UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

PROOF OF CLAIM

03103120806236

Name of Debtor Against Which You Assert Your Claim GreenTree Financial Serv

YOU MUST SELECT A DEBTOR AGAINST WHOM YOU ASSERT YOUR CLAIM YOU SELECT A DEBTOR BY CHECKING ONE BOX ON THE OTHER SIDE OF THIS NOTICE NOTE Check one box only Creditors holding claims against more than one Debtor must file a separate claim in the case of each Debtor against whom the creditor asserts a claim A creditor will be bound by the Debtor named in its proof of claim 02-B49672 — 03-04707 (GreenTree)

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

☐ 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 if any constitute your claim as scheduled by the Debtor 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

Name of Creditor and Address

03103120806236

FORSYTH COUNTY TAX COMMSSNR
110 E MAIN ST # 130
CUMMING GA 30040-2468

Creditor Telephone Number (770-781-2110

CREDITOR TAX I D #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR 0000 406685

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

1 BASIS FOR CLAIM

☐ Goods sold
☐ Services performed
☐ Money loaned
☐ Bondholder
☐ Personal injury/wrongful death
☑ Taxes
☐ Other (describe briefly)
☐ Retiree benefits as defined in 11 U S C § 1114(a)
☐ Wages salaries and compensation (Fill out below)

Your social security number _____

Unpaid compensation for services performed from _____ (date) to _____ (date)

2 DATE DEBT WAS INCURRED 1/1/2001 - 12/31/2003

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM $ _____ (unsecured) $ _____ (secured) $ 1220 38 (unsecured priority) $ 1220 38 (total)

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below

☑ 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 above if any $ _____

6 UNSECURED PRIORITY CLAIM

☑ Check this box if you have an unsecured priority claim

Specify the priority of the claim

☐ Wages salaries or commissions (up to $4 650*) 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 $2 100* 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 4/1/01 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment

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 your claim, please enclose a self-addressed stamped envelope and an additional copy of your claim

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is received on or before 4 00 pm, Central Time on May 22, 2003

BY MAIL TO
Bankruptcy Management Corporation
ATTN Conseco Inc Claims
PO Box 1042
El Segundo CA 90245-1042

BY HAND OR OVERNIGHT DELIVERY TO
Bankruptcy Management Corporation
ATTN Conseco Inc Claims
1330 East Franklin Avenue
El Segundo CA 90245

THIS SPACE FOR COURT USE ONLY

FILED

JUN 30 2003

BMC

GreenTreeFinanceCorpTwo

4707000164

DATE SIGNED 6-26-03

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)

Joyce O Pendley, Tax Comm

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

Name of Debtor Against Which You Assert Your Claim
Check One Box Only

- ☐ Conseco Finance Corp (02-49675-CAD)
- ☐ Conseco Finance Servicing Corp (02-49676-CAD)
- ☐ Conseco Agency of Alabama Inc (03-04692-CAD)
- ☐ Conseco Agency Inc (03-04693-CAD)
- ☐ Conseco Agency of Kentucky Inc (03-04694-CAD)
- ☐ Conseco Agency of Nevada Inc (03-04695-CAD)
- ☐ Conseco Agency of New York Inc (03-04696-CAD)
- ☐ Crum-Reed General Agency Inc (03-04697-CAD)
- ☐ Conseco Finance Canada Company (03-04698-CAD)
- ☐ Conseco Finance Canada Holding Company (03-04699-CAD)
- ☐ Conseco Finance Corp - Alabama (03-04700-CAD)
- ☐ Conseco Finance Credit Corp (03-04701-CAD)
- ☐ Conseco Finance Consumer Discount Company (03-04702-CAD)
- ☐ Conseco Finance Loan Company (03-04703-CAD)
- ☐ Conseco Finance Net Interest Margin Finance Corp I (03-04704-CAD)
- ☐ Conseco Finance Net Interest Margin Finance Corp II (03-04705-CAD)
- ☐ Green Tree Floorplan Funding Corp (03-04706-CAD)
- ☑ Green Tree Finance Corp - Two (03-04707-CAD)
- ☐ Landmark Manufactured Housing Inc (03-04708-CAD)
- ☐ Rice Park Properties Corporation (03-04709-CAD)

