

Fill in this information to identify the case:

Debtor 1 Auto Masters, LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Middle District of Tennessee

Case number 17-07036

Official Form 410

Proof of Claim

12/15

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

<p>1. Who is the current creditor?</p>	<p><u>Metropolitan Government of Nashville & Davidson County Tennessee</u></p> <p><small>Name of the current creditor (the person or entity to be paid for this claim)</small></p> <p>Other names the creditor used with the debtor <u>Metropolitan Trustee of Nashville & Davidson County Tennessee</u></p>	
<p>2. Has this claim been acquired from someone else?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____</p>	
<p>3. Where should notices and payments to the creditor be sent?</p> <p><small>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</small></p>	<p>Where should notices to the creditor be sent?</p> <p><u>Metro Government of Nashville - Legal Dept.</u></p> <p><small>Name</small></p> <p><u>Post Office Box 196300</u></p> <p><small>Number Street</small></p> <p><u>Nashville TN 37219</u></p> <p><small>City State ZIP Code</small></p> <p>Contact phone <u>615-862-6341</u></p> <p>Contact email <u>lorraine.abrams@nashville.gov</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p><u>Metropolitan Trustee</u></p> <p><small>Name</small></p> <p><u>Post Office Box 196358</u></p> <p><small>Number Street</small></p> <p><u>Nashville TN 37219</u></p> <p><small>City State ZIP Code</small></p> <p>Contact phone <u>615-862-6300</u></p> <p>Contact email _____</p>
<p><small>Uniform claim identifier for electronic payments in chapter 13 (if you use one):</small></p> <p><u>BK-08827</u></p>		
<p>4. Does this claim amend one already filed?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____</p> <p style="text-align: right;">Filed on _____ <small>MM / DD / YYYY</small></p>	
<p>5. Do you know if anyone else has filed a proof of claim for this claim?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____</p>	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 8 8 2 7

7. How much is the claim? \$ 1,181.93. Does this amount include interest or other charges? No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
This is the amount of Creditor's claim as of 02/28/2018. Property oversecured under 11 U.S.C. 506(b) so Creditor is entitled to include in its claim any interest up to the date of confirmation. Creditor is entitled to an additional 1% interest on the base tax amount, on the beginning of each month, from the above date to the date of the actual plan confirmation.

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.
Personalty Taxes @ 3920 and 4601 Nolensville Pike

9. Is all or part of the claim secured? No Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
 Motor vehicle
 Other. Describe: Personal Property

Basis for perfection: Tax Statements
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ 124,873.00

Amount of the claim that is secured: \$ 1,181.93

Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____

Annual Interest Rate (when case was filed) 18.00 %

Fixed
 Variable

10. Is this claim based on a lease? No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check all that apply:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

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

\$ _____

Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

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

\$ _____

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

\$ _____

Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/16 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 11/20/2017
MM / DD / YYYY

/s/ R. Alex Dickerson

Signature

Print the name of the person who is completing and signing this claim:

Name R. Alex Dickerson
First name Middle name Last name

Title Assistant Metropolitan Attorney, TN BPR No. 27184

Company Metropolitan Government of Nashville & Davidson County Tennessee
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address Post Office Box 196300
Number Street

Nashville TN 37219
City State ZIP Code

Contact phone 615-862-6341 Email alex.dickerson@nashville.gov



2 Charlie Cardwell, Metropolitan Trustee
 0 700 Second Avenue South, Suite 220
 1 P.O. Box 196358
 7 Nashville, TN 37219-6358

Printed Date: 10/23/2017 LDA
 ACCOUNT # 000117930
 BILL # 2017-7874

To avoid interest, total tax must be paid in full by :
 February 28th, 2018

2017 PERSONALTY TAX STATEMENT

RETAIN THIS PORTION FOR YOUR TAX RECORDS.

