

Fill in this information to identify the case:	
Debtor 1	<u>Ingersoll Financial, LLC</u>
Debtor 2 (Spouse, if filing)	_____
United States Bankruptcy Court for the: <u>Middle</u> District of <u>Florida</u> (State)	
Case number:	<u>6:17-bk-07077-KSJ</u>

FILED
 U.S. Bankruptcy Court
 Middle District of FL
 2/9/2018
 Sheryl L. Loesch, Clerk

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?	<u>City of Jacksonville</u> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____														
3. Where should notices and payments to the creditor be sent?	<table border="0"> <tr> <th>Where should notices to the creditor be sent?</th> <th>Where should payments to the creditor be sent? (if different)</th> </tr> <tr> <td><u>City of Jacksonville</u></td> <td>_____</td> </tr> <tr> <td>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</td> <td>Name</td> </tr> <tr> <td>Name Municipal Code Compliance 214 Hogan Street N., Ste 134 Jacksonville, FL 32202</td> <td>Name</td> </tr> <tr> <td>Contact phone <u>904-630-1854</u></td> <td>Contact phone _____</td> </tr> <tr> <td>Contact email <u>kpapa@coj.net</u></td> <td>Contact email _____</td> </tr> <tr> <td colspan="2">Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</td> </tr> </table>	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	<u>City of Jacksonville</u>	_____	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	Name Municipal Code Compliance 214 Hogan Street N., Ste 134 Jacksonville, FL 32202	Name	Contact phone <u>904-630-1854</u>	Contact phone _____	Contact email <u>kpapa@coj.net</u>	Contact email _____	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)														
<u>City of Jacksonville</u>	_____														
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name														
Name Municipal Code Compliance 214 Hogan Street N., Ste 134 Jacksonville, FL 32202	Name														
Contact phone <u>904-630-1854</u>	Contact phone _____														
Contact email <u>kpapa@coj.net</u>	Contact email _____														
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____															
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____														

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

<p>6. Do you have any number you use to identify the debtor?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____</p>
<p>7. How much is the claim?</p>	<p>\$ 12,222.12</p> <p>Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).</p>
<p>8. What is the basis of the claim?</p>	<p>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 healthcare information.</p> <p>municipal code/nuisance liens</p>
<p>9. Is all or part of the claim secured?</p>	<p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. The claim is secured by a lien on property.</p> <p>Nature of property: <input checked="" type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>. <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____</p> <p>Basis for perfection: _____</p> <p>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.)</p> <p>Value of property: \$ 26,485.00</p> <p>Amount of the claim that is secured: \$ 12,222.12</p> <p>Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</p> <p>Amount necessary to cure any default as of the date of the petition: \$ 12,222.12</p> <p>Annual Interest Rate (when case was filed) 12 %</p> <p><input checked="" type="radio"/> Fixed <input type="radio"/> Variable</p>
<p>10. Is this claim based on a lease?</p>	<p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</p>
<p>11. Is this claim subject to a right of setoff?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____</p>

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply.</i>	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.	<input type="checkbox"/> 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). <input type="checkbox"/> 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). <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)() that applies	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____
* Amounts are subject to adjustment on 4/1/19 and every 3 years after that for cases begun on or after the date of adjustment.		

Part 3: Sign Below

<p>The person completing this proof of claim must sign and date it. FRBP 9011(b).</p> <p>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</p> <p>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.</p>	<p>Check the appropriate box:</p> <p><input type="checkbox"/> I am the creditor.</p> <p><input checked="" type="checkbox"/> I am the creditor's attorney or authorized agent.</p> <p><input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.</p> <p><input type="checkbox"/> I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.</p> <p>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.</p> <p>I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date <u>2/9/2018</u></p> <p style="text-align: center; font-size: small;">MM / DD / YYYY</p> <p><u>Kelly Papa</u></p> <p>Signature</p> <p>Print the name of the person who is completing and signing this claim:</p> <p>Name <u>Kelly Papa</u></p> <p style="text-align: center; font-size: small;">First name Middle name Last name</p> <p>Title <u>Assistant General Counsel</u></p> <p>Company <u>City of Jacksonville – Office of General Counsel</u></p> <p>Address <u>117 W. Duval St., Suite 480</u></p> <p style="text-align: center; font-size: small;">Identify the corporate servicer as the company if the authorized agent is a servicer</p> <p style="text-align: center; font-size: small;">Number Street</p> <p style="text-align: center; font-size: small;">Jacksonville, FL 32202</p> <p style="text-align: center; font-size: small;">City State ZIP Code</p> <p>Contact phone <u>904-630-1854</u> Email <u>kpapa@coj.net</u></p>
--	--

INGERSOLL FINANCIAL LLC

1101 N LAKE DESTINY RD

SUITE 450

MAITLAND, FL 32751

Primary Site Address

1922 S COLLEGE CIR

Jacksonville FL 32209

Official Record Book/Page

16901-00506

Tile #

6410

1922 S COLLEGE CIR

Property Detail

RE #	051293-0000
Tax District	USD1
Property Use	0100 Single Family
# of Buildings	1
Legal Desc.	19-94 10-2S-26E COLLEGE GARDENS UNIT 1
Subdivision	00781 COLLEGE GARDENS UNIT 01
Total Area	5860

