UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION

PROOF OF CLAIM

YOUR CLAIM IS SCHEDULED AS

Schedule/Claim ID s398

In re
ATA Airlines, Inc

Case Number
04-19868

NOTE This form should not be used to make a claim for an administrative expense 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

Name of Creditor and Address

07811924051925

BROWARD COUNTY
320 TERMINAL DR
FORT LAUDERDALE FL 33315-3608

Creditor Telephone Number ( ) (954) 359-6113

☐ 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 box if you have never received any notices from the bankruptcy court in this case

☐ Check box if this address differs from the address on the envelope sent to you by the court

The amounts reflected above constitute your claim as scheduled by the Debtor or pursuant to a filed claim If you agree with the amounts set forth herein and have no other claim against the Debtor you do not need to file this proof of claim EXCEPT as stated below

If the amounts shown above are listed as Contingent Unliquidated or Disputed a proof of claim must be filed

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 Federal Tax ID
59-6000531

Account Or Other Number By Which Creditor Identifies Debtor

Check here if this claim ☐ replaces or ☐ amends a previously filed claim dated _____

1 BASIS FOR CLAIM

☐ Goods sold
☐ Services performed
☐ Money loaned
☐ Personal injury/wrongful death
☐ Taxes
☒ Other (describe briefly)
Airport Fees
☐ Retiree benefits as defined in 11 U S C § 1114(a)
☐ Wages salaries and compensation (Fill out below)
Last four digits of SS # _____
Unpaid compensation for services performed from _____ (date) to _____ (date)

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED $ 33,727.75 (unsecured) $ _____ (secured) $ _____ (unsecured priority) $ _____ (Total)

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 7 below See attached invoices.

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

5 SECURED CLAIM

☐ Check this box if your claim is secured by collateral (including a right of setoff)

Brief description of collateral

☐ Real Estate ☐ Motor Vehicle
☐ Other _____

Value of Collateral $ _____

Amount of arrearage and other charges at time case filed included in secured claim if any $ _____

6 UNSECURED NONPRIORITY CLAIM $ 33,727.75

☒ Check this box if a) there is no collateral or lien securing your claim or b) your claim exceeds the value of the property securing it or if c) none or only part of your claim is entitled to priority

7 UNSECURED PRIORITY CLAIM

☐ Check this box if you have an unsecured priority claim

Amount entitled to priority $ _____

Specify the priority of the claim

☐ Wages salaries or commissions (up to $4 925)* earned within 90 days before filing of the bankruptcy petition or cessation of the Debtor s business whichever is earlier 11 U S C § 507(a)(3)

☐ Contributions to an employee benefit plan 11 U S C § 507(a)(4)

☐ Up to $2 225* of deposits toward purchase lease or rental of property or services for personal family or household use 11 U S C § 507(a)(6)

☐ Alimony maintenance or support owed to a spouse former spouse or child 11 U S C § 507(a)(7)

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

☐ Other Specify applicable paragraph of 11 U S C § 507(a) (____)

Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment

8 CREDITS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim

9 SUPPORTING DOCUMENTS *Attach copies of supporting documents,* such as promissory notes purchase orders invoices itemized statements of running accounts contracts court judgments mortgages security agreements and evidence of perfection of lien DO NOT SEND ORIGINAL DOCUMENTS If the documents are not available explain If the documents are voluminous attach a summary

10 DATE-STAMPED COPY To receive an acknowledgment of your claim, please enclose a self-addressed, stamped envelope and an additional copy of this proof of claim.

You may file this proof of claim with BMC at the address below or with the Court at the address on the reserve side If you file with BMC 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 5 00 pm on 01/24/2005 for Non-Government Claimants OR on or before 04/24/2005 for Governmental Units

BY MAIL TO
BMC Group
Attn ATA Claims Agent
PO Box 1035
El Segundo CA 90245-1035

BY HAND OR OVERNIGHT DELIVERY TO
BMC Group
Attn ATA Claims Agent
1330 East Franklin Ave
El Segundo CA 9024

THIS SPACE FOR COURT USE ONLY

FILED
JAN 07 2005
BMC
ATA
00320

DATE SIGNED
1/03/05

SIGN Broward County
by Barbara M. Hill, Assistant County Attorney
and print the name and title if any of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)

Penalty for presenting fraudulent claim is a fine of up to $500 000 or imprisonment for up to 5 years or both 18 U S C §§ 152 AND 3571

