Fill in this information to identify the case:
Debtor 1 Body Contour Ventures, LLC
Debtor 2 (Spouse, if filing)
United States Bankruptcy Court **Eastern District of Michigan**
Case number: **19-42510**

FILED
U.S. Bankruptcy Court
Eastern District of Michigan
6/17/2019
Katherine B. Gullo, 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?

Tabatha Monique Frazier

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)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent? (if different)**
Tabatha Monique Frazier	
Name	Name
1366 Sarah's Landing Jacksonville, FL 32221	
Contact phone 843-476-6474	Contact phone
Contact email tabfrazier17@gmail.com	Contact email

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?

LIGHTRX POC
00999

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: _____

7. **How much is the claim?** $ 1732.48

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 healthcare information.

$2500 liposuction procedure, half paid down, half on payment plan, 4 payments total $482.48, $1732.48 total

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: _____

Basis for perfection: _____

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: $ _____

Amount of the claim that is secured: $ _____

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: $ _____

Annual Interest Rate (when case was filed) _____ %

- ☐ 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 all that apply*:	**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 6/17/2019
MM / DD / YYYY

/s/ Tabatha Monique Frazier
Signature

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

Name: Tabatha Monique Frazier
First name Middle name Last name

Title:

Company:

Identify the corporate servicer as the company if the authorized agent is a servicer

Address: 1366 Sarah's Landing
Number Street

Jacksonville, FL 32221
City State ZIP Code

Contact phone 843−476−6474 Email tabfrazier17@gmail.com

Professional Services By
LightRx Virginia Beach 4625 Virginia Beach Blvd Ste. 105 Virginia Beach, VA 23462

Invoice Balance	Invoice Number
$1,250.00	02851266
Minimum Due	**Amount Enclosed**
$1,250.00	

For Billing Questions: (757) 335-4287

Payment Due Date	01/07/2019

Tabatha Frazier
1936 A Muskett RD
Newport News, VA 23603

LIGHTRx FACE & BODY

Date	Description	Charges	Credits	Balance
12/31/2018	SculpSure Flanks 4 @ $2,500.00 - No Tax	$10,000.00		$10,000.00
	Individual Service Discount		$7,500.00	$2,500.00
12/31/2018	Package Rx Lipo Abdomen 10 Tx 1 @ $990.00 - No Tax	$990.00		$3,490.00
	Individual Service Discount		$990.00	$2,500.00
12/31/2018	UGA Servicing Contract 1 @ $0.00	$0.00		$2,500.00
12/31/2018	Visa Payment		$1,250.00	$1,250.00
01/07/2019			Balance:	$1,250.00

Signature: _____ Date: 12/31/2018

Thank you for visiting LightRx of Virginia Beach. This is your receipt. Please retain for your records. *Lifetime Promise - This is our dedication to each of our clients. In the event that your optimal results take longer than 8 treatments, you will receive 2 additional treatments free of charge. Any additional treatments may be purchased at 90% off current treatment prices. *Cancellation Policy - Please provide 24 hour notice to cancel an appointment. Failure to provide notice may result in a $50 cancellation fee.

Issued by: UAS

Statement in reference to your account with: Light RX Face & Body
Account#: [redacted]OA01

12/31/2018 - 01/19/201

Summary of Account Activity	
Previous Balance	$0.00
- Payments, Credits, Other	$0.00
+ New Purchases	$1,250.00
+ Fees Charged	$0.00
+ Interest Charged	$0.00
New Balance	$1,250.00
Credit Limit	$2,500.00
Credit Available	$1,250.00
Statement Date	01/19/2019
Days in Billing Cycle	20

Payment Information	
Min Monthly Payment	$120.62
Past Due Amount **Due Immediately**	$0.00
Minimum Payment Due	**$120.62**
Payment Due Date	02/13/2019

Questions?

