

UNITED STATES BANKRUPTCY COURT
DISTRICT OF DELAWARE

PROOF OF CLAIM

Name of Debtor:

CLA of Minnesota LLC

Case Number:

11-13869-MFW

NOTE: See reverse and attached for List of Debtors/Case Numbers/important details. Other than claims under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for Administrative Expenses arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503(a).

Name of Creditor (the person or other entity to whom the debtor owes money or property):

Wafa Mousa

Name and address where notices should be sent:

1350 Coach Rd #119
saint paul, MN 55108

RECEIVED

AUG 15 2012

BMC GROUP

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number 629 227-0795 email: fatoon1@yahoo.com

Name and address where payment should be sent (if different from above):

Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number (if known):

82-CO-12-936

Filed on: July 27, 2012

Payment Telephone Number () email:

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 2725.00 → see attachment.

If all or part of your claim is secured, complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. BASIS FOR CLAIM: (See instruction #2)

Failed to perform promises breach of contract.

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:

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3a. Debtor may have scheduled account as:

CLA of Minnesota F/K/A of Minnesota

(See instruction #3a)

3b. Uniform Claim Identifier (optional):

(See instruction #3b)

4. SECURED CLAIM: (See instruction #4)

Check the appropriate box if your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information.

Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$

Nature of property or right of setoff:

Basis for Perfection:

Describe:

Amount of Secured Claim: \$

Real Estate Motor Vehicle Other

Amount Unsecured: \$

Value of Property: \$

Annual Interest Rate: % Fixed or Variable (when case was filed)

5. Amount of Claim Entitled to Administrative Expense status under 11 U.S.C. § 503(b)(9) or Priority under 11 U.S.C. § 507(a). If any part of the claim falls into one of the following categories, check the box specifying the administrative expense or priority and state the amount.

Amount entitled to priority: \$

Amount entitled to administrative expense under 11 U.S.C. § 503(b)(9): \$

You MUST specify the priority of the claim:

Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).

Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7).

Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).

Wages, salaries, or commissions (up to \$11,725*), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).

Other - Specify applicable paragraph of 11 U.S.C. § 507(a) ().

Value of goods received by the debtor within 20 days before the date of the bankruptcy filing - 11 U.S.C. § 503(b)(9).

* Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

ALC Holdings



00268

6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

7. DOCUMENTS: Attached are redacted copies of documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and definition of "redacted").

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before __:00 pm, prevailing Eastern Time on _____, 2012 for Non-Governmental Claimants OR on or before _____, 2012 for Governmental Units.

BY MAIL TO:

BMC Group, Inc.
Attn: CLA Hold LLC Claims Processing
PO Box 3020
Chanhassen, MN 55317-3020

BY MESSENGER OR OVERNIGHT DELIVERY TO:

BMC Group, Inc.
Attn: CLA Hold LLC Claims Processing
18675 Lake Drive East
Chanhassen, MN 55317

8. SIGNATURE: (See instruction #8)

Check the appropriate box.

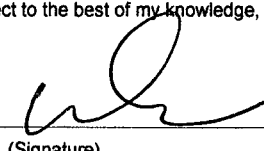
- I am the creditor. I am the creditor's authorized agent.
(Attach copy of power of attorney, if any.) I am the trustee, or the debtor,
or their authorized agent. I am a guarantor, surety, indorser, or other codebtor.
(See Bankruptcy Rule 3004.) (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Wafa Mousa

Title: _____

Company: _____



8/12/12

(Signature)

(Date)

Address and telephone number (if different from notice address above):

1350 Coach Rd #119
Saint Paul, MN 55108
620-227-0795 fatoon1@yahoo.com

Telephone number: _____ email: _____

520-227-0795 fatoon1@yahoo.com

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

1
State of Minnesota
Washington County

District Court
Tenth Judicial District

Court File Number: 82-CO-12-936

Case Type: Conciliation

**Notice of Conciliation Court
Order and Judgment**

Creditor.
Wafa MOUSA
1350 COACH RD #119
SAINT PAUL MN 55108

Wafa Mousa vs American Laser Skin Care

Enclosed is your copy of Order for Judgment on Claim and Counterclaim. If the court has ordered that either party owes monies or property on this matter and if it is satisfied in full we encourage either the plaintiff or the defendant to file with the court a satisfaction of Conciliation Court Claim which must be signed by the Creditor. A copy of this document has been forwarded to the Creditor.