INSTRUCTIONS FOR FILING PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law In particular types of cases or circumstances such as bankruptcy cases that are not filed voluntarily by a debtor there may be exceptions to the general rules

— DEFINITIONS —

Debtor

The person corporation or other entity that has filed a bankruptcy case is called the debtor

Creditor

A creditor is any person corporation or other entity to whom the debtor owed a debt on the date that the bankruptcy case was filed

Proof of Claim

A form telling the bankruptcy court how much the debtor owed a creditor at the time the bankruptcy case was filed (the amount of the creditor s claim) This form must be filed with the court appointed Claims Agent Bankruptcy management Corporation at the address listed on the reverse side of this page

Secured Claim

A claim is a secured claim to the extent that the creditor has a lien on property of the debtor (collateral) that gives the creditor the right to be paid from that property before creditors who do not have liens on the property

Examples of liens are a mortgage on real estate and a security interest in a car truck boat television set or other item of property A lien may have been obtained through a court proceeding before a bankruptcy case began in some states a court judgment is a lien In addition to the extent a creditor also owes money to the debtor (has a right of setoff) the creditor's claim may be a secured claim (See also Unsecured Claim)

Unsecured Claim

If a claim is not secured claim it is an unsecured claim A claim may be partly secured and partly unsecured if the property on which a creditor has a lien is not worth enough to pay the creditor in full

Unsecured Priority Claim

Certain types of unsecured claims are given priority so they are to be paid in bankruptcy cases before most other unsecured claims (if there is sufficient money or property available to pay these claims) The most common types of priority claims are listed on the proof of claim form Unsecured claims that are not specifically given priority status by the bankruptcy laws are classified as Unsecured Nonpriority Claims

Items to be completed in Proof of Claim form (if not already filled in)

Court, Name of Debtor, and Case Number

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example District of Delaware) the name of the debtor in the bankruptcy case and the bankruptcy case number If you received a notice of the case from the Claims Agent Bankruptcy Management Corporation all of this information is near the top of the notice

Information about Creditor

If not already accurately pre-printed omplete the section giving the name address and telephone number of the creditor to whom the debtor owes money or property and the debtor s account number if any If (a) anyone else has already filed a proof of claim relating to this debt (b) if you never received notices from the bankruptcy court about this case (c) if your address differs from that to which the Claims Agent sent this notice or (d) if this proof of claim replaces or amends a proof of claim that was already filed check the appropriate boxes on the form

1 Basis for Claim

Check the type of debt for which the proof of claim is being filed If the type of debt is not listed check Other' and briefly describe the type of debt If you were an employee of the debtor fill in your social security number and the dates of work for which you were not paid

2 Date Debt Incurred

Fill in the date when the debt was first owed by the debtor

3 Court Judgments

If you have a court judgment for this debt state the date the court entered the judgment.

4 Total Amount of Claim at Time Case Filed

Fill in the total amount of the entire claim If interest or other charges in addition to the principal amount of the claim are included check the appropriate place on the form and attach an itemization of the interest and charges

5 Secured Claim

If your claim is a secured claim check the appropriate boxes in this section You must state the type and value of property that is collateral for the claim attach copies of the documentation of your lien and state the amount past due on the claim as of the date the bankruptcy case was filed A claim may be partly secured and partly unsecured (See DEFINITIONS above)

6 Unsecured Priority Claim

If your claim is an unsecured priority claim (See DEFINITIONS above) check the appropriate boxes in this section and state the amount entitled to priority A claim may be partly priority and partly nonpriority if for example the claim is more than the amount given priority by the law Check the appropriate place to specify the type of priority claim

7 Credits

By signing this proof of claim you are stating under oath that in calculating the amount of your claim you have given the debtor credit for all payments received from the debtor

8 Supporting Documents

You must attach to this proof of claim form copies of documents that show the debtor owes the debt claimed or if the documents are too lengthy a summary of those documents If documents are not available you must attach an explanation of why they are not available