(888) 233-2302
or go online: universalaccountservicing.com

Write to us:

Mail Payments to: - PO Box 901571, Kansas City, MO 64190
For other Correspondence: - PO Box 901571, Kansas City, MO 64190

Interest Charge Calculation for Unexpired Deferred Interest Plans, if Any

*PROMOTION PLAN NOTICE: Your promotion plan(s) expiration date(s) may differ from your payment due date. To avoid Total Deferred Interest charges, pay your Minimum Payments Due on-time each month and your Balance Subject to Deferred Interest by the promotion expiration date. Any amount shown as a Balance Subject to Deferred Interest is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Your **Annual Percentage Rate (APR)** is the annual interest rate on your account.

Type of Balance	Purchase Description	APR	Promo Expiration Date*	Balance Subject to Deferred Interest*	Deferred Interest Charges	Total Deferred Interest Charges
Promo	laser services	27.9%	07/04/2019	$1,250.00	$19.11	$19.11

Notices

Pay Online: uportal360.com - Account Number: TTADLXN - Access Code: 762814 **Our records indicate that you have a recurring payment set up. Your next payment will be debited using the VISA account on file.*** -

Transactions

Payments, Credits, Other

Transaction Date	Post Date	Description	Amount

Purchases

Date	Ref#	Description	Amount
12/31/2018	CRG1812310000171684	laser services	$1,250.00

Fees

	Date	Description	Amount
		TOTAL FEES FOR THIS PERIOD:	$0.00

Interest Charged

Interest Charges on Purchases	$0.00
TOTAL INTEREST FOR THIS PERIOD:	$0.00

Total Fees and Interest Charged for the Year to Date

Description	Amount
Total fees charged to date in 2019	$0.00
Total interest charged to date in 2019	$0.00

Interest Charge Calculation for Purchases

*Any amount shown as a Balance Subject to Interest Rate is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Type of Balance	APR	*Balance Subject to Interest Rate	Interest Charge
Purchases	27.9%	$0.00	$0.00

Statement in reference to your account with: Light RX Face & Body
Account#: TTADLXNLOA01 12/31/2018 - 01/19/201

What To Do If You Think You Have Found a Mistake on your Statement

If you think there is an error on your statement, write to us on a separate sheet of paper and send to , PO Box 901571, Kansas City, M 64190.

In your letter please include the following information:

- Your Name and Account number
- Amount of the error in question
- A description of the problem and information that supports your claim

You must contact us within 60 days from when the error appeared on your statement.

All correspondence of potential errors must be in written format. You may choose to call us, however we are not required to investigate ar potential errors and calling may result in paying the full amount in question.

While we investigate your claim, the following statements are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. If we determin that we have indeed made an error all, charges and fees will be reversed for the amount in question.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit if applicable.

Balance Subject to Interest Rate

We calculate the interest charges for each Account balance by applying the "daily periodic rate" for that balance to the "daily balance" c that balance. We do this for each day in the billing cycle and then add together the resulting interest charges. This gives us the total interes charges for that balance for that billing cycle. The "daily periodic rate" is a daily interest rate. The daily periodic rate for a given balance equal to the APR for that balance divided by 365.

We calculate the "daily balance" for each balance. We do this by starting with the beginning amount of that balance. We add any ne purchases for that day, excluding any unpaid interest charges and fees, and subtract any payments or credits. This gives us the "dai balance." We may exclude new purchases from the daily balance that are subject to interest charges, if the law, our Agreement or th Promotional Terms require us to do so. If this happens, we will include these purchases in the daily balance subject to interest charges a soon as the law, our Agreement or the Promotional Terms allow.

Although we use the "daily balance" method to figure account interest charges, any amount the statement shows as the Balance Subject t Interest Rate or the Balance Subject to Deferred Interest is an "average daily balance." Except for minor differences due to roundin interest charges may be determined by (1) multiplying each average daily balance by the number of days in the billing cycle, (2) multiplyin each result by the applicable daily periodic rate, and (3) adding these products together.

Annual Percentage Rate: 27.9%

About Your Payment: You agree to pay at least the Minimum Payment Due in time to be credited to your Account as of the Paymentnt Du Date. You may pay more than the Minimum Payment Due, and you may pay the entire New Balance at any time.