Value Summary

	2017 Certified	2018 In Progress
Value Method	CAMA	CAMA
Total Building Value	\$26,485.00	\$26,183.00
Extra Feature Value	\$0.00	\$0.00
Land Value (Market)	\$3,671.00	\$3,671.00
Land Value (Agric.)	\$0.00	\$0.00
Just (Market) Value	\$30,156.00	\$29,854.00
Assessed Value	\$30,156.00	\$29,854.00
Cap Diff/Portability Amt	\$0.00 / \$0.00	\$0.00 / \$0.00
Exemptions	\$0.00	See below
Taxable Value	\$30,156.00	See below

The sale of this property may result in higher property taxes. For more information go to [Save Our Homes](#) and our [Property Tax Estimator](#). 'In Progress' property values, exemptions and other supporting information on this page are part of the working tax roll and are subject to change. Certified values listed in the Value Summary are those certified in October, but may include any official changes made after certification. [Learn how the Property Appraiser's Office values property.](#)

Taxable Values and Exemptions – In Progress

If there are no exemptions applicable to a taxing authority, the Taxable Value is the same as the Assessed Value listed above in the Value Summary box.

County/Municipal Taxable Value

No applicable exemptions

SJRWMD/FIND Taxable Value

No applicable exemptions

School Taxable Value

No applicable exemptions

Sales History

Book/Page	Sale Date	Sale Price	Deed Instrument Type Code	Qualified/Unqualified	Vacant/Improved
16901-00506	8/27/2014	\$100.00	QC - Quit Claim	Unqualified	Improved
15782-02477	4/15/2011	\$100.00	QC - Quit Claim	Unqualified	Improved
12507-00327	5/13/2005	\$83,000.00	WD - Warranty Deed	Unqualified	Improved
12455-00814	3/30/2005	\$100.00	WD - Warranty Deed	Unqualified	Improved
12392-01011	3/30/2005	\$45,000.00	WD - Warranty Deed	Unqualified	Improved
11738-02281	3/15/2004	\$37,000.00	WD - Warranty Deed	Unqualified	Improved
11439-00147	10/17/2003	\$1,000.00	CT - Certificate of Title	Unqualified	Improved
10066-01701	7/3/2001	\$100.00	QC - Quit Claim	Unqualified	Improved
07979-01862	11/17/1994	\$100.00	MS - Miscellaneous	Unqualified	Improved
01285-00054	1/1/1899	\$100.00	- Unknown	Unqualified	Unknown

Extra Features

No data found for this section

Land & Legal

Land

LN	Code	Use Description	Zoning	Front	Depth	Category	Land Units	Land Type	Land Value
1	0100	RES LD 3-7 UNITS PER AC	RLD-60	55.00	100.00	Common	55.00	Front Footage	\$3,671.00

Legal

LN	Legal Description
1	19-94 10-2S-26E
2	COLLEGE GARDENS UNIT 1
3	LOT 24 BLK 1

Buildings

Building 1

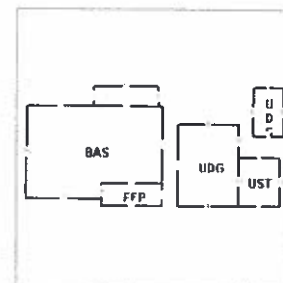
Building 1 Site Address
1922 S COLLEGE CIR Unit
Jacksonville FL 32209

Building Type	0101 - SFR 1 STORY
Year Built	1947
Building Value	\$26,183.00

Type	Gross Area	Heated Area	Effective Area
Addition	85	85	76
Unfin Det Scrn Porch	104	0	36
Unfinished Storage	143	0	57
Unfin Det			

Element	Code	Detail
Exterior Wall	7	7 Cem Fib Shing
Roof Struct	3	3 Gable or Hip
Roofing Cover	3	3 Asp/Comp Shng
Interior Wall	3	3 Plastered
Int Flooring	12	12 Hardwood
Heating Fuel	4	4 Electric
Heating Type	4	4 Forced-Ducted
Air Cond	3	3 Central

Element	Code	Detail
Stories	1.000	
Bedrooms	3.000	
Baths	1.000	





Login is for County Staff Only

Property Tax Search

Account Detail

Login

Welcome

Account Detail

Property Tax Search

Search Results

Tangible Tax Search

Important Notice

Local Business Tax Search

The information contained herein does not constitute a title search and should not be relied on as such. There may be additional balances that do NOT display on this website: unpaid liens, installment accounts or defeted accounts.