Please read – important information upon completion of this claim form you are certifying that the statements herein are true

Be sure to date the claim and place original signature of claimant or person making the claim for creditor where indicated at the bottom of the claim form Please type or print name of individual under the signature Be sure all items are answered on the claim form If not applicable insert Not Applicable

Return claim form and attachments if any and a second copy with any attachments to the Claims Agent Bankruptcy Management Corporation at the address on the front of this form

2003 Mobile Home Tax Statement

Bill No	Due Date	TOTAL DUE
2003-1214	05/01/2003	350 79

Joyce O Pendley
Forsyth County Tax Commissioner
110 E Main St
Suite 130
Cumming GA 30040

Map 0000406685

Payment good through
Printed 06/27/2003

Location 4050 MCCONNELL RD

X

MAKE CHECK OR MONEY ORDER PAYABLE TO
Forsyth County Tax Commissioner

GREENTREE FINANCIAL SV CORP C/O ANGELA
F BAZZELL
2300 BETHELVIEW RD STE 110-138
CUMMING GA 30040

RETURN THIS PORTION WITH PAYMENT

Joyce O Pendley
Forsyth County Tax Commissioner
110 E Main St
Suite 130
Cumming, GA 30040

Phone (770) 781-2110 Fax (770) 886-2828

Tax Payer GREENTREE FINANCIAL SV CORP C
Map Code 0000406685 M H (N H S)
Description MOBILE HOME PROPERTY
Bill No 2003-1214
District 001 FORSYTH COUNTY AT LARGE

Mobile Home		
Year	Make	Model/Ref#
1996	FLEETWOOD	052 006T001

Decal		Size		Serial Number	Fair Market Value	Due Date			Payment Good Through
Year	Number	Width	Length						
0	0	27	64		35 900	05/01/2003			

Entity	Adjusted FMV	Net Assessment	Exemptions	Taxable Value	Millage Rate	Gross Tax	Credit	Net Tax
STATE TAX	35 900 00	14 360 00		14 360 00	250	3 59		3 59
COUNTY M&O	35 900 00	14 360 00		14 360 00	6 449	92 61		42 79
SALES TAX CREDIT				14 360 00	-3 469		-49 82	
COUNTY BOND	35 900 00	14 360 00		14 360 00	500	7 18		7 18
SCHOOL M&O	35 900 00	14 360 00		14 360 00	15 500	222 58		222 58
SCHOOL BOND	35 900 00	14 360 00		14 360 00	1 978	28 40		28 40
FIRE DISTRICT	35 900 00	14 360 00		14 360 00	1 000	14 36		14 36
TOTALS					22 208	368 72	-49 82	318 90

If receipt is desired, please send a self-addressed stamped envelope

If back taxes are due please call for correct amount as interest continues to accrue

Current Due	318 90
Penalty	31 89
Interest	00
Other Fees	00
Previous Payments	00
Back taxes	00
TOTAL DUE	350 79

Printed 06/27/2003

2002 Mobile Home Tax Statement

Bill No	Due Date	TOTAL DUE
2002-8239	05/01/2002	424 31

Joyce O Pendley
Forsyth County Tax Commissioner
110 E Main St
Suite 130
Cumming GA 30040

Map 0000406685

Payment good through 05/01/2003
Printed 06/27/2003

Location 4050 MCCONNELL RD

X

MAKE CHECK OR MONEY ORDER PAYABLE TO
Forsyth County Tax Commissioner

GREENTREE FINANCIAL SV CORP C/O ANGELA
F BAZZELL
2300 BETHELVIEW RD STE 110-138
CUMMING, GA 30040

RETURN THIS PORTION WITH PAYMENT

Joyce O Pendley
Forsyth County Tax Commissioner
110 E Main St
Suite 130
Cumming, GA 30040

Phone (770) 781-2110 Fax (770) 886-2828

Tax Payer GREENTREE FINANCIAL SV CORP C
Map Code 0000406685 M H (N H S)
Description MOBILE HOME PROPERTY
Bill No 2002-8239
District 001 FORSYTH COUNTY AT LARGE