Payments should be mailed with a single coupon to the Remit Address shown on the coupon. Payments must be made by a single check c money order payable in U.S. dollars and drawn on a U.S. Institution. Payments may also be made using our optional payment by phone c online services using the phone number or the web address on the front of this statement. Payments received on any day at the paymer address shown on the front by 5:00 p.m. in the time zone of the Account address will be credited to your Account as of the date of receip Payments submitted by phone or online by 5:00 p.m. Pacific Time will be credited to your Account as of the date of receipt. All payment received after 5:00 p.m. of the time zone indicated will be credited the next day. A processing fee may apply to agent assisted phon payments as well as online payments if applicable. Crediting payments to your Account may be delayed up to five (5) business days if th payment is not made as described above, or, is not mailed to and received at the address provided for remittance; is not accompanied by payment coupon or more than one coupon; is received in an envelope other than the envelope provided for remittance; is stapled, folde paper clipped or taped, or multiple checks for payment. Requests for credit balance refunds should be mailed to the correspondenc address shown on the front of your billing statement.

By sending us a check for payment on your Account you authorize us to make a one-time electronic funds transfer (EFT) from your ban account or to process the payment as a check transaction. When we use information from your check to make an EFT, funds may b withdrawn from your Account as early as the date received, and you will not receive your check back from your financial institution. If yo do not want your checks to be converted to an EFT, please call customer service at the phone number on the back of your card.

Payment by Phone: When you use our optional payment by phone service, you authorize us to initiate an electronic funds transfer fror your designated bank account or to process the payment as a check transaction. You must authorize the amount and timing of eac payment. Please retain this authorization for your records.

Negative Credit Reporting: We may report information about your Account to credit bureaus. Late payments, missed payments, or othe defaults on your Account may be reflected in your credit report. If any specific information related to your Account, transactions or cred experience with us is inaccurate, you may notify us and request us to correct the inaccurate information (after confirmation of the allege error) reported to any credit reporting agency by writing to us at the correspondence address on the front of this statement.

Issued by: UAS

Statement in reference to your account with: Light RX Face & Body
Account#: [redacted]OA01 01/20/2019 - 02/16/201

Summary of Account Activity	
Previous Balance	$1,250.00
- Payments, Credits, Other	$120.62
+ New Purchases	$0.00
+ Fees Charged	$0.00
+ Interest Charged	$0.00
New Balance	$1,129.38
Credit Limit	$2,500.00
Credit Available	$1,370.62
Statement Date	02/16/2019
Days in Billing Cycle	28

Payment Information	
Min Monthly Payment	$120.62
Past Due Amount **Due Immediately**	$0.00
Minimum Payment Due	**$120.62**
Payment Due Date	03/13/2019

Questions?

(888) 233-2302
or go online: universalaccountservicing.com

Write to us:

Mail Payments to: - PO Box 901571, Kansas City, MO 64190
For other Correspondence: - PO Box 901571, Kansas City, MO 64190

Interest Charge Calculation for Unexpired Deferred Interest Plans, if Any

*PROMOTION PLAN NOTICE: Your promotion plan(s) expiration date(s) may differ from your payment due date. To avoid Total Deferred Interest charges, pay your Minimum Payments Due on-time each month and your Balance Subject to Deferred Interest by the promotion expiration date. Any amount shown as a Balance Subject to Deferred Interest is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Your **Annual Percentage Rate (APR)** is the annual interest rate on your account.

