FORM B10 (Official Form 10) (4/01)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS (Eastern Division)	PROOF OF CLAIM
Name of Debtor: CONSECO INC , ET AL ,	Case Number: 02-49672 Chapter 11

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): Virginia "Jenny" Zacher (Franklin County Treasurer)	☐ 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: FRANKLIN COUNTY TREASURER 1016 NORTH 4th AVE PASCO, WA 99301	☐ Check box if you have never received any notices from the bankruptcy court in this case.
Telephone number: (509) 545-3518	☐ Check box if the address differs from the address on the envelope sent to you by the court.

FILED
MAR 18 2003
BMC

THIS SPACE IS FOR COURT USE ONLY

Account or other number by which creditor identifies debtor: See Attached	Check here if this claim ☐ replaces ☐ amends a previously filed claim dated _____

1 Basis for Claim

- ☐ Goods sold
- ☐ Services performed
- ☐ Money loaned
- ☐ Personal injury/wrongful death
- ☒ Taxes
- ☐ Other _____
- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
- ☐ Wages, salaries and compensation (fill out below)

  Your SS # _____ _____ _____

  Unpaid compensation for services performed

  from _____ (date) to _____ (date)

2 Date debt was incurred: January 01, 1999

3 If court judgment, date obtained:

4 Total Amount of Claim at Time Case Filed $ 13,889.23

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 if any $ 13,889.23

** Subject to additional interest **

6 Unsecured Priority Claim

☒ Check this box if you have an unsecured priority claim

Amount entitled to priority $ 13,889.23

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 4/1/04 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 the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

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Conseco Finance Corp Claim
49675003327

Conseco Inc Claim
49672007844

Date	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)
March 12, 2003	Anna Moffatt, Bankruptcy Technician

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.

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Conseco Inc Claim
49672007844

Date	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)
March 12, 2003	Anna Moffatt, Bankruptcy Technician

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CLAIM

CASE NUMBER 02-49672

CHAPTER 11

CONSECO FINANCE CORPORATION
P O BOX 3290
FEDERAL WAY, WA 98063

CONSECO FINANCE SERV CORP
P O BOX 188
RANCHO CUCAMONGA CA 91730

REAL ESTATE
119-052-212

YEAR	TAX	INTEREST	TOTAL
2003	$ 1,412 02	$ -	$ 1 412 02
2002	$ 1,378 88	$ 303 35	$ 1 682 23
2001	$ 1 274 38	$ 433 29	$ 1,707 67
2000	$ 978 34	$ 450 04	$ 1 428 38
1999 H	$ 469 57	$ 230 09	$ 699 66

IRRIGATION
199-052-212

YEAR	TAX	INTEREST	TOTAL
2003	$ 150 00	$ -	$ 150 00
2002	$ 150 00	$ 16 50	$ 166 50
2001	$ 140 00	$ 32 20	$ 172 20
2000	$ 140 00	$ 49 00	$ 189 00

REAL ESTATE
113-823-090

YEAR	TAX	INTEREST	TOTAL
2003	$ 1,296 62	$ -	$ 1,296 62
2002	$ 1,217 64	$ 267 88	$ 1,485 52
2001	$ 164 26	$ 55 85	$ 220 11

112-383-526

YEAR	TAX	INTEREST	TOTAL
2003	$ 1,166 22	$ -	1166 22
2002	$ 949 20	$ 208 82	1158 02

113-772-049

YEAR	TAX	INTEREST	TOTAL
2003	$ 955 08	$ -	$ 955 08

GRAND TOTAL **$ 13,889 23**