

B10 (Official Form 10) (12/07)

UNITED STATES BANKRUPTCY COURT DISTRICT OF DELAWARE PROOF OF CLAIM 11

Name of Debtor: ALSET OWNERS, LLC Case Number: 09-11960-BLS

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 (the person or other entity to whom the debtor owes money or property): CITY OF XENIA
Name and address where notices should be sent: UTILITY BILLING DIVISION
101 N DETROIT ST
XENIA, OH 45385
Telephone number: 937-376-7242

Check this box to indicate that this claim amends a previously filed claim.
Court Claim Number: _____
(If known)
Filed on: _____

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

Check this 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 if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 187.33
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not 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.

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.
Specify the priority of the claim.
 Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).
 Wages, salaries, or commissions (up to \$10,950*) 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).
 Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).
 Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 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)().

2. Basis for Claim: UTILITY SERVICES
(See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: 48014 4702
3a. Debtor may have scheduled account as: MO4-00148-01 v
MO1-00147-02
(See instruction #3a on reverse side.)

4. Secured Claim (See instruction #4 on reverse side.)
Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.
Nature of property or right of setoff: Real Estate Motor Vehicle Other
Describe: _____
Value of Property: \$ _____ Annual Interest Rate: _____ %
Amount of arrearage and other charges as of time case filed included in secured claim if any: \$ _____ Basis for perfection: _____
Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____

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6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See definition of "redacted" on reverse side.)
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.
If the documents are not available, please explain: _____

Amount entitled to priority:
\$ 187.33
*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

Date: 6/11/09
Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.
Diana L Steck DIANA L STECK A/R MGR

FOR COURT USE ONLY
CLERK OF COURT
DELAWARE
AUG 16 9:16

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.

BMC



Customer Master File Maintenance

Customer Key Information

Account No	M	04	00148	01	Last	Edt
Name	RALLY'S					
Address	0	EXT-STRENGTH SURCH			Apt	
SSN	000	00	0000	Phone	372	0000
Parcel Id	M010014801					

Mailing Address

Line 1	SETLA DBA RALLY'S		
Line 2	PO BOX 789702		
City State	WITCHITA,		KS
Zipcode	67278	C.R	

Owner Information





Name			
Address 1			
Address 2			
Zipcode		Duplicates	<input type="checkbox"/>
Phone			

Status

Account Status	
Consumer Class	2
Location In-Out	I
Penalty	Y
Tax	<input checked="" type="checkbox"/>
Last Billed	6
Last Adjusted	00/15/2007
Due Date	06/04/2009 <input type="checkbox"/>
Account Balance	20.35
Last Pay Date	04/02/2009
Last Payment	0.78
Pending Payments	0.00
Starting Date	01/01/1901 <input type="checkbox"/>
Ending Date	00/00/0000 <input type="checkbox"/>
Deposit Number	000000
Deposit Balance	0.00
Deposit Date	00/00/0000 <input type="checkbox"/>
Refund Date	00/00/0000 <input type="checkbox"/>

Screens

Name and Address
Financial
Water
Sewer & Refuse
Services 5-12
Services 13-18
Services 19-24
Aging & ACH
General Info

Exit Update Lookup Delete Detail Audit Previous Next    

Inquire Only

Utility Record

Page 1 of 4

90 0067520

Customer Master File Maintenance

Account No. M04 00148 01 Name RALLY'S
 Service Addr 0 EXT STRENGTH SURCH Apt

- Screens
- Name and Address
 - Financial
 - Water
 - Sewer & Refuse
 - Services 5-12
 - Services 13-18
 - Services 19-24
 - Aging and ACH
 - General Info