Type of Balance	Purchase Description	APR	Promo Expiration Date*	Balance Subject to Deferred Interest*	Deferred Interest Charges	Total Deferred Interest Charges
Promo	laser services	27.9%	07/04/2019	$1,232.80	$26.39	$45.50

Notices

Pay Online: uportal360.com - Account Number: TTADLXN - Access Code: 762814 **Our records indicate that you have a recurring payment set up. Your next payment will be debited using the VISA account on file.*** -

Transactions

Payments, Credits, Other

Transaction Date	Post Date	Description	Amount
02/13/2019	02/13/2019	PMT - Credit Card	($120.62)

Purchases

Date	Ref#	Description	Amount

Fees

	Date	Description	Amount
		TOTAL FEES FOR THIS PERIOD:	$0.00

Interest Charged

Interest Charges on Purchases	$0.00
TOTAL INTEREST FOR THIS PERIOD:	$0.00

Total Fees and Interest Charged for the Year to Date

Description	Amount
Total fees charged to date in 2019	$0.00
Total interest charged to date in 2019	$0.00

Interest Charge Calculation for Purchases

*Any amount shown as a Balance Subject to Interest Rate is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Type of Balance	APR	*Balance Subject to Interest Rate	Interest Charge
Purchases	27.9%	$0.00	$0.00

Statement in reference to your account with: Light RX Face & Body
Account#: TTADLXNLOA01 01/20/2019 - 02/16/201

What To Do If You Think You Have Found a Mistake on your Statement

If you think there is an error on your statement, write to us on a separate sheet of paper and send to , PO Box 901571, Kansas City, M 64190.

In your letter please include the following information:

- Your Name and Account number
- Amount of the error in question
- A description of the problem and information that supports your claim

You must contact us within 60 days from when the error appeared on your statement.

All correspondence of potential errors must be in written format. You may choose to call us, however we are not required to investigate ar potential errors and calling may result in paying the full amount in question.

While we investigate your claim, the following statements are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. If we determin that we have indeed made an error all, charges and fees will be reversed for the amount in question.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit if applicable.

Balance Subject to Interest Rate

We calculate the interest charges for each Account balance by applying the "daily periodic rate" for that balance to the "daily balance" c that balance. We do this for each day in the billing cycle and then add together the resulting interest charges. This gives us the total interes charges for that balance for that billing cycle. The "daily periodic rate" is a daily interest rate. The daily periodic rate for a given balance equal to the APR for that balance divided by 365.

We calculate the "daily balance" for each balance. We do this by starting with the beginning amount of that balance. We add any ne purchases for that day, excluding any unpaid interest charges and fees, and subtract any payments or credits. This gives us the "dai balance." We may exclude new purchases from the daily balance that are subject to interest charges, if the law, our Agreement or th Promotional Terms require us to do so. If this happens, we will include these purchases in the daily balance subject to interest charges a soon as the law, our Agreement or the Promotional Terms allow.

Although we use the "daily balance" method to figure account interest charges, any amount the statement shows as the Balance Subject t Interest Rate or the Balance Subject to Deferred Interest is an "average daily balance." Except for minor differences due to roundin interest charges may be determined by (1) multiplying each average daily balance by the number of days in the billing cycle, (2) multiplyin each result by the applicable daily periodic rate, and (3) adding these products together.

Annual Percentage Rate: 27.9%

About Your Payment: You agree to pay at least the Minimum Payment Due in time to be credited to your Account as of the Paymentnt Du Date. You may pay more than the Minimum Payment Due, and you may pay the entire New Balance at any time.

Payments should be mailed with a single coupon to the Remit Address shown on the coupon. Payments must be made by a single check c money order payable in U.S. dollars and drawn on a U.S. Institution. Payments may also be made using our optional payment by phone c online services using the phone number or the web address on the front of this statement. Payments received on any day at the paymer address shown on the front by 5:00 p.m. in the time zone of the Account address will be credited to your Account as of the date of receip Payments submitted by phone or online by 5:00 p.m. Pacific Time will be credited to your Account as of the date of receipt. All payment received after 5:00 p.m. of the time zone indicated will be credited the next day. A processing fee may apply to agent assisted phon payments as well as online payments if applicable. Crediting payments to your Account may be delayed up to five (5) business days if th payment is not made as described above, or, is not mailed to and received at the address provided for remittance; is not accompanied by payment coupon or more than one coupon; is received in an envelope other than the envelope provided for remittance; is stapled, folde paper clipped or taped, or multiple checks for payment. Requests for credit balance refunds should be mailed to the correspondenc address shown on the front of your billing statement.

