pennsylvania property Lot 99, Map 1 Tanglewood North Blooming Grove Township						
		Value \$	3,000.00				161.96	0.00
Account No. Gleaves Swearingen Potter P.O. Box 1147 975 Oak Street, Suite 800 Eugene, OR 97401								
		38684 Upper Camp Creek Road Springfield, OR 97478						
		Value \$	400,000.00				12,000.00	0.00
Account No. 4133508 Lane County Tax Assessor 125 East 8th Avenue Eugene, OR 97401								
		Property Taxes 2001-2003						
		Value \$	400,000.00				330.00	0.00
Account No. Washington Mutual 1191 2nd Street Seattle, WA 98101								
		38684 Upper Camp Creek Road Springfield, OR 97478						
		Value \$	400,000.00				345,000.00	0.00
Subtotal (Total of this page)							357,491.96	
Total (Report on Summary of Schedules)							357,491.96	

0 continuation sheets attached

Debtor

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

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

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 husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

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

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

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

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,650* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(3).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$4,650* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

Deposits by individuals

Claims of individuals up to \$2,100* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

Alimony, Maintenance, or Support

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

Taxes and Certain Other Debts Owed to Governmental Units

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

Commitments to Maintain the Capital of an Insured Depository Institution

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

*Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
 (Continuation Sheet)

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

TYPE OF PRIORITY

CREDITOR'S NAME AND MAILING ADDRESS, INCLUDING ZIP CODE	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	TYPE OF PRIORITY			TOTAL AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
				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		
Account No.			"Notice Only"					
Internal Revenue Service Eugene Bankruptcy Division 4330 Watt Avenue SA5357 North Highlands, CA 95660	-						0.00	0.00
Account No.			"Notice Only"					
Oregon Department of Revenue Bankruptcy Unit 955 Center St., NE Suite 353 Salem, OR 97310	-						0.00	0.00
Account No.								
Account No.								
Account No.								

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

Subtotal
 (Total of this page)

0.00

Total
 (Report on Summary of Schedules)

0.00

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, 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. 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 "Code debtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Code debtors. If a joint petition is filed, state whether 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 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.

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

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	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				
Account No. A Street Automotive 3445 Main Street Springfield, OR 97478		-						275.00
Account No. 40364382 A T & T Wireless PO Box 78224 Phoenix, AZ 85062-8224		-						1,419.00
Account No. 251585674701 A T & T Wireless PO Box 8212 Aurora, IL 60572-8212		-						39.00
Account No. Abel Computing 410 W 13th Ave Eugene, OR 97401		-						0.00
		"Notice Only" Precautionary-Ancient Rites LLC						0.00
Subtotal (Total of this page)								1,733.00

36 continuation sheets attached

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M I F C L A I M I S S U B J E C T T O S E T O F F S O S T A T E	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	A M O U N T O F C L A I M
Account No. 4121-7415-7986-9749 Academy Collection Service 10965 Decatur Road Philadelphia, PA 19154				"Notice Only" Collection for Capital One: Account No.: 4121741670716724; 4121741579869749; - 5291151939977409; 892204301; 412174148590234				0.00
Account No. 59003519 Accent Service Company 6373 E Tanque Verde Rd. P.O. Box 32500 Tucson, AZ 85751		J		"Notice Only" Collection for Qwest Acct No 541-988-908-6677				0.00
Account No. Account Collection Bureau, Inc 303 South 5th St., Suite 200 P.O. Box 755 Springfield, OR 97477				Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 286455 Active Credit Services, Inc P.O. Box 80370 Portland, OR 97280				"Notice Only" Collection for AT &T Wireless Acct No 40364382				0.00
Account No. Adecco Employment Service Dept LA 21994 Pasadena, CA 91185-1994				Precautionary-Ancient Rites LLC "Notice Only"				0.00
Subtotal								0.00
Sheet no. <u>1</u> of <u>36</u> sheets attached to Schedule of								(Total of this page)
Creditors Holding Unsecured Nonpriority Claims								