Service	Previous	Adjustments	Payments	Charges	Penalty	New Balance
WATER	.00	.00	.00	.00	.00	.00
SEWER	20.35	.00	.00	.00	.00	20.35
GARBAGE	.00	.00	.00	.00	.00	.00
OFF/OH	.00	.00	.00	.00	.00	.00
HYDRANT	.00	.00	.00	.00	.00	.00
SPRIKLR	.00	.00	.00	.00	.00	.00
STORM WT	.00	.00	.00	.00	.00	.00
MISC 8	.00	.00	.00	.00	.00	.00
SWR TAP	.00	.00	.00	.00	.00	.00
MISC 10	.00	.00	.00	.00	.00	.00
MISC 11	.00	.00	.00	.00	.00	.00
PARK LOT	.00	.00	.00	.00	.00	.00
WTR PEN	.00	.00	.00	.00	.00	.00
SWR PEN	.00	.00	.00	.00	.00	.00
GRB PEN	.00	.00	.00	.00	.00	.00
STM PEN	.00	.00	.00	.00	.00	.00
MISC 17	.00	.00	.00	.00	.00	.00
MISC 18	.00	.00	.00	.00	.00	.00
MISC 19	.00	.00	.00	.00	.00	.00
MISC 20	.00	.00	.00	.00	.00	.00
MISC 21	.00	.00	.00	.00	.00	.00
CA FEE	.00	.00	.00	.00	.00	.00
OP FEE	.00	.00	.00	.00	.00	.00
HSF FEE	.00	.00	.00	.00	.00	.00
TOTALS	20.35	.00	.00	.00	.00	20.35

Exit Update Lookup Delete Previous Next clip [Print Icon]

Inquire Only

Utility Record Page 2 of 4

90 0067520



Customer Master File Maintenance

Customer Key Information

Account No	M	01	00147	02	Last	EdR
Name	RALLY'S					
Address	483	W MAIN ST			Apt	
SSH			Phone	372	0000	
Parcel Id						

Mailing Address

Line 1	SETLA DBA RALLY'S REST		
Line 2	P O BOX 789702		
City State	WICHITA,		KA
Zipcode	67278	C/R	

Owner Information

Name			
Address 1			
Address 2			
Zipcode		Duplicates	<input type="checkbox"/>
Phone			

Account Status	
Consumer Class	2
Location In/Out	I
Penalty	Y
Tax	<input checked="" type="checkbox"/>
Last Billed	6
Last Adjusted	00 00 0000
Due Date	06/04/2009
Account Balance	166.98
Last Pay Date	05/07/2009
Last Payment	137.48
Pending Payments	0.00
Starting Date	10/16/2001
Ending Date	00/00/0000
Deposit Number	000000
Deposit Balance	0.00
Deposit Date	00/00/0000
Refund Date	00/00/0000

Screens

- Name and Address
- Financial
- Water
- Sewer & Refuse
- Services 5-12
- Services 13-18
- Services 19-24
- Aging & ACH
- General Info

Utility Record Page 3 of 4

90 0067520

Customer Master File Maintenance

Account No: M01 00447 02 Name: RALEY'S
 Service Addr: 483 W MAIN ST Apt:

Service	Previous	Adjustments	Payments	Charges	Penalty	New Balance
WATER	60.21	.00	.00	.00	.00	60.21
SEWER	99.09	.00	.00	.00	.00	99.09
GARBAGE	4.68	.00	.00	.00	.00	4.68
OFF/OH	.00	.00	.00	.00	.00	.00
HYDRANT	.00	.00	.00	.00	.00	.00
SPRIINKLR	.00	.00	.00	.00	.00	.00
STORM WT	3.00	.00	.00	.00	.00	3.00
MISC 8	.00	.00	.00	.00	.00	.00
SWR TAP	.00	.00	.00	.00	.00	.00
MISC 10	.00	.00	.00	.00	.00	.00
MISC 11	.00	.00	.00	.00	.00	.00
PARK LOT	.00	.00	.00	.00	.00	.00
WTR PEN	.00	.00	.00	.00	.00	.00
SWR PEN	.00	.00	.00	.00	.00	.00
GRB PEN	.00	.00	.00	.00	.00	.00
STM PEN	.00	.00	.00	.00	.00	.00
MISC 17	.00	.00	.00	.00	.00	.00
MISC 18	.00	.00	.00	.00	.00	.00
MISC 19	.00	.00	.00	.00	.00	.00
MISC 20	.00	.00	.00	.00	.00	.00
MISC 21	.00	.00	.00	.00	.00	.00
CA FEE	.00	.00	.00	.00	.00	.00
OP FEE	.00	.00	.00	.00	.00	.00
HSF FEE	.00	.00	.00	.00	.00	.00
TOTALS	166.98	.00	.00	.00	.00	166.98

- Screens
- Name and Address
 - Financial
 - Water
 - Sewer & Refuse
 - Services 5-12
 - Services 13-18
 - Services 19-24
 - Aging and ACH
 - General Info

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Utility Record Page 4 of 4

90 0067520