By sending us a check for payment on your Account you authorize us to make a one-time electronic funds transfer (EFT) from your ban account or to process the payment as a check transaction. When we use information from your check to make an EFT, funds may b withdrawn from your Account as early as the date received, and you will not receive your check back from your financial institution. If yo do not want your checks to be converted to an EFT, please call customer service at the phone number on the back of your card.

Payment by Phone: When you use our optional payment by phone service, you authorize us to initiate an electronic funds transfer fror your designated bank account or to process the payment as a check transaction. You must authorize the amount and timing of eac payment. Please retain this authorization for your records.

Negative Credit Reporting: We may report information about your Account to credit bureaus. Late payments, missed payments, or othe defaults on your Account may be reflected in your credit report. If any specific information related to your Account, transactions or cred experience with us is inaccurate, you may notify us and request us to correct the inaccurate information (after confirmation of the allege error) reported to any credit reporting agency by writing to us at the correspondence address on the front of this statement.

Issued by: UAS

Statement in reference to your account with: Light RX Face & Body
Account#: [redacted]OA01

02/17/2019 - 03/19/201

Summary of Account Activity

Previous Balance	$1,129.38
- Payments, Credits, Other	$120.62
+ New Purchases	$0.00
+ Fees Charged	$0.00
+ Interest Charged	$0.00
New Balance	$1,008.76
Credit Limit	$2,500.00
Credit Available	$1,491.24
Statement Date	03/19/2019
Days in Billing Cycle	31

Questions?

(888) 233-2302
or go online: universalaccountservicing.com

Payment Information

Min Monthly Payment	$120.62
Past Due Amount **Due Immediately**	$0.00
Minimum Payment Due	**$120.62**
Payment Due Date	04/13/2019

Write to us:

Mail Payments to: - PO Box 901571, Kansas City, MO 64190
For other Correspondence: - PO Box 901571, Kansas City, MO 64190

Interest Charge Calculation for Unexpired Deferred Interest Plans, if Any

*PROMOTION PLAN NOTICE: Your promotion plan(s) expiration date(s) may differ from your payment due date. To avoid Total Deferred Interest charges, pay your Minimum Payments Due on-time each month and your Balance Subject to Deferred Interest by the promotion expiration date. Any amount shown as a Balance Subject to Deferred Interest is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Your **Annual Percentage Rate (APR)** is the annual interest rate on your account.

Type of Balance	Purchase Description	APR	Promo Expiration Date*	Balance Subject to Deferred Interest*	Deferred Interest Charges	Total Deferred Interest Charges
Promo	laser services	27.9%	07/04/2019	$1,102.17	$26.12	$71.62

Notices

Pay Online: uportal360.com - Account Number: TTADLXN - Access Code: 762814 **Our records indicate that you have a recurring payment set up. Your next payment will be debited using the VISA account on file.*** -

Transactions

Payments, Credits, Other

Transaction Date	Post Date	Description	Amount
03/13/2019	03/13/2019	PMT - Credit Card	($120.62)

Purchases

Date	Ref#	Description	Amount

Fees

	Date	Description	Amount
		TOTAL FEES FOR THIS PERIOD:	$0.00

Interest Charged

Interest Charges on Purchases	$0.00
TOTAL INTEREST FOR THIS PERIOD:	$0.00

Total Fees and Interest Charged for the Year to Date

Description	Amount
Total fees charged to date in 2019	$0.00
Total interest charged to date in 2019	$0.00

Interest Charge Calculation for Purchases

*Any amount shown as a Balance Subject to Interest Rate is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Type of Balance	APR	*Balance Subject to Interest Rate	Interest Charge
Purchases	27.9%	$0.00	$0.00

Statement in reference to your account with: Light RX Face & Body
Account#: TTADLXNLOA01 02/17/2019 - 03/19/201

What To Do If You Think You Have Found a Mistake on your Statement

If you think there is an error on your statement, write to us on a separate sheet of paper and send to , PO Box 901571, Kansas City, M 64190.

