FORM B10 (Official Form 10) (4/98) USBC Illinois Northern (4/1/98)

*FILE ORIGINAL FOR CHAPTERS 7 and 11 IN DUPLICATE FOR CHAPTER 13, FOR DATE-STAMPED COPY, SEE #9 BELOW

United States Bankruptcy Court
Northern District of Illinois, Eastern **Division**

☐ CH 7 ☐ CH 13 XX CH 11
PLEASE CHECK CHAPTER

PROOF OF CLAIM

Name of Debtor: Conseco Finance Corp.

Case Number: 02 B 49672

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

File Claim Form With
United States Bankruptcy Court
P O Box A3613
Chicago Illinois 60690 3612

Name of Creditor (The person or other entity to whom the debtor owes money or property)
Five Brothers Mortgage Co. Services and Securing, Inc.

☐ 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

Name and Address Where Notices Should be Sent
Thomas Kalas, Esq.
Kalas Kadian, P.L.C.
40900 Woodward Ave., Ste. 315
Bloomfield Hills, MI 48304
Telephone No (248)203-7174

XX 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

REC'D MAR 04 2003

Creditor # _____

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Account or other number by which creditor identifies debtor

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

1 BASIS FOR CLAIM

☐ Goods sold
☐ Money loaned
☐ Taxes
☐ Retiree benefits as defined in 11 U S C § 1114 (a)
XX Services performed
☐ Personal injury/wrongful death
☐ Other _____
☐ 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 June 2002/Feb 2003

3 IF COURT JUDGMENT DATE OBTAINED N/A

4 Total Amount of Claim at Time Case Filed $ 152,580
If all or part of your claim is secured or entitled to priority also complete Item 5 or 6 below total debt $202,914

☐ 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
Amount entitled to priority $ _____
Specify the priority of the claim

☐ Wages salaries or commissions (up to $4 300) *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 $1 950* 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 units11 U S C § 507(a)(8)
☐ Other—Specify applicable paragraph of 11 U S C § 507(a)_____

Amounts are subject to adjustment on 4/1/98 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 ANY ATTACHMENT MUST BE 8 1/2 ' BY 11

9 DATE STAMPED COPY To receive an acknowledgment of the filing of your claim enclose a stamped self addressed envelope and an additional copy of this proof of claim

THIS SPACE IS FOR COURT USE ONLY

FILED
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
FEB 24 2003
KENNETH S GARDNER, CLERK
ROOM - LL

Date 2/21/03

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)
Thomas Kalas - Attorney

Penalty for presenting fraudulent claim Fine of up to $500 000 or imprisonment for up to 5 years or both 18 U S

Conseco Finance Corp Claim
49675000453