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E M 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. Advanta 401 Market Street Philadelphia, PA 19106	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Advanta 401 Market Street Philadelphia, PA 19106	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 5308-9970-3004-1516 Alegis Group LLP 15 S Main Street Ste 600 Greenville, SC 29601	-	Precautionary-Ancient Rites LLC "Notice Only" Collection for Citibank				0.00
Account No. 5D3197606277 Allied Interstate, Inc. PO Box 361444 Columbus, OH 43236	-	"Notice Only" Collection for Sprint Acct No 197606277				0.00
Account No. 74065 Ambulance Account Services City of Eugene P.O. Box 914 Springfield, OR 97477	W					622.00
Sheet no. <u>2</u> of <u>36</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	622.00

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community			A M O U N T O F C L A I M
			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	
Account No. 3728-693357-05008 American Express 300 South Riverside Plaza 9th Floor South Chicago, IL 60606		-	Friend's Landing			2,152.00
Account No. 001871830 American Recovery Systems, Inc 1699 Wall St.Suite 300 Mount Prospect, IL 60056		-				3,041.00
Account No. AMO Recoveries 7535 NE Ambassador Place Portland, OR 97220		-	"Notice Only"			0.00
Account No. AMO Recoveries PO Box 100040 Kennesaw, GA 30156-9240		-	"Notice Only"			0.00
Account No. 1717760 Anesthesia Service of Eugene 1200 Hilyard St Ste S410 Eugene, OR 97401-8132		-				1,560.00
Subtotal (Total of this page)						6,753.00

Sheet no. 3 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O M M U N I T Y H W J C	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
Account No. 73179 Apria Healthcare P.O. Box 60000 San Francisco, CA 94160	H						101.00
Account No. 4791-0600-0176-7820 Aspire Visa P.O. Box 23007 Columbus, GA 31902	-						Unknown
Account No. 4227-6100-2908-7314 Associates National Bank Department 10-MGAP P.O. Box 15687 Wilmington, DE 19850	-						3,036.00
Account No. ATG Advanced Telcom P.O. Box 12039 Salem, OR 97309	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 4024-2160-0284-5770 Bank of America P.O. Box 53132 Phoenix, AZ 85072-3132	-						1,963.00
Subtotal (Total of this page)							5,100.00

Sheet no. 4 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	Husband, Wife, Joint, or Community			A M O U N T O F C L A I M
		H W J C	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T R O V E R S I E D	
Account No. Benton County Circuit Court 120 NW Fourth Street Corvallis, OR 97330	-	"Notice Only"			0.00
Account No. 4524 Blooming Grove TWP Tax Collection Heanine M Tenzi HC8 Box 8235 Hawley, PA 18428	-				157.00
Account No. 12372143010901278 Bronson & Migiliaccio LLP Attorneys at Law 2361 Wehrie Drive Buffalo, NY 14221	-	"Notice Only: Colletion for Chase Manhattan Bank Acct No 5483410389060977			0.00
Account No. 12372143010901278 Bronson & Migliaccio, LLP Attorneys at Law 2361 Wehire Drive Buffalo, NY 14221	-	Re: Chase Manhattan Bank-#5483-4103-8906-0977			8,686.00
Account No. 5820948-14 CAC Financial Corp. 2601 NW Expressway Suite 1000 East Oklahoma City, OK 73112	-	"Notice Only" Collection for JC Penney			0.00
Subtotal (Total of this page)					8,843.00

Sheet no. 5 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Capital One P.O. Box 60000 Seattle, WA 98190							3,926.00
Account No. 5291-1519-3997-7409 Capital One PO Box 25131 Richmond, VA 23276-0001							0.00
Account No. 4121-7416-7071-6724 Capital One Services P.O. Box 85015 Richmond, VA 23285-5015							945.00
Account No. 0683F1S199 Capital Recovery Service, Inc. PO Box 1170 Fairfax, VA 22030							101.00
Account No. 8691640397 Casey Eye Phys & Surg PO Box 4183 Portland, OR 97208							15.00
Subtotal (Total of this page)							4,987.00