In your letter please include the following information:

- Your Name and Account number
- Amount of the error in question
- A description of the problem and information that supports your claim

You must contact us within 60 days from when the error appeared on your statement.

All correspondence of potential errors must be in written format. You may choose to call us, however we are not required to investigate ar potential errors and calling may result in paying the full amount in question.

While we investigate your claim, the following statements are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. If we determin that we have indeed made an error all, charges and fees will be reversed for the amount in question.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit if applicable.

Balance Subject to Interest Rate

We calculate the interest charges for each Account balance by applying the "daily periodic rate" for that balance to the "daily balance" c that balance. We do this for each day in the billing cycle and then add together the resulting interest charges. This gives us the total interes charges for that balance for that billing cycle. The "daily periodic rate" is a daily interest rate. The daily periodic rate for a given balance equal to the APR for that balance divided by 365.

We calculate the "daily balance" for each balance. We do this by starting with the beginning amount of that balance. We add any ne purchases for that day, excluding any unpaid interest charges and fees, and subtract any payments or credits. This gives us the "dai balance." We may exclude new purchases from the daily balance that are subject to interest charges, if the law, our Agreement or th Promotional Terms require us to do so. If this happens, we will include these purchases in the daily balance subject to interest charges a soon as the law, our Agreement or the Promotional Terms allow.

Although we use the "daily balance" method to figure account interest charges, any amount the statement shows as the Balance Subject t Interest Rate or the Balance Subject to Deferred Interest is an "average daily balance." Except for minor differences due to roundin interest charges may be determined by (1) multiplying each average daily balance by the number of days in the billing cycle, (2) multiplyin each result by the applicable daily periodic rate, and (3) adding these products together.

Annual Percentage Rate: 27.9%

About Your Payment: You agree to pay at least the Minimum Payment Due in time to be credited to your Account as of the Paymentnt Du Date. You may pay more than the Minimum Payment Due, and you may pay the entire New Balance at any time.

Payments should be mailed with a single coupon to the Remit Address shown on the coupon. Payments must be made by a single check c money order payable in U.S. dollars and drawn on a U.S. Institution. Payments may also be made using our optional payment by phone c online services using the phone number or the web address on the front of this statement. Payments received on any day at the paymer address shown on the front by 5:00 p.m. in the time zone of the Account address will be credited to your Account as of the date of receip Payments submitted by phone or online by 5:00 p.m. Pacific Time will be credited to your Account as of the date of receipt. All payment received after 5:00 p.m. of the time zone indicated will be credited the next day. A processing fee may apply to agent assisted phon payments as well as online payments if applicable. Crediting payments to your Account may be delayed up to five (5) business days if th payment is not made as described above, or, is not mailed to and received at the address provided for remittance; is not accompanied by payment coupon or more than one coupon; is received in an envelope other than the envelope provided for remittance; is stapled, folde paper clipped or taped, or multiple checks for payment. Requests for credit balance refunds should be mailed to the correspondenc address shown on the front of your billing statement.

By sending us a check for payment on your Account you authorize us to make a one-time electronic funds transfer (EFT) from your ban account or to process the payment as a check transaction. When we use information from your check to make an EFT, funds may b withdrawn from your Account as early as the date received, and you will not receive your check back from your financial institution. If yo do not want your checks to be converted to an EFT, please call customer service at the phone number on the back of your card.

Payment by Phone: When you use our optional payment by phone service, you authorize us to initiate an electronic funds transfer fror your designated bank account or to process the payment as a check transaction. You must authorize the amount and timing of eac payment. Please retain this authorization for your records.

Negative Credit Reporting: We may report information about your Account to credit bureaus. Late payments, missed payments, or othe defaults on your Account may be reflected in your credit report. If any specific information related to your Account, transactions or cred experience with us is inaccurate, you may notify us and request us to correct the inaccurate information (after confirmation of the allege error) reported to any credit reporting agency by writing to us at the correspondence address on the front of this statement.