Collection Cart

Tax Collector Home

To better serve property owners homestead and other exemption-related liens filed by the Property Appraiser's Office have been added to the Tax Collector's software. These exemption-related liens are now viewable and payable online. These lien types may be researched at the Clerk of Court's website www.duvalclerk.com

Property Tax Account Details

Account	Property Type	Last Update
051293-0000	REAL ESTATE	1/23/2018 10:36:42 AM
Mailing Address: INGERSOLL FINANCIAL LLC 1101 N LAKE DESTINY RD SUITE 450 MAITLAND, FL 32751		SITUS: 1922 S COLLEGE CIR 32209
Millage Code USD1	Escrow Code	
Legal Description		
19-94 10-2S-26E COLLEGE GARDENS UNIT 1 LOT 24 BLK 1		

Pay Current Taxes

Select a payment option:

2017 - \$746.34

ADD TO CART

Pay Delinquent Taxes

Select a payment option:

2016 - \$943.10

2015 - \$1,306.56

2014 - \$1,712.84

2013 - \$1,993.45

ADD TO CART

Cart: \$0.00

Nuisance and Demolition Liens

Nuisance and Demolition Liens are NOT included in the Property Tax bill. These liens must be paid separately. Please call (904) 255-7000 for information regarding these specific lien types.

Lien Number	Lien Type	Lien Date	Amount Due
NBNL17004380	Nuisance Lien	8/23/2017	\$616.80
NBNL17001868	Nuisance Lien	1/26/2017	\$668.97
NBNL17001077	Nuisance Lien	12/13/2016	\$610.54
NBNL16003753	Nuisance Lien	5/24/2016	\$638.23
NBNL16000426	Nuisance Lien	11/16/2015	\$664.35
NBNL15007369	Nuisance Lien	9/15/2015	\$622.47
NBNL15004674	Nuisance Lien	4/9/2015	\$945.76
NBNL14004776	Nuisance Lien	6/6/2014	\$723.79
NBNL14001241	Nuisance Lien	12/7/2013	\$716.07
NBNL13004936	Nuisance Lien	6/19/2013	\$485.48
NBNL13000791	Nuisance Lien	11/27/2012	\$645.24
NBNL12006967	Nuisance Lien	9/25/2012	\$924.77
NBNL11002956	Nuisance Lien	1/5/2011	\$1,027.01
NBNL10005958	Nuisance Lien	8/12/2010	\$944.36
NBNL10004091	Nuisance Lien	4/14/2010	\$618.95
NBNL10003855	Nuisance Lien	4/7/2010	\$1,134.44
NBNL09003665	Nuisance Lien	9/11/2009	\$534.89

Property Tax Bills

Tax Year	Folio	Owner Name	Amount Due
2017	1097433.0000	INGERSOLL FINANCIAL LLC	\$746.34
2016	1097074.0000	INGERSOLL FINANCIAL LLC	\$943.10
2015	1096971.0000	INGERSOLL FINANCIAL LLC	\$1,306.56
2014	1095915.0000	INGERSOLL FINANCIAL LLC	\$1,712.84
2013	1095541.0000	RESIDENTIAL FUND MANAGER 76	\$1,993.45
2012	1095533.0000	RESIDENTIAL FUND MANAGER 76	\$0.00
2011	1095435.0000	KUERS DUSTIN S	\$0.00
2010	1094384.0000	KUERS DUSTIN S	\$0.00
2009	1095222.0000	KUERS DUSTIN S	\$0.00
2008	1094688.0000	KUERS DUSTIN S	\$0.00
2007	1098448.0000	KUERS DUSTIN S	\$0.00
2006	1327427.0000	KUERS DUSTIN S	\$0.00
2005	1085415.0000	KUERS DUSTIN S	\$0.00
2004	1083120.0000	FRONTIER PROPERTIES LLC	\$0.00
2002	1083120.0000	STRAIN JOSEPH JR	\$0.00
2001	1083120.0000	STRAIN JOSEPH JR	\$0.00
Total			\$6,702.29

Unpaid Tax Certificates

Tax Year	Folio	Certificate Year	Certificate Number	Certificate Holder Name	TDA Number
2016	1097074.0000	2017	9068.000	MATHON INVESTMENTS	0
2015	1096971.0000	2016	9350.000	DUVAL COUNTY	0
2014	1095915.0000	2015	30959.000	MATHON INVESTMENTS	0
2013	1095541.0000	2015	30960.000	DUVAL COUNTY	0

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):**

<i>Creditor:</i> (27340518)	Claim No: 6	<i>Status:</i>
City of Jacksonville	<i>Original Filed</i>	<i>Filed by:</i> CR
Municipal Code Compliance	<i>Date:</i> 02/09/2018	<i>Entered by:</i> Auto-Claim Filer
214 Hogan Street N., Ste 134	<i>Original Entered</i>	<i>Modified:</i>
Jacksonville, FL 32202	<i>Date:</i> 02/09/2018	

Amount claimed: \$12222.12
 Secured claimed: \$12222.12

History:

[Details](#) [6-1](#) 02/09/2018 Claim #6 filed by City of Jacksonville, Amount claimed: \$12222.12 (Auto-Claim Filer)

Description:

Remarks:

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*	\$12222.12
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	\$12222.12	
Priority		
Administrative		