B10 (Official Form 10) (04/10)

FILED
U.S. BANKRUPTCY CT.
NEW ALBANY DIVISION

2011 MAR 30 AM 10:48

SOUTHERN DISTRICT OF INDIANA
KEVIN P. DEMPSEY
CLERK

UNITED STATES BANKRUPTCY COURT Southern District of Indiana

PROOF OF CLAIM

Name of Debtor: Eastern Livestock Co., LLC

Case Number: 10-93904

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):
Kenneth Bryant

☐ Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent:
Kenneth Bryant
6565 Russell Springs Rd.
Columbia, KY 42728-8304

RECEIVED
APR 05 2011
BMC GROUP

Court Claim Number:_____
(If known)

Telephone number: 270 384-5830

Filed on:_____

Name and address where payment should be sent (if different from above):
KENNETH BRYANT
6565 RUSSELL SPRINGS RD.

☐ 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.

Telephone number: 270 384-5830

1. Amount of Claim as of Date Case Filed: $ 1151.92

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: SALE OF 2 HEAD OF CATTLE 1 BLACK HEIFER
(See instruction #2 on reverse side.) PURCHASE MONEY CLAIM ISAACS

3. Last four digits of any number by which creditor identifies debtor: 3837

3a. Debtor may have scheduled account as: _____
(See instruction #3a on reverse side.)

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: $**_____

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 $11,725*) 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 $2,600* 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 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

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:

Date: 3-28-11

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.

Kenneth Bryant KENNETH BRYANT

Eastern Livestock
00162

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.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:
Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

Creditor's Name and Address:
Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:
State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:
State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:
State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:
Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

4. Secured Claim:
Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a):
If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:
An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:
Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

Date and Signature:
The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS

Debtor
A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

Creditor
A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).

Claim
A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Proof of Claim
A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

Secured Claim Under 11 U.S.C. §506(a)
A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

Unsecured Claim
An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

Claim Entitled to Priority Under 11 U.S.C. §507(a) Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Redacted
A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identi fication, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Evidence of Perfection
Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

INFORMATION

Acknowledgment of Filing of Claim
To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (www.pacer.psc.uscourts.gov) for a small fee to view your filed proof of claim.

Offers to Purchase a Claim
Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

=========	=L-I-V-E-S-T-O-C-K=		===B U Y E R====								
--COD----	-TAG	HD	DESC------	NUMB	NAME--------		--WEIGHT---		--------		--TOTAL--
404	1	1		F	1	65	690	690	93.00	L	641.70
404	2	1		F	1	51	555	555	94.00	L	521.70
		===						======			=========
		2						1,245			1,163.40
CLF		2	1,245	1163.40	622	93.45	581.70				

10/26/10 GRAND TOTAL GROSS-- 2 1,163.40

COMMISSION	CHECK/OFF	YARDAGE	-INSUR-	VET	YDG#2	VOL/DED	---NET/CHECK--
	2.00	6.00			3.48		1,151.92

KENNETH BRYANT 3344

P&S/CODES: O=OFFICER B=BONDED-BUYER E=EMPLOYEE M=MARKET-SUPPORT

EASTERN LIVESTOCK CO., LLC
135 WEST MARKET
NEW ALBANY, IN 47150

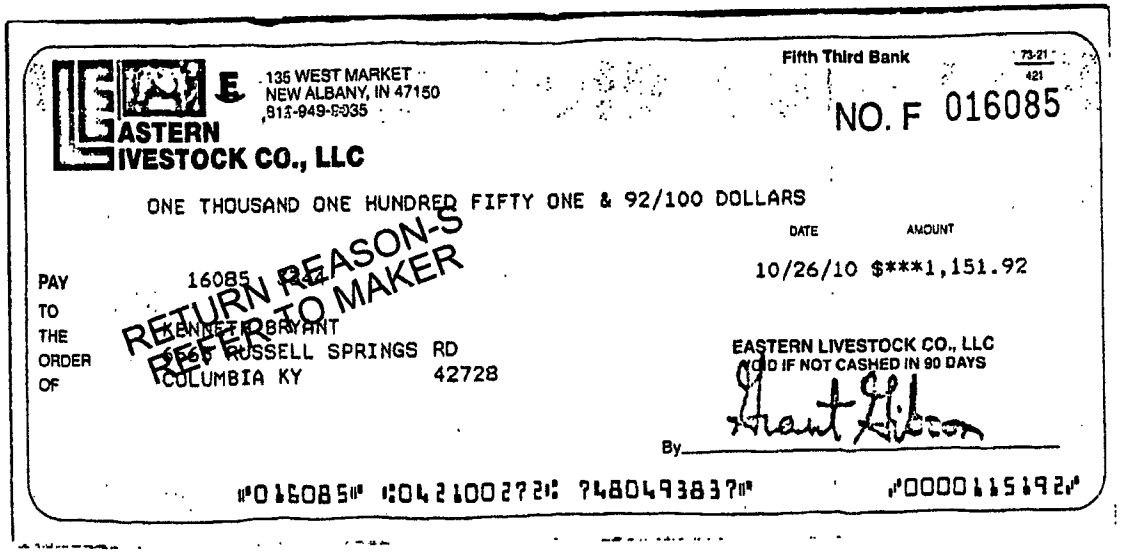
NO. F 016085

031000053
11/03/2010
002179

This is a LEGAL COPY of your check. You can use it the same way you would use the original check.