Sheet no. 6 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	H W J C	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	
Account No. 988614 Central Credit Services Inc. P.O. Box 189 Saint Charles, MO 63302		-		Re: First North American National Bank - #4053-5590-0141-8980				0.00	
Account No. 5483-4103-8906-0977 Chase PO Box 9074 Hicksville, NY 11802-9074		-		"Notice Only"				0.00	
Account No. Chase Manhattan Bank P.O. Box 3665 Portland, OR 97208		-		"Notice Only"				0.00	
Account No. Chase Manhattan Bank USA PO Box 659409 San Antonio, TX 78265		-		"Notice Only"				0.00	
Account No. 11616403 Chase Receivables 1247 Broadway Sonoma, CA 95476		-						404.00	
Sheet no. <u>7</u> of <u>36</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims								Subtotal (Total of this page)	404.00

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R H W J C	Husband, Wife, Joint, or Community			A M O U N T O F C L A I M
		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	
Account No. Chelsea Lewandowski 1507 Standard Plaza 1100 SW Sixth Avenue Portland, OR 97204-1016	-	"Notice Only" Attorney for Ford			0.00
Account No. 7293697103 Chevron PO Box 5010 Concord, CA 94524	-				205.00
Account No. Corvallis Clinic PO Box 3005 Corvallis, OR 97339	-	Medical			1,200.00
Account No. 00080850/0160436 Creditors Collection Service PO BOX 628 Albany, OR 97321	-	"Notice Only" Collection for Corvallis Clinic			0.00
Account No. David E. Delsman PO Box 1063 Albany, OR 97321	-	"Notice Only" Attorney for Creditors Collection Service, Inc.			0.00
Sheet no. <u>8</u> of <u>36</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)	1,405.00

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Derrick McGavic 941 West 3rd Eugene, OR 97401							0.00
Account No. Duvera Billing Services PO BOx 235191 Encinitas, CA 92023							0.00
Account No. 1246140142900045906 Dymacol 3070 Lawson Blvd PO Box 9017 Oceanside, NY 11572-9017							41.00
Account No. eCast Settlement Co. 1500 Comme rce Drive Saint Paul, MN 55120							0.00
Account No. Educational Testing Services Order Services Section CN 6785 Princeton, NJ 08541		W					56.00
Subtotal (Total of this page)							97.00

Sheet no. 9 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E H W J C	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
Account No. Elizabeth Nelson 806 Vista Heights Rd El Cerrito, CA 94530	-					0.00
Account No. CG3A80380701617 Encore PO Box 3330 Olathe, KS 66063-3330	-					361.00
Account No. Encore Receivable Management 3445 Main St Springfield, OR 97478	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. England Audio Inc 1711 Willamette Street Ste 302 Eugene, OR 97401-4014	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Eric Olson, MD 6803 P.O. Box 2505 Dept. 501 Los Angeles, CA 90051	W					15.00
Subtotal (Total of this page)						376.00

Sheet no. 10 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O M M U N I T Y H W J C	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
Account No. Eugene Emergency Physicians P.O. Box 2505 Salem, OR 97308	J		eep5175382,eep5183884,				595.00
Account No. Eugene Foot Health Center 1680 Chambers, Suite 201 Eugene, OR 97402	-		Medical Expense				195.00
Account No. Eugeneshopper.com PMB 164 3762 W 11th Ave Eugene, OR 97402	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Evergreen Film Service 1412 W 7th Street Eugene, OR 97402-0441	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Farmers Insurance Prematic Service P.O. Box 25368 Santa Ana, CA 92799-5368	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Subtotal (Total of this page)							790.00

Sheet no. 11 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	Husband, Wife, Joint, or Community		D A T E I N C U R R E D	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
		H W	J C				
Account No. Fifth Third Leasing Company PO Box 6167 Carol Stream, IL 60197-6167	-			Precautionary-Ancient Rites LLC "Notice Only"			0.00
Account No. Financial Pacific Leasing Dept 1 PO Box 34935 Seattle, WA 98124-1935	-			Precautionary-Ancient Rites LLC "Notice Only"			0.00
Account No. CG8898307000649 Financial Recovery Services PO Box 3859808 Minneapolis, MN 55438-5908	-			"Notice Only" Collection for JC Penney (now Arrow Financial); Napa Monogram Credit Card			0.00
Account No. 4479-4506-9971-3096 First National Collection 3631 Warren Way Reno, NV 89509	-			"Notice Only" Collection for Providian			0.00
Account No. 4254-4904-0114-7739 First National Collection Bure 3631 Warren Way Reno, NV 89509	-			"Notice Only" Collection for Providian Acct No 4254490401147739			0.00
Subtotal (Total of this page)							0.00

