B 10 (Official Form 10) (12/08)

UNITED STATES BANKRUPTCY COURT

PROOF OF CLAIM

Name of Debtor: ALSET (SETTLA LLC)

Case Number: FILED 0911960

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):
DR. DAVE LANDSCAPING - DAVID L. ANDEXLER

Name and address where notices should be sent:
DAVID L. ANDEXLER
7283 BEAU COURT
PARMA, OHIO 44129

Telephone number:
216-389-5365

☐ 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):

SAME AS ABOVE

Telephone number:

RECEIVED
OCT 13 2009
BMC GROUP

☐ 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: $ 1,576.39

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.

2. Basis for Claim: GOODS SOLD AND SERVICES PERFORMED
(See instruction #2 on reverse side.) LANDSCAPING AT SEVERAL RESTAURANTS

3. Last four digits of any number by which creditor identifies debtor: INVOICE NUMBERS 4682, 4677, 4670, 4669, 4741 (ATTACHED)

3a. Debtor may have scheduled account as: _____
(See instruction #3a on reverse side.) ALL AT INFO SYNC, AS WELL

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:** $_____

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 of 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 instruction 7 and 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:

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)(__).

Amount entitled to priority:

$_____

**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: 10/6/2009

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.

David L. Andexler DAVID L. ANDEXLER OWNER/SOLE PROPRIATOR

FOR COURT USE ONLY

Alset Owners LLC
00072

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.

Invoice

№ 4682

NAME RALLYS RESTAURANT

ADDRESS 10430 SAINT CLAIR AVE

CITY CLEVELAND STATE OHIO ZIP 44108

DATE 5 / 30 / 2009 ATTN: NONELLA

DR. DAVE landscaping

7283 Beau Ct.
Parma, Ohio 44129
(440) 845-6554

QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	Landscape Service For: RALLYS RESTAURANT		$ 320.00
	2585 EAST 55TH STREET		
	CLEVELAND, OHIO 44104		
	REMOVAL OF LARGE DANGEROUSLY LEANING		
	MAPLE TREE "B" SIDE. DRIVE THRU LANE		
	OBLIGATORILY UNDERMINED BY SEWER WORK		
	IN GENERAL AREA. INCLUDES REMOVAL		
	OF STUMP AND OFF SITE DISPOSAL OF		
	ALL WOOD AND DEBRIS, GENERAL CLEAN		
	UP OF WORK AREA		
	COMPLETED 5-17-09		
		SUBTOTAL	$ 320.00
		TAX	24.80
		TOTAL	$ 344.80

PLEASE PAY FROM THIS INVOICE

Terms: Net 30 days

A finance charge of 2% will be charged on balances over 30 days.

Invoice

4672

NAME: RALLYS RESTAURANT

ADDRESS: 10430 SAINT CLAIR AVE

CITY: CLEVELAND STATE: OHIO ZIP: 44108

DATE: 5/30/2009 ATTN: NOVELLA'S 30

DR. DAVE landscaping

7283 Beau Ct.
Parma, Ohio 44129
(440) 845-6554

QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	Landscape Service For: RALLYS RESTAURANT		$305.00
	2585 EAST 55TH STREET		
	CLEVELAND, OHIO 44104		
	REMOVAL OF 18 SHRUBS ALONG BOTH BOTH		
	SIDES AND REAR OF BUILDING, AND REMOVAL		
	OF 3 LARGE SHRUBS "B" SIDE MENU BOARD		
	OFF SITE DISPOSAL OF 10 SHRUBS		
	COMPLETED 3-15-2009		
		SUBTOTAL	$305.00
		TAX	23.64
		TOTAL	$328.64

Terms: Net 30 days

PLEASE PAY FROM THIS INVOICE

A finance charge of 2% will be charged on balances over 30 days.

Invoice

№ 4670

NAME RALLYS RESTAURANT

ADDRESS 11607 BUCKEYE ROAD

CITY CLEVELAND STATE OHIO ZIP 44120

DATE 6 11 2009 ATTN: SAMANTHA

DR. DAVE landscaping

7283 Beau Ct.
Parma, Ohio 44129
(440) 845-6554

QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	Landscape Service For: RALLYS RESTAURANT		$
	4154 LEE ROAD		
	CLEVELAND, OHIO 44128		
1EA	REMOVAL OF TREE FRONT TREE LAWN		78.00
	AREA DAMAGED BY VEHICLE ACCIDENT		
	INCLUDES REMOVAL OF STUMP AND REGRADING		
	OF GROUND. REDISTRIBUTE ROCKS AROUND BUILDING		
	COMPLETED 3-30-09		
		SUBTOTAL	$ 78.00
		TAX	6.05
		TOTAL	$ 84.05

PLEASE PAY FROM THIS INVOICE

Terms: Net 30 days

A finance charge of 2% will be charged on balances over 30 days.

Invoice

№ 4669

NAME RALLYS RESTAURANT

ADDRESS 11607 BUCKEYE ROAD

CITY CLEVELAND STATE OHIO ZIP 44120

DATE 6 / 1 / 2009 ATTN: SAMANTHA

DR. DAVE landscaping

7283 Beau Ct.
Parma, Ohio 44129
(440) 845-6554

QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	Landscape Service For: RALLYS RESTAURANT		$ 75.00
	14221 EUCLID AVE		
	EAST CLEVELAND, OHIO 44112		
1EA.	REMOVAL OF 5 LARGE BUSHES INCLUDING		
	ROOT BALL AROUND REAR OF BUILDING-		
	FREEZER AREA		
	COMPLETED 5-13-09		
		SUBTOTAL	$ 75.00
		TAX	5.81
		TOTAL	$80.81

PLEASE PAY FROM THIS INVOICE

Terms: Net 30 days

A finance charge of 2% will be charged on balances over 30 days.

Invoice

№ 4741

NAME: RALLYS RESTAURANT

ADDRESS: 10430 ST CLAIR AVE

CITY: CLEVELAND STATE: OHIO ZIP: 44108

DATE: 5/30/2009 ATTN: NOVELLA

DR. DAVE landscaping

7283 Beau Ct.
Parma, Ohio 44129
(440) 845-6554

QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
	Landscape Service For: RALLYS RESTAURANT		$685.00
	2585 EAST 55TH ST.		
	CLEVELAND, OHIO 44104		
1EA.	ADDITION OF #57 RIVERWASH GRAVEL TO		
	REAR OF BUILDING BEHIND FREEZER		
1EA.	LEVEL GROUND AROUND "B" SIDE MENU		
	BOARD MOVING TOP SOIL AROUND TO OTHER		
	AREAS. ADD #57 RIVER WASH GRAVEL TO		
	"B" SIDE DRIVE THRU BETWEEN DRIVE AND		
	PARKING LOT		
	(COMPLETED 5-26-2009)		
		SUBTOTAL	$685.00
		TAX	53.09
		TOTAL	$738.09

PLEASE PAY FROM THIS INVOICE

Terms: Net 30 days

A finance charge of 2% will be charged on balances over 30 days.