

UNITED STATES BANKRUPTCY COURT NORTHERN District of CALIFORNIA		VOLUNTARY PETITION															
IN RE (Name of debtor - If individual, enter Last, First, Middle) MAGIC EDGE, INC.		NAME OF JOINT DEBTOR (Spouse) (Last, First, Middle)															
ALL OTHER NAMES used by the debtor in the last 6 years (include married, maiden, and trade names)		ALL OTHER NAMES used by the joint debtor in the last 6 years (include married, maiden, and trade names)															
SOC. SEC./TAX I.D. NO. (If more than one, state all) 77-0255962		SOC. SEC./TAX I.D. NO. (If more than one, state all)															
STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code) 1245 Space Park Way Mountain View, CA 94043		STREET ADDRESS OF JOINT DEBTOR (No. and street, city, state, and zip code)															
COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS Santa Clara		COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS															
MAILING ADDRESS OF DEBTOR (if different from street address)		MAILING ADDRESS OF JOINT DEBTOR (if different from street address)															
LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (if different from address listed above)		VENUE (Check one box) <input checked="" type="checkbox"/> 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. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.															
INFORMATION REGARDING DEBTOR (Check applicable boxes)																	
TYPE OF DEBTOR <input type="checkbox"/> Individual <input type="checkbox"/> Corporation Publicly Held <input type="checkbox"/> Joint (Husband & Wife) <input checked="" type="checkbox"/> Corporation Not Publicly Held <input type="checkbox"/> Partnership <input type="checkbox"/> Municipality <input type="checkbox"/> Other _____		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 DEBT <input type="checkbox"/> Non-Business/Consumer <input checked="" type="checkbox"/> Business - Complete A & B below		FILING FEE (Check one box) <input checked="" type="checkbox"/> Filing fee attached <input type="checkbox"/> 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.															
A. TYPE OF BUSINESS <input type="checkbox"/> Farming <input type="checkbox"/> Transportation <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Professional <input type="checkbox"/> Manufacturing/ <input type="checkbox"/> Construction <input type="checkbox"/> Retail/Wholesale Mining <input type="checkbox"/> Real Estate <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input checked="" type="checkbox"/> Other Business		NAME AND ADDRESS OF LAW FIRM OR ATTORNEY Murray & Murray, A Professional Corporation 3030 Hansen Way, Suite 200 Palo Alto, CA 94304-1009 Telephone No. 650-415-852-9000															
B. BRIEFLY DESCRIBE NATURE OF BUSINESS Designer and manufacturer of simulation games		NAME(S) OF ATTORNEY(S) DESIGNATED TO REPRESENT DEBTOR (Print or Type Names) David S. Murray Stephen T. O'Neill															
STATISTICAL/ADMINISTRATIVE INFORMATION (28 U.S.C. § 604)																	
(Estimates only) (Check applicable boxes)																	
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> 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 <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">1-15</td> <td style="width: 15%;">16-49</td> <td style="width: 15%;">50-99</td> <td style="width: 15%;">100-199</td> <td style="width: 15%;">200-999</td> <td style="width: 15%;">1000-over</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				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"/>		
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
ESTIMATED ASSETS (in thousands of dollars) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Under 50</td> <td style="width: 15%;">50-99</td> <td style="width: 15%;">100-499</td> <td style="width: 15%;">500-999</td> <td style="width: 15%;">1000-9999</td> <td style="width: 15%;">10,000-99,000</td> <td style="width: 15%;">100,000-over</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				Under 50	50-99	100-499	500-999	1000-9999	10,000-99,000	100,000-over	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Under 50	50-99	100-499	500-999	1000-9999	10,000-99,000	100,000-over											
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
ESTIMATED LIABILITIES (in thousands of dollars) <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Under 50</td> <td style="width: 15%;">50-99</td> <td style="width: 15%;">100-499</td> <td style="width: 15%;">500-999</td> <td style="width: 15%;">1000-9999</td> <td style="width: 15%;">10,000-99,000</td> <td style="width: 15%;">100,000-over</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				Under 50	50-99	100-499	500-999	1000-9999	10,000-99,000	100,000-over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Under 50	50-99	100-499	500-999	1000-9999	10,000-99,000	100,000-over											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>											
ESTIMATED NUMBER OF EMPLOYEES - CH. 11 & 12 ONLY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">0</td> <td style="width: 15%;">1-19</td> <td style="width: 15%;">20-99</td> <td style="width: 15%;">100-999</td> <td style="width: 15%;">1000-over</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				0	1-19	20-99	100-999	1000-over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
0	1-19	20-99	100-999	1000-over													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
ESTIMATED NUMBER OF EQUITY SECURITY HOLDERS - CH. 11 & 12 ONLY <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">0</td> <td style="width: 15%;">1-19</td> <td style="width: 15%;">20-99</td> <td style="width: 15%;">100-499</td> <td style="width: 15%;">500-over</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				0	1-19	20-99	100-499	500-over	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													

96-56287-JRG-7

DEBTOR: MAGIC EDGE, INC.

DEBTOR'S ATTY: S. O'NEILL

JUDGE: HON. J. GRUBE

TRUSTEE: M. POONJA

341 MEETING: 09/26/96. 2:30PM - ust

CHAPTER: 7 COUNTY: SANTA CLARA

FILED 08/21/96 - 09:55AM

RELIEF ORDERED

CLERK, U.S. BANKRUPTCY COURT

NORTHERN DISTRICT OF CALIFORNIA

SAN JOSE DIVISION

DEPUTY: am

RECEIPT NO: 5-6-238809 \$175

THE ABOVE SPACE FOR COURT USE ONLY

In re MAGIC EDGE, INC.
Debtor

Case No. _____
(if known)

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	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
Thomas Gastel 1242 Carl Street San Francisco, CA 94117 ACCOUNT NO.			Wages				6,735.44
Vladimir Gurevich 180 San Tomas Aquino #21 Campbell, CA 95008 ACCOUNT NO.			Wages				21,430.55
Edwin Jago 1311 Blewett Ave San Jose, CA 95125 ACCOUNT NO.			Wages				17,201.40
Michael Khoury 426 5th Ave San Francisco, CA 94118 ACCOUNT NO.			Wages				6,300.00
Robert Laurie 919 Mowry Ave, #66 Fremont, CA 94536 ACCOUNT NO.			Wages				12,930.57
Subtotal ► (Total of this page)							\$64,597.96

In re MAGIC EDGE, INC.
Debtor

Case No. _____
(if known)

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	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
Lambda Electronics, Inc. Attn Dina Perez 515 Broadhollow Rd Melville, NY 11747 ACCOUNT NO.							1,993.84
Robert Laurie 919 Mowry Ave #66 Fremont, CA 94536 ACCOUNT NO.							79.33
Birk Lee 26799 Elena Road Los Altos Hills, CA 94027 ACCOUNT NO.							381.74
McCord Mfg. Co. Attn Accounts Receivable 1695 Stone Creek Drive San Jose, CA 95132 ACCOUNT NO.							562.99
Subtotal ► (Total of this page)							\$3,017.90