Sheet no. 12 of 36 sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community			A M O U N T O F C L A I M
			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	
Account No. 4053-5590-0141-8980 First North American Bank PO Box 7621 San Francisco, CA 94120-7621	-	-	"Notice Only"			0.00
Account No. Fleek McElhany Merwin Shotola 975 Willagillespie Rd Eugene, OR 97401	-	-	"Notice Only" Precautionary-Ancient Rites LLC Account No: 45980000; 11350; 26000; 52680			12,300.00
Account No. Ford Motor Credit Company PO Box 7289 Pasadena, CA 91109-7389	-	-	Judgment in Lane County Ancient Rites LLC			14,006.42
Account No. 0650050162545 Fred Meyer PO Box 103065 Roswell, GA 30076-9065	-	-				0.00
Account No. Friends Landing 38684 Upper Camp Creek Rd Springfield, OR 97478	-	-	Precautionary-Ancient Rites LLC "Notice Only"			0.00
Subtotal (Total of this page)						26,306.42

Sheet no. 13 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	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	
Account No. Fuller Printing Accounting Department PO Box 717 Corvallis, OR 97339	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00	
Account No. Galaxy Mall 754 E Technology Avenue Orem, UT 84097	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00	
Account No. CG8H50050162545 GC Services PO Box 3724 Knoxville, TN 37927	-		"Notice Only" Collection for Fred Meyer				0.00	
Account No. Gerald McDonnell & Assoc PC 1 East Broadway Ste 300 Eugene, OR 97401-3111	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00	
Account No. Gleaves Swearingen Potter P.O. Box 1147 975 Oak Street, Suite 800 Eugene, OR 97401	-		"Notice Only"				0.00	
Sheet no. <u>14</u> of <u>36</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	0.00

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Gray Design Studio 440 Charnelton St Eugene, OR 97401		-					0.00
Account No. 2792 Gregory Richterich MD PO Box 2739, Unit 8 Portland, OR 97208-2739		-					70.00
Account No. H & L Services, Inc. Trustee 1111 Thirde Avenue #3400 Seattle, WA 98101		-					0.00
Account No. H2-21-75-34 Harborview Medical Center P.O. Box 34001 Seattle, WA 98124		H					211.00
Account No. 35540-010800GB Hassen Ghandour, MD 960 N 16th, Ste.303 Springfield, OR 97477		W					75.00
Subtotal (Total of this page)							356.00

Sheet no. 15 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. 716020-6 Herring Fitzgerald & Fechtel 960 N 16th Ste.207 Springfield, OR 97477		W					30.00	
Account No. Irv Borenstein Attorney at Law 3151 S Vaughn Way Ste 412 Aurora, CO 80014		-	Precautionary-Ancient Rites LLC "Notice Only"				0.00	
Account No. 8307000649 JC Penney P.O. Box 32000 Orlando, FL 32890-0004		-					0.00	
Account No. 316197-2 Kathleen M. Fitzgerald 960 N 16th St. Ste. 303 Springfield, OR 97477		H					186.00	
Account No. 93621100004717 Keybank USA PO Box 4722 Cleveland, OH 44101		-					9,930.00	
Sheet no. <u>16</u> of <u>36</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	10,146.00

In re WhiteWind WEAVER
Debtor

Case No. _____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	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
Account No. Kinko's PO Box 530257 Atlanta, GA 30353-0257		-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Knight Communications 541 Antelope Way Eugene, OR 97401		-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Les Schwab Tire Centers Main Office PO Box 667 Prineville, OR 97754		-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Lightworks Photography David Simone 84569 Laughlin Rd Eugene, OR 97401		-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. FISWH000 Louis A Marzano MD 923 Country Club Rd #100 Eugene, OR 97401		-						2,073.00
Subtotal (Total of this page)								2,073.00

Sheet no. 17 of 36 sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	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
Account No. Mac Help 4792 Hermann Street Eugene, OR 97404		-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Marie Freyre 38684 Upper Camp Creek Rd. Springfield, OR 97478		-		Personal Loan				30,000.00
Account No. Mark and Margery Ullmer 304 Nottingham Knoll Fort Mill, SC 29715		-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. MBNA America PO Box 15026 Wilmington, DE 19850-5026		-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 02695 McKenzie Crossing Ortho Phy 5709 Upper Camp Creek Springfield, OR 97478		-						365.00
Subtotal (Total of this page)								30,365.00