BROWARD COUNTY AVIATION DEPARTMENT
Pre/Post-Petition Outstanding Invoices as of 12/01/04

ATA

Pre-Petition Invoices (Prior to 10/26/04)

Invoice # Check #	Invoice Date	Activity Date	Amount	Paid	Balance	Description
46447	9/10/2004		($50 00)		($50 00)	Credit for key return
50351	10/14/2004		$10 00		$10 00	Security Badge
50445	10/21/2004		$50 00		$50 00	Replacement keys
1193618	10/12/2004			($116 75)	($116 75)	Rent overpayment
50748	11/10/2004	October	$37,339 64	$3,552 84	$33,786 80	Oct landings Prorated thru 10/25
					$47 70	Billed by USA Parking
Total Pre-Petition invoices						**$33,727 75**

Invoice

Broward County Aviation Department

REMIT TO
Broward County Aviation Dept
Att Finance Division
320 Terminal Dr
Ft Lauderdale, FL 33315

Invoice # 046447
Invoice Date 09/10/2004
Agreement # 000360
Contract #
Customer # 00000034
Total Amount -$50 00

ATA Airlines, Inc
Att Accounts Payable
200 Terminal Dr
Fort Lauderdale, FL 33315

Fort Lauderdale-Hollywood International Airport

Line	Description	Amount
1	Credit invoice 043200 line 1 - Key C1A2-9 Denise Florea was returned to BCAD 1 00 @ -$50 00	-$50 00

Total Amount Due	-$50 00

Pre-petition

Invoice

Broward County Aviation Department

REMIT TO
Broward County Aviation Dept
Att Finance Division
320 Terminal Dr
Ft Lauderdale, FL 33315

Invoice # 050351
Invoice Date 10/14/2004
Agreement # 000360
Contract #
Customer # 00000034
Total Amount $10 00

ATA Airlines, Inc
Att Accounts Payable
200 Terminal Dr
Fort Lauderdale, FL 33315

Fort Lauderdale-Hollywood International Airport

Line	Description	Amount
1	Original/Renewal/Replacement Employee Security Badges 2 00 @ $5 00	$10 00

Total Amount Due	$10 00

Pre-petition

Invoice

Broward County Aviation Department

REMIT TO
Broward County Aviation Dept
Att Finance Division
320 Terminal Dr
Ft Lauderdale, FL 33315

Invoice # 050445
Invoice Date 10/21/2004
Agreement # 000360
Contract #
Customer # 00000034
Total Amount $50 00

ATA Airlines, Inc
Att Accounts Payable
200 Terminal Dr
Fort Lauderdale, FL 33315

Fort Lauderdale-Hollywood International Airport

Line	Description	Amount
1	Replacement BCAD key C1A2-11 - Richard Francis 1 00 @ $50 00	$50 00

Total Amount Due	$50 00

Pre-petition

Invoice

Broward County Aviation Department

REMIT TO
Broward County Aviation Dept
Att Finance Division
320 Terminal Dr
Ft Lauderdale, FL 33315

Invoice # 050748
Invoice Date 11/10/2004
Agreement # 000182
Contract #
Customer # 00000034
Total Amount $37,339 64

ATA Airlines, Inc
Att Accounts Payable
200 Terminal Dr
Fort Lauderdale, FL 33315

Fort Lauderdale-Hollywood International Airport

Line	Description	Amount
1	Gate Fees -Base Charges 186 @ $138 00 /Use (10/01/2004-10/31/2004)	$25,668 00
2	Gate Use Credit -Maximum Gate Use October 2004 Gate F2 1 00 @ -$3,312 00	-$3,312 00
3	Landing Fees 14,176,000 @ ($0 95/1,000) /1000 lbs	$13,467 20
4	Passenger Charges -LEO Presence In Terminals 12,637 @ $0 12 (10/01/2004-10/31/2004)	$1,516 44
Total Amount Due		$37,339 64

Pre-Petition
Balance = $33,786.80

Invoice

Broward County Aviation Department

REMIT TO
Broward County Aviation Dept
Att Finance Division
320 Terminal Drive
Ft Lauderdale, FL 33315

Invoice #	120104
Invoice Date	12/1/2004
Agreement #	
Contract #	
Customer #	
Total Amount	$47 70

ATA Airlines Inc
Att Accounts Payable

Fort Lauderdale-Hollywood International Airport

Line	Description	Date	Amount
1	Employee Parking Decals		$ 47 70
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			