Owner Address AUTO MASTER LLC 3920 NOLENSVILLE RD NASHVILLE, TN 37211
Property Address 3920 NOLENSVILLE PK
Classification Personalty

Your taxes are distributed as follows:

Fund Description	Rate	GSD Tax	USD Tax	Amount
GSD GENERAL FUND	1.28800	97.31	0.00	97.31
GSD DEBT SERVICE	0.29700	22.44	0.00	22.44
GSD SCHOOL DEBT SERVICE	0.12600	9.52	0.00	9.52
GSD SCHOOLS GENERAL PURPOSE	0.99400	75.10	0.00	75.10
USD GENERAL FUND	0.33400	0.00	25.23	25.23
USD DEBT SERVICE	0.06600	0.00	4.99	4.99
USD FIRE PROTECTION	0.05000	3.78	0.00	3.78
Total Base Tax		\$ 208.15	\$ 30.22	\$ 238.37

Land Value	\$	0.00
Improvement Value	\$	0.00
Personal Property	\$	25,183.00
Total Value	\$	25,183.00
Exemption		No
Equalization Factor		1.0000
Assessed %		30
Assessed Value	\$	7,555.00
Tax Rate		3.1550
Base Tax	\$	238.37
Rollback Tax	\$	0.00
Interest Due	\$	0.00
Prior Payments	\$	0.00
Balance Due	\$	238.37

Payment History

Original Tax Due	238.37
Adjustments	0.00
Interest Accrued	0.00
Previous Base Tax Payments	0.00
Previous Interest Payments	0.00
Current Base Tax Due	238.37
Current Interest Due	0.00
Total Current Amount Due	238.37

The Metropolitan Trustee accepts partial payment of taxes which have not been turned over to the Chancery Court for collection. The tax lien held against the property will remain in effect until the balance of the property tax has been paid in full, pursuant to T.C.A. 67-5-2101 et seq.

ADA (615) 862-6330

CUT OR TEAR ALONG THIS LINE



2 Charlie Cardwell, Metropolitan Trustee
 0 700 Second Avenue South, Suite 220
 1 P.O. Box 196358
 7 Nashville, TN 37219-6358

PAY ONLINE AT: nashville.gov/trustee

ACCOUNT 000117930	BILL # 2017-7874
PROPERTY ADDRESS 3920 NOLENSVILLE PK	
AMOUNT REMITTED:	

Current Amount Due : \$ 238.37
Suggested Monthly Payment: \$ 47.68

To avoid interest, total tax must be paid in full by : February 28th, 2018

Important: Return this portion with your payment. Use the address below for current payment only. Make check payable to:
 Address Change
 Credit Card Payment

AUTO MASTER LLC
 3920 NOLENSVILLE RD
 NASHVILLE, TN 37211

Metropolitan Trustee
 Personal Property Tax Dept.
 PO BOX 305012
 Nashville, TN 37230-5012



Charlie Cardwell, Metropolitan Trustee
 700 Second Avenue South, Suite 220
 P.O. Box 196358
 Nashville, TN 37219-6358

Printed Date: 10/23/2017 LDA
 ACCOUNT # 000134533
 BILL # 2017-10728

To avoid interest, total tax must be paid in full by :
 February 28th, 2018

2017 PERSONALTY TAX STATEMENT

RETAIN THIS PORTION FOR YOUR TAX RECORDS.

Owner Address AUTO MASTERS LLC 4601 NOLENSVILLE PK NASHVILLE, TN 37211
Property Address 4601 NOLENSVILLE PK
Classification Personalty

Your taxes are distributed as follows:

Fund Description	Rate	GSD Tax	USD Tax	Amount
GSD GENERAL FUND	1.28800	385.20	0.00	385.20
GSD DEBT SERVICE	0.29700	88.82	0.00	88.82
GSD SCHOOL DEBT SERVICE	0.12600	37.68	0.00	37.68
GSD SCHOOLS GENERAL PURPOSE	0.99400	297.28	0.00	297.28
USD GENERAL FUND	0.33400	0.00	99.89	99.89
USD DEBT SERVICE	0.06600	0.00	19.74	19.74
USD FIRE PROTECTION	0.05000	14.95	0.00	14.95
Total Base Tax	3.1550	\$ 823.93	\$ 119.63	\$ 943.56