Sheet no. 18 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R H W J C	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
Account No. McKenzie Family Practice 1640 G Street Springfield, OR 97477	J	Acct #s 18659-19139-19191-19339				371.00
Account No. McKenzie Medical Imaging 960 North 16th, Ste. 105 Springfield, OR 97477	J	Account #137750-01--117843-00				0.00
Account No. 20871 McKenzie Surgical Group, PC 960 North 16th Street, Suite 304 Springfield, OR 97477	-					20.00
Account No. McKenzie-Willamette Hospital 1460 G Street Springfield, OR 97477	-	Account #s -0120500111-0121200310-114600098 -0120800048-0127700096-0107400119-0121400 052-0110000030-0124800347-0123000022-0121 100107-0112400189-0111700302-0117400111-0 128300193				11,352.00
Account No. 80962951 Meier & Frank PO Box 52096 Phoenix, AZ 85072-2096	-					2,500.00
					Subtotal (Total of this page)	14,243.00

Sheet no. 19 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O M M U N I T Y H W J C	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
Account No. Midwest Sign & Screen Printing 45 E Maryland AVE Saint Paul, MN 55117-4610	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Monogram Credit Services POB 103141 Roswell, GA 30076	-	"Notice Only"				0.00
Account No. Monterey Financial Services, I 4095 Avenida da la Plata Oceanside, CA 92056	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 18097 MR Imaging Associates 960 No. 16th, Suite 10 Springfield, OR 97477	H					1,520.00
Account No. 01703236 MRS 3 Executive Campus Ste 400 Cherry Hill, NJ 08002	-	"Notice Only" Collection for First American National Bank Acct No 4053559001418980				0.00
					Subtotal (Total of this page)	1,520.00

Sheet no. 20 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R H W J C	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
Account No. Nationwide Credit PO Box 740640 Atlanta, GA 30374-0640	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 01365110384 Nationwide Credit, Inc. 3835 N Freeway Blvd, Ste 100 Sacramento, CA 95834-1954	-	"Notice Only" Collection for American Express Acct No 373272124871009				0.00
Account No. Nationwide Credit, Inc. 2015 Vaughn Rd. Bldg 400 Kennesaw, GA 30144-7802	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 197606277/42SOC/CAP4022372712 NCO Financial Systems, Inc. PO Box 41457 Philadelphia, PA 19101	-	"Notice Only" Collection for Sprint, Compuserve, Capital One				0.00
Account No. 21876 Neurology Associates 1200 Hilyard St. S-420 Eugene, OR 97401	H					63.00
Subtotal (Total of this page)						63.00

Sheet no. 21 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 54948901 Northland Group Inc. PO Box 390846 Minneapolis, MN 55439						0.00
Account No. 20343 Oral and Maxillofacial Surgeon 1515 Oak Street Eugene, OR 97401		H				199.00
Account No. Orchard Bank PO Box 650636 Dallas, TX 75265-0636						0.00
Account No. 5413-3650-0090-5650 Orchard Bank Master Card CCS Bank P.O. Box 98724 Las Vegas, NV 89193						0.00
Account No. 19830-50384- Oregon Cardiology, PC 677 E 12th Ave, Suite 400 Eugene, OR 97401		J				2,934.00
Subtotal (Total of this page)						3,133.00

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	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
Account No. 32431151-700993299-3849481 Oregon Health Sciences Univ. University Hospital & Clinics P.O. 575 Portland, OR 97207		W					6,057.13
Account No. 023099 Oregon Medical Group P.O. Box 1648 Eugene, OR 97440		H					211.00
Account No. See below Oregon Medical Laboratories 722 East 11th Ave Eugene, OR 97440		W	EL20711242,EA10394357,EA10394419, EH10051701,EA10394419,EL10808703, EL20829467,EL10527758,EL10802755				1,080.00
Account No. Oregon State University Office of Trademark Licensing 312 Kerr Ads Corvallis, OR 97330		-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 633468 Orthopedic Healthcare NW P.O. Box 11707 Eugene, OR 97440		W					45.00
Subtotal (Total of this page)							7,393.13