Dated: July 26, 2012

Annette Fritz
Court Administrator
Washington County District Court
14949 - 62nd St. N; PO Box 3802
Stillwater MN 55082
651-430-6263

cc: American Laser Skin Care

Wafa Mousa vs American Laser Skin Care

Order for Judgment on Claim and Counterclaim

Appearances: Plaintiff Defendant Neither Party Contested Default

Upon evidence received, IT IS ORDERED:

Plaintiff is entitled to judgment against Defendant for the sum of \$ 2,650., plus fees of \$ 70.00, disbursements of \$ _____ and conditional costs of \$ _____, for a total of \$ 2,720.00.

Judgment shall be entered in favor of _____ (without damages).

_____'s claim is dismissed without prejudice.

_____'s claim is dismissed without prejudice.

_____'s claim is dismissed with prejudice.

_____ shall immediately return _____ to the _____

and that the Sheriff of the county in which the property is located is authorized and directed to effect repossession of such property according to Minn. Stat. § 491A.01, subd. 5, and turn the property over to _____

Other / Memo: _____

Dated: 7-26-12 Judge: _____

JUDGMENT is declared and entered as stated in the Court's Order for Judgment set forth above, and the Judgment shall become finally effective on the date specified in the notice of judgment set forth below.

Dated: 7-27-12 Court Administrator/Deputy: _____

NOTICE: THE PARTIES ARE NOTIFIED that Judgment has been entered as indicated above, but the Judgment is stayed by law until 8-20-12 (Time) 4:30 p.m. (to allow time for an appeal/removal if desired).

THE PARTIES ARE FURTHER NOTIFIED that if the case is removed to District Court and the removing party does not prevail as provided in Rule 524 of the Minnesota General Rules of Practice for the District Courts, the opposing party will be awarded \$50 as costs.

Dated: 7-27-12 Court Administrator/Deputy: _____

Transcript of Judgment: I certify that the above is a correct transcript of the Judgment entered by this Court.

Dated: _____ Court Administrator/Deputy: _____

County

Judicial District

Case No.

82-00-12-936

STATEMENT OF CLAIM AND SUMMONS

Plaintiff #1

Name Wafa Mousa #119
Address 1350 Coach Rd #119
City/State/Zip Saint Paul, MN 55108

Defendant #1

Name American Laser Skin Care
Address 7616 Currier Blv. Suite 245
City/State/Zip Woodbury, MN 55125

Plaintiff #2

Name
File #
Address F WASHINGTON COUNTY F
DISTRICT COURT
City/State/Zip
JUN 11 2012
VS

Defendant #2

Name COURT ADMINISTRATOR
Address By Deputy
City/State/Zip

PLEASE PRINT

PLAINTIFF'S STATEMENT OF CLAIM

1. The Defendant(s) owe(s) me \$ 2650, plus filing fees and costs of \$ 75, for a total of \$ 2725 because (state what happened and when it happened):

I paid \$1000 for E-Matrix its 4 treatments and I had all my treatments done. The treatment purpose to improve skin texture (acne scarring, pores and wrinkles) and didn't do anything for me. I also paid \$1650 for smoothing the skin and reduce the appearance of cellulite and didn't do anything for me to improve my body or my face.

2. The Defendant(s) has/have the following property that belongs to me (list property), valued at \$, plus filing fees and costs of \$, for a total of \$

I want the Court to order this property returned to me or make the Defendant(s) pay me money for the value of the property.

3. I believe the person(s) I am suing is/are at least 18 years old and not in the military service.

Defendant #1 date of birth Defendant #2 date of birth

4. I understand that if I do not come to court on my hearing date, my case will be dismissed and I may have to pay money to the Defendant(s) on any counterclaim that has been filed.

NOTARY STAMP OR COURT SEAL

SWORN TO BEFORE ME ON:

THE ABOVE STATEMENT OF CLAIM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Date: 6/11/12
Signature: [Signature]

Signature: [Signature]
Name: Wafa Mousa
Title (if representative):
Telephone: 520-227-0795
Plaintiff #1 date of birth
Plaintiff #2 date of birth

Notice of Settlement

The above-entitled case having been settled, the same may be and hereby is dismissed with my consent.

Date: Plaintiff's Signature:

SUMMONS: IMPORTANT NOTICE TO THE PARTIES

You must come to court for a hearing on Date at Time .m. at

Location/Address

If you do not come to court for this hearing, you may lose the case and have to pay money to the other party.

Dated: Court Administrator/Deputy

Case No. 82-00-12-936

Wafa Mousa
1350 Coach Rd #119
Saint Paul, MN 55108

SAINT PAUL MN 550
14 AUG 2012 PM 2 L



Justice
FOREVER

Equality
FOREVER

RECEIVED
AUG 15 2012
BMC GROUP

BMC Group, Inc
ATT: CLA Hold LLC claims
processing

PO BOX 3020

Chanhassen, MN 55317

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