Land Value	\$	0.00
Improvement Value	\$	0.00
Personal Property	\$	99,690.00
Total Value	\$	99,690.00
Exemption		No
Equalization Factor		1.0000
Assessed %		30
Assessed Value	\$	29,907.00
Tax Rate		3.1550
Base Tax	\$	943.56
Rollback Tax	\$	0.00
Interest Due	\$	0.00
Prior Payments	\$	0.00
Balance Due	\$	943.56

Payment History

Original Tax Due	943.56
Adjustments	0.00
Interest Accrued	0.00
Previous Base Tax Payments	0.00
Previous Interest Payments	0.00
Current Base Tax Due	943.56
Current Interest Due	0.00
Total Current Amount Due	943.56

The Metropolitan Trustee accepts partial payment of taxes which have not been turned over to the Chancery Court for collection. The tax lien held against the property will remain in effect until the balance of the property tax has been paid in full, pursuant to T.C.A. 67-5-2101 et seq.

ADA (615) 862-6330

CUT OR TEAR ALONG THIS LINE



Charlie Cardwell, Metropolitan Trustee
 700 Second Avenue South, Suite 220
 P.O. Box 196358
 Nashville, TN 37219-6358

PAY ONLINE AT: nashville.gov/trustee

ACCOUNT 000134533	BILL # 2017-10728
PROPERTY ADDRESS 4601 NOLENSVILLE PK	
AMOUNT REMITTED:	

Current Amount Due : \$ 943.56
Suggested Monthly Payment: \$ 188.72

To avoid interest, total tax must be paid in full by : February 28th, 2018

Important: Return this portion with your payment. Use the address below for current payment only. Make check payable to:

Address Change
 Credit Card Payment

AUTO MASTERS LLC
 4601 NOLENSVILLE PK
 NASHVILLE, TN 37211

Metropolitan Trustee
 Personal Property Tax Dept.
 P O BOX 305012
 Nashville, TN 37230-5012

MIDDLE DISTRICT OF TENNESSEE

Claims Register

[3:17-bk-07036 Auto Masters, LLC](#)

Judge: Charles M Walker **Chapter:** 11
Office: Nashville **Last Date to file claims:** 02/15/2018
Trustee: **Last Date to file (Govt):**

<i>Creditor:</i> (6516445)	Claim No: 6	<i>Status:</i>
Metropolitan Government--	<i>Original Filed</i>	<i>Filed by:</i> CR
Nashville & Davidson Co.	<i>Date:</i> 11/28/2017	<i>Entered by:</i> RALEIGH
Post Office Box 196300	<i>Original Entered</i>	ALEXANDER DICKERSON
Nashville, TN 37219-6300	<i>Date:</i> 11/28/2017	<i>Modified:</i>

Amount claimed: \$1181.93
 Secured claimed: \$1181.93

History:

[Details](#) [6-1](#) 11/28/2017 Claim #6 filed by Metropolitan Government--Nashville & Davidson Co., Amount claimed: \$1181.93 (DICKERSON, RALEIGH)

Description: (6-1) 2017 personalty taxes @ Nolensville Pike

Remarks: (6-1) 18% Interest

Claims Register Summary

Case Name: Auto Masters, LLC
Case Number: 3:17-bk-07036
Chapter: 11
Date Filed: 10/17/2017
Total Number Of Claims: 1

Total Amount Claimed*	\$1181.93
Total Amount Allowed*	

*Includes general unsecured claims

The values are reflective of the data entered. Always refer to claim documents for actual amounts.

	Claimed	Allowed
Secured	\$1181.93	
Priority		
Administrative		