Sheet no. 23 of 36 sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O M M U N I T Y H W J C	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
Account No. 3272124870 OSI Collection Services PO Box 43350 Phoenix, AZ 85080-3350	-	"Notice Only" Collection for American Express Acct No 37372124871009				0.00
Account No. 3952197119 OSI Collection Services Inc PO Box 8800 Jacksonville, FL 32239	-	Re Gulf State				2,283.00
Account No. 7039001159805180 OSI Collection Services Inc PO Box 771548 Houston, TX 77215	-	Re: Unocal - T LA Basin Account No 7039001159805180				424.00
Account No. 41TUC1518092201BR Pacific Coast Credit 2620 River Rd. Ste B Eugene, OR 97404	-	Collection for Todd Ducker				81.00
Account No. 17019 Pacific Womens Center, LLC 151 W 7th AVE, Ste. 110 Eugene, OR 97401	W					5.00
Subtotal (Total of this page)						2,793.00

Sheet no. 24 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER
Debtor

Case No. _____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O M M U N I T Y H W J C	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
Account No. PacInfo PO Box 5447 Eugene, OR 97405	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Paradise Media PO Box 23605 Eugene, OR 97402	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. EU22075364 Pathology Consultants 755 East 11th, Stee 200 Eugene, OR 97401	-		Medical Expense				242.00
Account No. Paula Insurance PO Box 51145 Los Angeles, CA 90051-5445	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 549FIS3849481110 Peter Mollenholt MD Univ. Anesthesiologists, PC P.o. Box 4008 Portland, OR 97208	W						464.00
Subtotal (Total of this page)							706.00

Sheet no. 25 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 394998 Phillips & Cohen Associates LT 695 Rancocas Rd Mount Holly, NJ 08060	-					807.00
Account No. 93087179 Physical Therapy Services 1310 Coburg Rd. #5 Eugene, OR 97401	W					127.00
Account No. Z3706&3711 Pioneer Chiropractic Clinic 105 W "Q" Street Springfield, OR 97477	-					426.00
Account No. Premium Financing Specialists PO Box 8097 Portland, OR 97207-8097	-					0.00
Account No. Professional Credit 2892 Crescent Avenue Eugene, OR 97408	-					0.00
<p align="right">Subtotal (Total of this page)</p>						1,360.00

Sheet no. 26 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community	C O N T R I B U T I O N	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Professional Credit 2892 Crescent Avenue Eugene, OR 97408		-					0.00
Account No. 4254-4904-0114-7739 Providian Financial PO Box 9539 Manchester, NH 03108-9539		-					3,036.00
Account No. Prudential Real Estate Attn: Kristin Noble 3333 Michelson Drive, Suite 10		-					0.00
Account No. 5419989056 Qwest P.O. Box 12480 Seattle, WA 98111-4480		-					176.00
Account No. 63*287262-63*286330 Radiology Associates, PC P.O. Box 25 Eugene, OR 97440		H					300.00
Subtotal (Total of this page)							3,512.00

Sheet no. 27 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	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
Account No. 02751004157174310003706 Ramsey Waite Co 4258 Franklin Blvd Eugene, OR 97403	-						461.00
Account No. 4053-5590-0141-8980 Recovery Partners II, LLC PO Box 9185 Minneapolis, MN 55480-9185	-						5,292.00
Account No. Register Guard 3500 Chad Drive Eugene, OR 97408	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Register Guard PO Box 10188 Eugene, OR 97440	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Robert Reid 88519 Periwinkle Rd Springfield, OR 97478	-		Promissory Note via Discover Card 6011005510657; MBNA Card; First USA Card				72,500.00
<p align="right">Subtotal (Total of this page)</p>							78,253.00

