UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF WASHINGTON

COMPLETE THIS FORM AND MAIL TO: PO BOX 2164, SPOKANE, WA 99210-2164

PROOF OF CLAIM

EDWA – LF 3001 10/05

Name of Debtor	Case Number
The Catholic Diocese of Spokane	04-08822-PCW11

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): (1) Our Lady of the Valley parish

Name and Address where notices should be sent:
(2) 2511 Elmway
Okanogan, WA 98840

☐ 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 are filing this claim on behalf of the creditor who has not timely filed a proof of claim

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

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

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

Telephone number: (3) (509) 422-5049

Last four digits of number by which creditor identifies debtor:

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

1. Total Amount of Claim At Case Filing: $ (4) 122,859.94

☑ Check box if claim is Unsecured and complete Section 6

☐ Check box if some or all of claim is secured and complete Sections 4 and 6.

☐ Check box if some or all of claim is entitled to Priority and complete Sections 5 and 6.

☐ Check 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.

2. Date debt was incurred: (5) pre 1990 (main acct) 4/11/2000 (maint. acct)

3. If Court Judgment, date obtained: _____

4. 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: $_____ Interest Rate _____

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

Total Amount of Secured Claim $_____

(may not exceed value of collateral)

5. Unsecured Priority Claim:

Specify the priority of the claim:

☐ Wages, salaries, or commissions (up to $10,000),* 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 $2,225* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7).

☐ 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).

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

Amount Entitled to Priority: $ 0.00.

**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.*

6. SUMMARY OF PROOF OF CLAIM:

TOTAL AMOUNT OF CLAIM $ (4) 122,859.94 **(From Section 1)**

Secured $ 0 **(From Section 4)**

Priority $ 0.00 **(From Section 5)**

Unsecured $ (4) 122,859.94 **(Total Claim Less Secured Less Priority)**

7. **Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

8. **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.

9. **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 or go to **www.waeb.uscourts.gov.**

FOR COURT USE ONLY

10. Basis for Claim:

☐ Goods sold
☐ Services performed
☑ Money loaned
☐ Personal injury/wrongful death
☐ Taxes
☐ Other_____

☐ Retiree benefits as defined in 11 USC § 1114(a)
☐ Wages, Salaries, and compensation (fill our below):
Last four digits of SS# - _____
Unpaid compensation for services performed from _____ (date) to _____ (date).

Date: (6) 2/20/06

Sign 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):

(7) Rev. Rory Pitstick, pastor Rev. Rory Pitstick, pastor

Catholic Pastoral Center

Mailed 11/8/05

CATHOLIC DIOCESE OF SPOKANE
1023 West Riverside Avenue
Post Office Box 1453
Spokane, Washington 99210-1453

November 1, 2005

Our Lady of The Valley Parish
2511 N Elmway
Okanogan WA 98840

Our accountants, Langenhorst Norwood & Hopkins CPA's, P.S., are conducting agreed upon procedures relating to our financial statements. For the purpose of independent verification only, please confirm the following information relating to your Savings account(s) with the Catholic Diocese of Spokane as of 06/30/2005.

Savings account(s) balance with accrued interest thru the date of the Chapter 11 Reorganization (12/06/2004).

Regular Balance as of 06/30/2005	$112,165.64
Maintenance Fund Balance as of 06/30/2005	$10,694.30 4/11/2000
	122,859.94

Please indicate in the space below whether this information is in agreement with your records. If it is not, please furnish any information you have that will help our auditors reconcile the difference.

After signing and dating your reply, please mail it directly to *Langenhorst Norwood & Hopkins CPA's, P.S.* in the stamped enclosed envelope.
South 9 Washington St. Suite 615 Hutton Bldg
Spokane, WA 99201

Very truly yours,

Catholic Diocese of Spokane

To: Langenhorst Norwood & Hopkins CPA's, P.S.

The above information regarding the Savings account(s) made with the Catholic Diocese of Spokane agrees with my records at 06/30/2005 with the following exceptions (if any):

Signature: Kenneth J. Radek (KENNETH J. RADEK)
Title: FINANCE COMMITTEE CHAIRPERSON
Date NOVEMBER 8, 2005