Mobile Home		
Year	Make	Model/Ref#
1996	FLEETWOOD	052 006T001

Decal		Size		Serial Number	Fair Market Value	Due Date			Payment Good Through
Year	Number	Width	Length						
0	0	27	64		39 900	05/01/2002			05/01/2003

Entity	Adjusted FMV	Net Assessment	Exemptions	Taxable Value	Millage Rate	Gross Tax	Credit	Net Tax
STATE TAX	39 900 00	15 960 00		15 960 00	250	3 99		3 99
COUNTY M&O	39 900 00	15 960 00		15 960 00	6 879	109 79		47 56
SALES TAX CREDIT				15 960 00	-3 899		-62 23	
COUNTY BOND	39 900 00	15 960 00		15 960 00	500	7 98		7 98
SCHOOL M&O	39 900 00	15 960 00		15 960 00	15 082	240 71		240 71
SCHOOL BOND	39 900 00	15 960 00		15 960 00	1 978	31 57		31 57
FIRE DISTRICT	39 900 00	15 960 00		15 960 00	1 000	15 96		15 96
TOTALS					21 790	410 00	-62 23	347 77

If receipt is desired, please send a self-addressed stamped envelope

If back taxes are due please call for correct amount as interest continues to accrue

Current Due	347 77
Penalty	34 78
Interest	41 76
Other Fees	00
Previous Payments	00
Back taxes	00
TOTAL DUE	424 31

Printed 06/27/2003

2001 Mobile Home Tax Statement

Bill No	Due Date	TOTAL DUE
2001-1261	05/01/2001	445 28

Joyce O Pendley
Forsyth County Tax Commissioner
110 E Main St
Suite 130
Cumming, GA 30040

Map 0000406685

Payment good through 05/01/2003
Printed 06/27/2003

MAKE CHECK OR MONEY ORDER PAYABLE TO
Forsyth County Tax Commissioner

Location
X

GREENTREE FINANCIAL SV CORP C/O ANGELA
F BAZZELL
2300 BETHELVIEW RD STE
110-138
CUMMING GA 30040

RETURN THIS PORTION WITH PAYMENT

Joyce O Pendley
Forsyth County Tax Commissioner
110 E Main St
Suite 130
Cumming, GA 30040

Phone (770) 781-2110 Fax (770) 886-2828

Tax Payer GREENTREE FINANCIAL SV CORP C
Map Code 0000406685 M H (N H S)
Description POBILE HOME PROPERTY
Bill No 2001-1261
District 001 FORSYTH COUNTY AT LARGE

Mobile Home		
Year	Make	Model/Ref#
1996	FLEETWOOD	HARBOR SPR

Decal		Size		Serial Number	Fair Market Value	Due Date	Billing Date	Discount Date	Payment Good Through
Year	Number	Width	Length						
0	0	027	064		39 900	05/01/2001		04/28/2001	05/01/2003

Entity	Adjusted FMV	Net Assessment	Exemptions	Taxable Value	Millage Rate	Gross Tax	Credit	Net Tax
STATE TAX	39 900 00	15 960 00		15 960 00	250	3 99		3 99
COUNTY M&O	39 900 00	15 960 00		15 960 00	5 598	89 34		31 92
SALES TAX CREDIT				15 960 00	-3 598		-57 42	
COUNTY BOND	39 900 00	15 960 00		15 960 00	500	7 98		7 98
SCHOOL M&O	39 900 00	15 960 00		15 960 00	15 100	241 00		241 00
SCHOOL BOND	39 900 00	15 960 00		15 960 00	1 980	31 60		31 60
FIRE DISTRICT	39 900 00	15 960 00		15 960 00	993	15 85		15 85
TOTALS					20 823	389 76	-57 42	332 34

If receipt is desired, please send a self-addressed stamped envelope

If back taxes are due, please call for correct amount as interest continues to accrue

Current Due	332 34
Discount	0 00
Penalty	33 23
Interest	79 71
Other Fees	00
Previous Payments	00
Back taxes	00
TOTAL DUE	445 28

Printed 06/27/2003