Sheet no. 28 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E D E B T O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Ron K. Ewert 750 North 14th Street Springfield, OR 97477		-					180.00
Account No. Sacred Heart Medical Center P.O. Box 569 Eugene, OR 97440		H					25,197.00
Account No. Sandra & Martin Starr Paulownia Farms 3060 McKendrick Eugene, OR 97405		-	Loan				15,000.00
Account No. Sanford and Chrysta Anderson 1863 Pioneer Parkway E. #131 Springfield, OR 97477		-	Personal and Business Loans				141,495.00
Account No. 14458 Scott A. Cherne, MD Pacific Clearvision Institute P.O. Box 10888 1125 Darlene Ln Eugene, OR 97440		W					15.00
Subtotal (Total of this page)							181,887.00

Sheet no. 29 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E H W J C	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
Account No. Shapiro & Kreisman 201 NE Park Plaza Drive #150 Vancouver, WA 98684	-	"Notice Only"				0.00
Account No. Sierra Springs 802 NE Davis St Portland, OR 97232-2998	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. A14646 Sleep Disorder & Neurology 4725 Village Plaza Lp #101 Eugene, OR 97440	-					51.00
Account No. Sprint Residential Local Srvc PO BOx 7086 London, KY 40742	-					Unknown
Account No. Staples PO Box 9027 Des Moines, IA 50368-9027	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Subtotal (Total of this page)						51.00

Sheet no. 30 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	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
Account No. Steve Behrends Behrends Swingdoff Haines PO Box 10552 Eugene, OR 97401	-			Attorney Fees				1,518.00
Account No. SUB 250 North A Street Springfield, OR 97477	-			Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Sullivan Mark 700 N Mills Street Creswell, OR 97426	-			Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Sun-Net 4227 A Main Street Springfield, OR 97478	-			Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. Templar Financial Corporation 5122 Avenida Encinas Ste B Carlsbad, CA 92008	-			Precautionary-Ancient Rites LLC "Notice Only"				0.00
Subtotal (Total of this page)								1,518.00

Sheet no. 31 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. The Carpet Company 1585 West 7th Ave Eugene, OR 97402		-					0.00
Account No. FIJAOSFO Therapeutic Associates Gateway Pt P.O. Box 5969 Portland, OR 97228		-					643.00
Account No. 20755 Todd Ducker, DMD 1515 Oak St Eugene, OR 97401		H					Unknown
Account No. 1000-3706 Tom J. Ruckman, DC PC 105 W "Q" Street Springfield, OR 97477		-					251.00
Account No. 9932 Troy K Richey MD 1605 "G" Street Springfield, OR 97477		-					15.00
Subtotal (Total of this page)							909.00

Sheet no. 32 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER
 Debtor

Case No. _____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	COORDINATOR H W J C	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. U-Lane-O Credit Union 488 East 11th Eugene, OR 97401	-	"Notice Only"				0.00
Account No. 392878 U-Lane-O Credit Union PO Box 1493 Eugene, OR 97440-1493	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 115980518 Union 76 Credit Services 4500 S 129th East Ave Ste 175A Tulsa, OK 74134-5870	-					405.00
Account No. 5491-1300-2155-1189 Universal Bank NA PO Box 44167 Jacksonville, FL 32231-4167	-	Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 1640397 University Medical Group 2241 Lloyd Center Portland, OR 97232	-					149.00
Subtotal (Total of this page)						554.00

Sheet no. 33 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community			A M O U N T O F C L A I M
			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	
Account No. University of California 2150 Kittredge #3C Berkeley, CA 94720-1928	-	-	Precautionary-Ancient Rites LLC "Notice Only"			0.00
Account No. University of Oregon PO Box 3237 Eugene, OR 97401	-	-	Precautionary-Ancient Rites LLC "Notice Only"			0.00
Account No. Urology Healthcare PC 1611 J Street Springfield, OR 97477	-	-	Precautionary-Ancient Rites LLC "Notice Only"			0.00
Account No. US Bank PO Box 6340 Fargo, ND 58125-6340	-	-	Precautionary-Ancient Rites LLC "Notice Only"			0.00
Account No. US Communication PO BOx 12480 Seattle, WA 98111-4480	-	-	Precautionary-Ancient Rites LLC "Notice Only"			0.00
					Subtotal (Total of this page)	0.00

Sheet no. 34 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **WhiteWind WEAVER**