Total Amount Due	**$47 70**

Pre-petition

WACHOVIA

1-800-275-3862
Date Nov 1, 2004 Advice D-854190
Acct 003/2090002760835

A fee associated with this service will be reflected in your current account analysis statement The listed items are enclosed You may obtain payment from the maker

SEQ #	ITEM AMOUNT
47490	47 70

BROWARD COUNTY BOARD OF COUNTY
115 SOUTH ANDREW AVE, STE 218
FORT LAUDERDALE FL 33301

1 Item charged totaling $47 70

Advice Total $47 70

⑆402333198⑆ 0020900027608 35⑈ ⑈0000854190⑈

ORIGINAL CHECK HAS A COLORED BACKGROUND PRINTED ON CHEMICAL REACTIVE PAPER - SEE BACK FOR DETAILS

ATA

ATA Holdings Corp
7337 West Washington Street
ATA Airlines, Inc
Ambassadair Travel Club, Inc
ATA Cargo, Inc
American Trans Air Execujet, Inc
Amber Travel, Inc.

180209/pp

RETURNED NOT PAID
by 56-389
REFER TO MAKER X

P.O. Box 51140
Indianapolis, Indiana 46251

National City
National City Bank
Ashland, Ohio

56-389
412

DATE	CHECK #	AMOUNT
14-OCT-04	1195083	$**47.70

Void check 180 days after issue date

PAY Forty-Seven Dollars and 70/100 Cents

TO THE ORDER OF

USA PARKING ASSOCIATES III
400 TERMINAL DR,BOX 50
FT LAUDERDALE, FL 33315

VOID VOID

⑈1195083⑈ ⑆041203895⑆ ⑈0135597⑈ ⑈0000004770⑈

Sharon L Cruz
Interim County Attorney

OFFICE OF THE COUNTY ATTORNEY
Please reply to
Fort Lauderdale-Hollywood International Airport
320 Terminal Drive
Fort Lauderdale Florida 33315

954-359-6100 FAX 954-359-1292

January 3, 2005

Our File 04-071 14

BMC Group
Attention ATA Claims Agent
Post Office Box 1035
El Segundo, California 90245-1035

Re **ATA Airlines, Inc**
Case No 04-19868

Dear Madam or Sir

Enclosed please find an original and one (1) copy of the Proof of Claim filed on behalf of Broward County Please stamp one (1) copy "filed" and return to the undersigned in the envelope provided

Thank you for your assistance in this matter

Very truly yours,

Barbara M Hill
Assistant County Attorney

BMH/jmg
Enclosures

Bankruptcy\ATA-Claim L01 doc

Broward County Board of County Commissioners
Josephus Eggelletion Jr • Ben Graber • Sue Gunzburger Kristin D Jacobs • Ilene Lieberman John E Rodstrom Jr Jim Scott Diana Wasserman-Rubin Lois Wexler
www broward org/legal

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION

In re: ATA Holdings Corp, *et al*,
Case No. 04-19866

DOCUMENTS APPENDED TO CLAIM

On December 2, 2005, Document(s) appended to Claim Number 320 for the following reason

- ☐ Stipulation/Order
- ☐ New Supporting Documents
- ☐ Change of Address
- ☒ Withdrawal of Claim
- ☐ Other

IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION

In re	)	Chapter 11
	)	
ATA Holdings Corp , et al ,[1]	)	Case No 04-19866
	)	(Jointly Administered)
Debtors	)	

Withdrawal of Claim

Broward County hereby withdraws Claim No 320 dated 1/07/2005, in the total amount of $33,846 00 filed in the case of ATA Airlines, Inc , Case No 04-19868

By signing below, I authorize BMC Group, as the court-appointed Official Notice, Claims and Balloting Agent, to amend the official claims register to reflect this withdrawal

Broward County

by: _____ November 28, 2005
Signature of Creditor/Agent for Creditor Date

Barbara M. Hill, Assistant County Attorney
Print Name/Title

320 Terminal Drive
Address

Fort Lauderdale
City, State, Zip

Florida, 33315

[1] The Debtors are the following entities ATA Holdings Corp (04-19866), ATA Airlines, Inc , (04-19868), Ambassadair Travel Club, Inc (04-19869), ATA Leisure Corp (04-19870), Amber Travel, Inc (04-19871), American Trans Air Execujet, Inc (04-19872), ATA Cargo, Inc (04-19873), and Chicago Express Airlines, Inc (04-19874)