



**U S BANKRUPTCY COURT-DISTRICT OF DELAWARE**  
**INSTRUCTIONS FOR COMPLETING 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 these general rules.*

**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 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 clerk of the bankruptcy court where the bankruptcy case was filed.

**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 the 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 a 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 Nonpriority 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 Claim*.

**Court, Name of Debtor, and Case Number:**

If not already pre-printed, fill in the name of the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the name of the debtor in the "In re" space provided and the name of the bankruptcy case number. If you received a notice of the case from the court, all of this information is near the top of the notice.

**Information about Creditor.**

If not already pre-printed, complete this 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 anyone else has already filed a proof of claim relating to this debt, if you never received notice from the bankruptcy court about this case, if your address differs from that to which the court sent notice, or if this proof of claim replaces or amends a proof of claim that was already filed, check the appropriate box 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 the debt was first owed by the debtor. Use the format MMDDYY (ie 100196 for October 1, 1996).

**3 Court Judgments**

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

**4 Classification of Claim**

Check either Secured, Unsecured Nonpriority or Unsecured Priority as appropriate. (See DEFINITIONS above.)

**5 Amount of Claim**

Insert the amount of claim at the time the case was filed in the appropriate box based on your selected Classification of Claim in item 4. 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.

**6,7,8 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 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 (WITH ATTACHMENTS, IF ANY)  
IF A CHAPTER 13 CASE INCLUDE A SECOND COPY WITH  
ANY ATTACHMENTS**

U S BANKRUPTCY COURT  
ATTN CLAIMS  
824 MARKET STREET  
5TH FLOOR  
WILMINGTON, DELAWARE 19801

SARAH E HAMSHER  
Owner, President



Awards &  
Trophies  
Inc

16079

611 Johnston Street  
Lafayette Louisiana 70501  
Phone (337) 233-9181  
Toll Free (856) 233-9181  
Fax (337) 264-9068

3-19-03

TERMS: DUE UPON RECEIPT UNLESS OTHER ARRANGEMENTS HAVE BEEN MADE. OUTSTANDING BALANCES OVER 30 DAYS OLD ARE SUBJECT TO 1 1/2% MONTHLY CHARGE (18% PER ANNUM), IN THE EVENT IT BECOMES NECESSARY TO EMPLOY AN ATTORNEY FOR COLLECTION OF THIS INVOICE THE UNDERSIGNED AGREES TO PAY A MINIMUM OF 25% OF THE AGGREGATE BALANCE DUE AS ATTORNEY'S FEE TOGETHER WITH INTEREST AS ABOVE STATED AND IF APPLICABLE ALL COURT COSTS INCURRED.		No	Description Code	Price
Anne LeBlanc SIGNATURE OF PURCHASER		3	8410 Daguer @ 28.50	85.50
		3	7x9' Daguer @ 22.50	67.50
		3	10905 @ 1.75	5.25
		1	1000 Set up	N/C
		441	1/2" x 1/4" Letter @ 94-2000 P.S.	74.10
FILE NAME	Disc / Card	3	Certificate Daguer @ 17.95	53.85
				280.20
			TX	22.90
			Total	309.10
Date Due	3/24/03	When	Now	
Caled	5	Date	3/24/03	Time
		Answer	1010	✓

Charles Crockett

PLEASE PAY THIS INVOICE, NO STATEMENT WILL BE SENT

This is a binding order on part of the purchaser unless the producer fails to meet production date or order specifications. All orders payable on delivery unless special arrangements are made in advance. This is your copy. Pay from this invoice.

Name Fleming Lefayette  
Address 90 Anne LeBlanc  
Street City Zip

Fax \_\_\_\_\_  
1st Phone 834-2885  
2nd Phone 286-5140