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Valley Credit Services 960 Broadway NE, Ste 4 Salem, OR 97301							0.00
Account No. Valley Credit Services 960 Broadway NE, Ste 4 Salem, OR 97301							0.00
Account No. 3653228 Van Ru Credit Corporation 10024 Skokie Blvd Ste 2 Skokie, IL 60077-1109							845.00
Account No. 77856584 Vita Power PO Box 9 Hicksville, NY 11802-0977							25.00
Account No. Washington Mutual 1191 2nd Street Seattle, WA 98101							344,867.00
Subtotal (Total of this page)							345,737.00

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	Husband, Wife, Joint, or Community			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.						
Account No. Wellsprings Friends School 3590 W 18th Avenue Eugene, OR 97402		-	Attn: Nicole Swan (\$195) Attn: Peter Musumeci (\$1,945)						2,140.00
Account No. Willamette Graystone Inc. PO Box 7816 Eugene, OR 97401		-	Precautionary-Ancient Rites LLC "Notice Only"						0.00
Account No. 87882351B/87858874B Wolpoff & Abramson, LLP 2 Irvington Center 702 King Farm Blvd Rockville, MD 20850		-	"Notice Only" Collection for Fred Meyer						0.00
Account No. Xerox PO Box 660501 Dallas, TX		-	Precautionary-Ancient Rites LLC "Notice Only"						0.00
Account No. 									

Sheet no. 36 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) **2,140.00**

Total
(Report on Summary of Schedules) **746,128.55**

In re WhiteWind WEAVER

Case No. _____

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H W J C	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
Account No. Washington Mutual 1191 2nd Street Seattle, WA 98101	-						344,867.00
Account No. Wellsprings Friends School 3590 W 18th Avenue Eugene, OR 97402	-		Attn: Nicole Swan (\$195) Attn: Peter Musumeci (\$1,945)				2,140.00
Account No. Willamette Graystone Inc. PO Box 7816 Eugene, OR 97401	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00
Account No. 87882351B/87858874B Wolpoff & Abramson, LLP 2 Irvington Center 702 King Farm Blvd Rockville, MD 20850	-		"Notice Only" Collection for Fred Meyer				0.00
Account No. Xerox PO Box 660501 Dallas, TX	-		Precautionary-Ancient Rites LLC "Notice Only"				0.00

Sheet no. 36 of 36 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) **347,007.00**

Total
(Report on Summary of Schedules) **716,433.55**

3. Payments to creditors

- None a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
N/A		\$0.00	\$0.00

- None b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
N/A		\$0.00	\$0.00

4. Suits and administrative proceedings, executions, garnishments and attachments

- None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Creditors Collection Service, Inc. vs. James Benjamin and WhiteWind Swan Fisher Case No 01-60436	Collection	Benton County Circuit Court	Judgment
Capital One Bank vs Susan K. Musumeci Case No 120305317	Collection	Multnomah County Circuit Court	Judgment
Fisher vs. Fisher Case No 15-03-01408	Divorce Judgment	Lane County	Judgment entered 3-12-03
Ford vs. Fisher Case No 16-02-20819C	Civil Contract		Judgment
Case No 02-2-20789-8SEA		Superior Court of Washington County of Ring	

- None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the **six-year period** immediately preceding the commencement of the case.

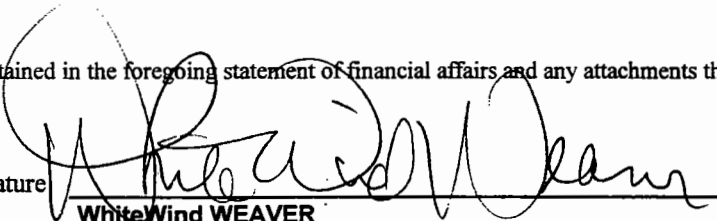
NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 8-11-2003

Signature 
WhiteWind WEAVER
Debtor

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

United States Bankruptcy Court
District of Oregon

In re WhiteWind WEAVER

Debtor(s)

Case No. _____

Chapter 7

CERTIFICATION PURSUANT TO LBR 1001-1.G

I certify that the foregoing documents have been prepared by a computer and conform to versions of the Official Bankruptcy Forms available and applicable at this time.

The software utilized is Best Case Bankruptcy, developed by Best Case Solutions, Inc., which is a computer software format authorized by the Clerk of the Court.

Dated: 8-12-03



Tracy Trunnell 99382

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