

Fill in this information to identify the case:

Debtor 1 INGERSOLL FINANCIAL, LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Middle District of Florida

Case number 6:17-bk-07077-KSJ

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor? City of Jacksonville
Name of the current creditor (the person or entity to be paid for this claim)
Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?
 No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>City of Jacksonville c/o W. Mummaw</u> Name <u>117 West Duval Street, Suite 480</u> Number Street <u>Jacksonville FL 32202</u> City State ZIP Code Contact phone <u>904-630-1839</u> Contact email <u>wmummaw@coj.net</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p><u>City of Jacksonville</u> Name <u>214 N. Hogan Street, 7th Floor</u> Number Street <u>Jacksonville FL 32202</u> City State ZIP Code Contact phone <u>904-255-7020</u> Contact email <u>mbcameron@coj.net</u></p>
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Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
 No
 Yes. Claim number on court claims registry (if known) _____ Filed on _____
MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?
 No
 Yes. Who made the earlier filing? _____

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 1 0 7 7

7. How much is the claim? \$ 605.14. Does this amount include interest or other charges? No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.
Nuisance lien

9. Is all or part of the claim secured? No Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
 Motor vehicle
 Other. Describe: Nuisance lien
Basis for perfection: Tax Notice
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ 30,156.00
Amount of the claim that is secured: \$ 605.14
Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ 605.14
Annual Interest Rate (when case was filed) 12.00 %
 Fixed
 Variable

10. Is this claim based on a lease? No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check one:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____

Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____

Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ _____

Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____

Other. Specify subsection of 11 U.S.C. § 507(a)() that applies. \$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that 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.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/05/2018
MM / DD / YYYY

/s/ Wendy L. Mummaw
Signature

Print the name of the person who is completing and signing this claim:

Name Wendy Leigh Mummaw
First name Middle name Last name

Title Assistant General Counsel

Company Office of General Counsel
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 117 West Duval Street, Suite 480
Number Street
Jacksonville FL 32202
City State ZIP Code

Contact phone (904)630-1839 Email wmummaw@coj.net

**CITY OF JACKSONVILLE
REGULATORY COMPLIANCE DEPARTMENT
MUNICIPAL CODE COMPLIANCE DIVISION
CERTIFICATE OF COST / LIEN**



**TO: The Honorable Ronald Fussell
Clerk of Circuit and County Courts**

**Print Date: 12/19/2016
Case #: 2016-195232**

**The Honorable Michael Corrigan
Tax Collector**

RE: Statement of Costs Incurred by the City to Abate Property Safety and Maintenance Code violations, Pursuant to Chapter 518.

Lien Number: NBNL17001077

Legal Description of Real Property:

19-94 10-2S-26E COLLEGE GARDENS UNIT 1 LOT 24 BLK 1
RE No.: 051293-0000

Owner (s) and address (es) as shown in Public Records of Duval County:

Owner: INGERSOLL FINANCIAL LLC
Address: 1101 N LAKE DESTINY RD
SUITE 450
MAITLAND FL 32751

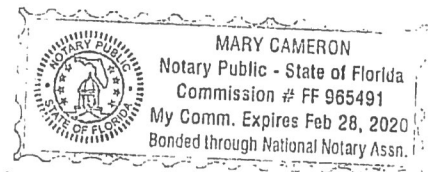
Principal amount of lien to be recorded in the Clerk of Courts' Records and Official Lien Tracking System. Note: This amount does not include accrued interest: \$540.34

Date work completed and/or approved: 12/13/2016

I hereby certify this document is a true copy of the foregoing Certificate of Cost/Lien, and a copy of the lien invoice was mailed to the listed owner at the above address.

Certified by :

Bryan D. Mosier
Chief, Municipal Code Compliance Division



Notary :

**For questions regarding this lien, please call (904) 255 - 7000.
For information concerning lien payment, please call (904) 630 - 2935.**

Published in Financial News and Daily Record on or about: 12/22/2016

Invoice: NBNL17001077

**Municipal Code Compliance Division
214 Hogan Street, N., Suite 134
Jacksonville, FL 32202**

Sec. 518.212. - Payment and enforcement of lien and interest thereon.

A lien provided for in this Chapter may be paid within 180 days after the publication of the notice of assessment and lien as provided in Section 518.208 without interest. Thereafter, the amount of the lien, including administrative costs and cost of publication of notice of assessment and lien, together with interest at the rate of 12 percent per annum commencing from the date of filing of the lien, and costs of collection, including but not limited to collection agency fees, attorneys fees and court costs, shall be a lien against the property and shall be collected and enforceable in the same manner as is provided by law for the enforcement of other taxes or special assessment liens levied upon the property. Such nuisance abatement liens shall be prior in dignity to all other liens or encumbrances of any kind against the property, except the liens of the state, county and city for taxes, which shall be of equal dignity with the special assessment lien for nuisance abatement. All funds collected in accordance with this section shall be deposited into the Nuisance Abatement Lien Special Revenue Fund as provided in section 111.470, Ordinance Code. The Nuisance Abatement Lien Special Revenue Fund shall supplement general revenue funding for nuisance abatement contractual services.

(Ord. 96-458-297, § 1; Ord. 98-496-E, § 2; Ord. 2006-1363-E, § 1; Ord. 2007-286-E, § 4)

Note— Former § 518.211. See editor's note following § 518.206.

Middle District of Florida Claims Register

[6:17-bk-07077-KSJ Ingersoll Financial, LLC](#)

Judge: Karen S. Jennemann **Chapter:** 11
Office: Orlando **Last Date to file claims:** 02/26/2018
Trustee: **Last Date to file (Govt):**

Creditor: (27340518) **Claim No:** 3 *Status:*
City of Jacksonville *Original Filed* *Filed by:* CR
Municipal Code Compliance *Date:* 02/05/2018 *Entered by:* Wendy L Mummaw
214 Hogan Street N., Ste 134 *Original Entered* *Modified:*
Jacksonville, FL 32202 *Date:* 02/05/2018

Amount claimed: \$605.14
Secured claimed: \$605.14

History:

[Details](#) [3-1](#) 02/05/2018 Claim #3 filed by City of Jacksonville, Amount claimed: \$605.14 (Mummaw, Wendy)

Description: (3-1) Nuisance lien

Remarks: (3-1) NBNL17001077

Claims Register Summary

Case Name: Ingersoll Financial, LLC
Case Number: 6:17-bk-07077-KSJ
Chapter: 11
Date Filed: 11/07/2017
Total Number Of Claims: 1

Total Amount Claimed*	\$605.14
Total Amount Allowed*	

*Includes general unsecured claims

The values are reflective of the data entered. Always refer to claim documents for actual amounts.

	Claimed	Allowed
Secured	\$605.14	
Priority		
Administrative		