Issued by: UAS

Statement in reference to your account with: Light RX Face & Body
Account#: [redacted]OA01 03/20/2019 - 04/18/201

Summary of Account Activity	
Previous Balance	$1,008.76
- Payments, Credits, Other	$120.62
+ New Purchases	$0.00
+ Fees Charged	$0.00
+ Interest Charged	$0.00
New Balance	$888.14
Credit Limit	$2,500.00
Credit Available	$1,611.86
Statement Date	04/18/2019
Days in Billing Cycle	30

Payment Information	
Min Monthly Payment	$120.62
Past Due Amount **Due Immediately**	$0.00
Minimum Payment Due	**$120.62**
Payment Due Date	05/13/2019

Questions?

(888) 233-2302
or go online: universalaccountservicing.com

Write to us:

Mail Payments to: - PO Box 901571, Kansas City, MO 64190
For other Correspondence: - PO Box 901571, Kansas City, MO 64190

Interest Charge Calculation for Unexpired Deferred Interest Plans, if Any

*PROMOTION PLAN NOTICE: Your promotion plan(s) expiration date(s) may differ from your payment due date. To avoid Total Deferred Interest charges, pay your Minimum Payments Due on-time each month and your Balance Subject to Deferred Interest by the promotion expiration date. Any amount shown as a Balance Subject to Deferred Interest is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Your **Annual Percentage Rate (APR)** is the annual interest rate on your account.

Type of Balance	Purchase Description	APR	Promo Expiration Date*	Balance Subject to Deferred Interest*	Deferred Interest Charges	Total Deferred Interest Charges
Promo	laser services	27.9%	07/04/2019	$984.66	$22.58	$94.20

Notices

Pay Online: uportal360.com - Account Number: TTADLXN - Access Code: 762814 **Our records indicate that you have a recurring payment set up. Your next payment will be debited using the VISA account on file.*** -

Transactions

Payments, Credits, Other

Transaction Date	Post Date	Description	Amount
04/13/2019	04/13/2019	PMT - Credit Card	($120.62)

Purchases

Date	Ref#	Description	Amount

Fees

	Date	Description	Amount
		TOTAL FEES FOR THIS PERIOD:	$0.00

Interest Charged

Interest Charges on Purchases	$0.00
TOTAL INTEREST FOR THIS PERIOD:	$0.00

Total Fees and Interest Charged for the Year to Date

Description	Amount
Total fees charged to date in 2019	$0.00
Total interest charged to date in 2019	$0.00

Interest Charge Calculation for Purchases

*Any amount shown as a Balance Subject to Interest Rate is an "average daily balance." See the section below called Balance Subject to Interest Rate for more information about the "daily balance" method we use to figure account interest charges.

Type of Balance	APR	*Balance Subject to Interest Rate	Interest Charge
Purchases	27.9%	$0.00	$0.00

Statement in reference to your account with: Light RX Face & Body
Account#: TTADLXNLOA01 03/20/2019 - 04/18/201

What To Do If You Think You Have Found a Mistake on your Statement

If you think there is an error on your statement, write to us on a separate sheet of paper and send to , PO Box 901571, Kansas City, M 64190.

In your letter please include the following information:

- Your Name and Account number
- Amount of the error in question
- A description of the problem and information that supports your claim

You must contact us within 60 days from when the error appeared on your statement.

All correspondence of potential errors must be in written format. You may choose to call us, however we are not required to investigate ar potential errors and calling may result in paying the full amount in question.

While we investigate your claim, the following statements are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. If we determin that we have indeed made an error all, charges and fees will be reversed for the amount in question.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit if applicable.

Balance Subject to Interest Rate

We calculate the interest charges for each Account balance by applying the "daily periodic rate" for that balance to the "daily balance" c that balance. We do this for each day in the billing cycle and then add together the resulting interest charges. This gives us the total interes charges for that balance for that billing cycle. The "daily periodic rate" is a daily interest rate. The daily periodic rate for a given balance equal to the APR for that balance divided by 365.

