

**UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE**

**PROOF OF CLAIM**



In re  
**HEAD DISTRIBUTING CO.**

Case Number  
**03-10963 (MFW)**

Bar Date Ref #

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 and Address**  
  
Curtis Blair  
Revenue Commissioner  
Pike County Courthouse  
~~Pike County Tax Collector~~  
120 W Church St  
Troy AL 36081-1919

0364653000000

- 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.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

Creditor Telephone Number ( )  
  
CREDITOR TAX ID #  
**63-6001676**

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR  
**162870**

Check here  replaces or amends a previously filed claim dated \_\_\_\_\_

**1 BASIS FOR CLAIM**

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

Your social security number \_\_\_\_\_  
Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_  
(date) (date)

**2 DATE DEBT WAS INCURRED**

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ \_\_\_\_\_ (unsecured) \$ **13.13** (secured) \$ \_\_\_\_\_ (unsecured priority) \$ **13.13** (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**

**6 UNSECURED PRIORITY 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 Personal Property  
  
Value of collateral \$ 977 Appraised Value \_\_\_\_\_  
Amount of arrearage and other charges at time case filed included in secured claim above if any \$ \_\_\_\_\_

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 this proof of 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 p.m., September 15, 2003, Pacific Daylight Time.

BY MAIL TO  
Bankruptcy Management Corporation  
P.O. BOX 900  
El Segundo, CA 90245-0900

BY HAND OR OVERNIGHT DELIVERY TO  
Bankruptcy Management Corporation  
1330 East Franklin Avenue  
El Segundo, CA 90245

THIS SPACE FOR COURT  
**FILED**  
AUG 19 2003  
**BMC**

DATE SIGNED  
**8-14-03**

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).  
*Curtis Blair*

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



See Other Side For Instructions

07/07/2003

PIKE

COUNTY PERSONAL PROPERTY

2003

BUSINESS TYPE CONVENIENCE STORES

Acct. 162870

Name HEAD DISTRIBUTING

DBA HEAD DISTRIBUTING

BNO 26990 CITY. 02 SCH-CODE 01

DELOITTE & TOUCHE

Addr 5550 LBJ FREEWAY STE 700

Residue (Assd) 0

DALLAS

TX 75240

Comments)

REND ITEM	YEAR	COST	LIFE	INDEX	COND	APPR	VAL
1 FROZEN DRINK EQUIP	2001	1050 00	10	1 00	93		977
Records printed =	1	Total Cost	1050.00	Total Appraised			977

- MUNICIPAL CODES
- 02 TROY
- 03 BRUNDIDGE
- 04 GOSHEN
- 05 BANKS



**CURTIS BLAIR - REVENUE COMMISSIONER PIKE COUNTY**  
 PIKE COUNTY COURTHOUSE  
 TROY ALABAMA 36081

PHONE 334 566 0706  
 FAX 334 566 6382

This is your property tax bill Pay by check or money order  
 Tax due Oct 1 Delinquent Jan 1 Return canary copy with payment

2003

ACCOUNT NUMBER	RECEIPT NUMBER
162870	

ASSESSED VALUE	TOTAL TAXES STATE/COUNTY	HOMESTEAD EXEMPTION VALUE	S-STATE & SCHOOL COUNTY	NET TAXES STATE/COUNTY	DISTRICT SCHOOL TAX	MUNICIPAL TAX	FOREST TAX	FEES	TOTAL TAX
220	1.43 0	0	0 0 00	1.43	0.66	1.54			
	4.28 0	0	0 0 00	4.28	0.00	0.00			
					0.22	0.00			
						0.00			
							0.00	5.00	

NOTE

NO PENALTY OR INTEREST WILL BE CHARGED IF PAID BEFORE DECEMBER 31

Personal Property

OWNER NAME AND ADDRESS

TOTAL TAXES

8.17

HEAD DISTRIBUTING  
 DELOITTE & TOUCHE  
 5550 LBJ FREEWAY STE 700  
 DALLAS TX 75240-

INTEREST	0.00
DELO FEE	0.00
CITATION	0.00
ADVERTISING	0.00
COURT FEE	0.00
	0.00
<b>GRAND TOTAL</b>	<b>*****\$13.17</b>

*2003 Litigation*  
*Case #03-10963(MFW)*

DATE PAID	TELLER NO.	PAID BY:
CHECK <input type="checkbox"/>		CASH <input type="checkbox"/>

TAXES DUE OCT 1  
 DELINQUENT JAN 1