RETURN REASON-S
REFER TO MAKER

[031000053] 10/29/2010
000055000213788



EASTERN LIVESTOCK CO., LLC
135 WEST MARKET
NEW ALBANY, IN 47150
812-949-0035

Fifth Third Bank
73-21
421

NO. F 016085

ONE THOUSAND ONE HUNDRED FIFTY ONE & 92/100 DOLLARS

DATE 10/26/10 AMOUNT $***1,151.92

PAY TO THE ORDER OF
16085
KENNETH BRYANT
1667 RUSSELL SPRINGS RD
COLUMBIA KY 42728

RETURN REASON-S
REFER TO MAKER

EASTERN LIVESTOCK CO., LLC
VOID IF NOT CASHED IN 90 DAYS

By Grant Gibson

⑈016085⑈ ⑆042100272⑆ 74804938 37⑈ ⑈0000115192⑈

⑈016085⑈ ⑆042100272⑆ 74804938 37⑈ ⑈0000115192⑈

U.S. Department of Agriculture Grain Inspection, Packers and Stockyards Administration Packers and Stockyards Program	**Proof of Claim Under:** **1. Surety Bond, (Clause 2, 3, or 4)** **2. Trust Fund Agreement, (Clause 2, 3, or 4)** **3. Trust Agreement, (Clause 2, 3, or 4)** **Issued Under Provisions of The Packers and Stockyards Act, 1921, as Amended and Supplemented**

State of (1) KENTUCKY

County (2) ADAIR

As the undersigned, I, (3) KENNETH E. BRYANT
(full name of claimant)

Of (4) 6565 RUSSELL SPRINGS RD, COL, KY 42728 (5) 270-384-5830 - 606-219-6514
(complete mailing address) *(phone: home, cell)*

(other contact information: fax number, email address)

being duly sworn, depose and state:

I make this claim to (6) Capitol Indemnity Corporation
(name of trustee or surety)

Select One:

- ☒ under the bond issued by the (7a) Capitol Indemnity Corporation
  (name of surety company)
- ☐ under the Trust Fund Agreement with security held by (7b)
  (depository, if one named)
- ☐ under the Trust Agreement with letter of credit held by (7c)
  (name of trustee)

on behalf of (8) Eastern Livestock Co., LLC
(full name and address of principle named in bond or trust agreement)
135 West Market St., New Albany, IN 47150

in the amount of (9) 1151.92, due and owing for livestock purchased by

(10) Eastern Livestock Co., LLC 135 West Market St. New Albany, IN 47150
(full name and address of buyer) Clause 2, 3, or 4

for his own account or as a market agency buying livestock on a commission basis. This

claim is based on the following described livestock which was purchased by

(11) Eastern Livestock Co., LLC
(name of buyer) Clause 2, 3, or 4

(12)

Date of Sale	Number of Head	Description of Livestock	Amount
10-26-10	2	1 BLACK HEIFER CALF 1 SMOKY HEIFER CALF	$ 1151.92

Attached and made a part of this claim are copies of the account of purchase and other documents covering the livestock transaction, such as copies of checks issued and unpaid for the livestock purchased by:

(13) Eastern Livestock Co., LLC
(name of buyer) Clause 2, 3, or 4

and other documents indicating the sale of the livestock in question to such purchaser for which payment has not been made. (*If full and complete documents of the transaction are not available or if these papers have become lost or destroyed, the claimant should insert a statement below of the facts:*)

(14)

None of the claimed amounts has been paid, and there are no setoffs or counterclaims to the same.

I hereby authorize the Grain Inspection, Packers and Stockyards Administration, Packers and Stockyards Program to release this proof of claim form and all of the attached supporting documents to the trustee or other interested parties to facilitate the processing of my claim.

(15) Kenneth E. Bryant
(signature and title of claimant)

(16) Subscribed and sworn to before me this 15th day of Nov, 2010.

(17) Marcus J Vance

(18) Notary Public for the State of Kentucky

(19) Residing at Somerset, KY

My commission expires

(20) 2/19/11 *(seal)*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0580-0015 The time required to complete is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

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