We calculate the "daily balance" for each balance. We do this by starting with the beginning amount of that balance. We add any ne purchases for that day, excluding any unpaid interest charges and fees, and subtract any payments or credits. This gives us the "dai balance." We may exclude new purchases from the daily balance that are subject to interest charges, if the law, our Agreement or th Promotional Terms require us to do so. If this happens, we will include these purchases in the daily balance subject to interest charges a soon as the law, our Agreement or the Promotional Terms allow.

Although we use the "daily balance" method to figure account interest charges, any amount the statement shows as the Balance Subject t Interest Rate or the Balance Subject to Deferred Interest is an "average daily balance." Except for minor differences due to roundin interest charges may be determined by (1) multiplying each average daily balance by the number of days in the billing cycle, (2) multiplyin each result by the applicable daily periodic rate, and (3) adding these products together.

Annual Percentage Rate: 27.9%

About Your Payment: You agree to pay at least the Minimum Payment Due in time to be credited to your Account as of the Paymentnt Du Date. You may pay more than the Minimum Payment Due, and you may pay the entire New Balance at any time.

Payments should be mailed with a single coupon to the Remit Address shown on the coupon. Payments must be made by a single check c money order payable in U.S. dollars and drawn on a U.S. Institution. Payments may also be made using our optional payment by phone c online services using the phone number or the web address on the front of this statement. Payments received on any day at the paymer address shown on the front by 5:00 p.m. in the time zone of the Account address will be credited to your Account as of the date of receip Payments submitted by phone or online by 5:00 p.m. Pacific Time will be credited to your Account as of the date of receipt. All payment received after 5:00 p.m. of the time zone indicated will be credited the next day. A processing fee may apply to agent assisted phon payments as well as online payments if applicable. Crediting payments to your Account may be delayed up to five (5) business days if th payment is not made as described above, or, is not mailed to and received at the address provided for remittance; is not accompanied by payment coupon or more than one coupon; is received in an envelope other than the envelope provided for remittance; is stapled, folde paper clipped or taped, or multiple checks for payment. Requests for credit balance refunds should be mailed to the correspondenc address shown on the front of your billing statement.

By sending us a check for payment on your Account you authorize us to make a one-time electronic funds transfer (EFT) from your ban account or to process the payment as a check transaction. When we use information from your check to make an EFT, funds may b withdrawn from your Account as early as the date received, and you will not receive your check back from your financial institution. If yo do not want your checks to be converted to an EFT, please call customer service at the phone number on the back of your card.

Payment by Phone: When you use our optional payment by phone service, you authorize us to initiate an electronic funds transfer fror your designated bank account or to process the payment as a check transaction. You must authorize the amount and timing of eac payment. Please retain this authorization for your records.

Negative Credit Reporting: We may report information about your Account to credit bureaus. Late payments, missed payments, or othe defaults on your Account may be reflected in your credit report. If any specific information related to your Account, transactions or cred experience with us is inaccurate, you may notify us and request us to correct the inaccurate information (after confirmation of the allege error) reported to any credit reporting agency by writing to us at the correspondence address on the front of this statement.

Eastern District of Michigan
Claims Register

19-42510-pjs Body Contour Ventures, LLC

Judge: Phillip J Shefferly **Chapter:** 11

Office: Detroit **Last Date to file claims:** 07/01/2019

Trustee: **Last Date to file (Govt):** 09/30/2019

Creditor: (26011013)
Tabatha Monique Frazier
1366 Sarah's Landing
Jacksonville, FL 32221

Claim No: 99
Original Filed Date: 06/17/2019
Original Entered Date: 06/17/2019

Status:
Filed by: CR
Entered by: ePOC
Modified:

Amount claimed: $1732.48

History:

Details 99-1 06/17/2019 Claim #99 filed by Tabatha Monique Frazier, Amount claimed: $1732.48 (ePOC)

Description:

Remarks:

Claims Register Summary

Case Name: Body Contour Ventures, LLC
Case Number: 19-42510-pjs
Chapter: 11
Date Filed: 02/22/2019
Total Number Of Claims: 1

Total Amount Claimed*	$1732.48
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		
Priority		
Administrative		