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

E-Filed on 07/01/2019 Claim # 1089

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 Karen F Rapp creditor? Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor Has this claim been ✓ No acquired from ☐ Yes. From whom? someone else? 3. Where should notices Where should notices to the creditor be sent? Where should payments to the creditor be sent? (if and payments to the different) creditor be sent? Karen F Rapp Federal Rule of Name Name Bankruptcy Procedure (FRBP) 2002(g) 14 Magnolia Lane Number Street Number Street Rochester NY 14580 City State ZIP Code State ZIP Code Contact phone (585) 319-8906 Contact email kfrapp@gmail.com Contact email Uniform claim identifier for electronic payments in chapter 13 (if you use one): ✓ No Does this claim amend one already filed? ☐ Yes. Claim number on court claims registry (if known) ___ Filed on MM / DD / YYYY 5. Do you know if anyone ✓ No else has filed a proof ☐ Yes. Who made the earlier filing? of claim for this claim?

6. Do you have any number you use to identify the debtor? Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:									
7.	How much is the claim?	\$ Does this amount include interest or other charges? V 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. Services Performed							
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	☑ No							
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Ch	eck one:			Amount entitled	d to priority		
A claim may be partly priority and partly		tic support obligations (including alimony and child support) under .C. § 507(a)(1)(A) or (a)(1)(B).			\$	0.00		
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		\$2,850* of deposits toward purchase, lease, or rental conal, family, or household use. 11 U.S.C. § 507(a)(7).	of property or	services for	\$	0.00		
	banl	☐ 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).				0.00		
	☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).					0.00		
	☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).				\$	0.00		
	☐ Othe	r. Specify subsection of 11 U.S.C. § 507(a)() that app	olies.		\$	0.00		
	* Amou	ts are subject to adjustment on 4/01/19 and every 3 years after	that for cases b	egun on or afte	er the date of adjust	ment.		
Part 3: Sign Below								
The person completing this proof of claim must	Check the ap	propriate box:						
sign and date it.	I am the	creditor.						
FRBP 9011(b).		creditor's attorney or authorized agent.						
If you file this claim electronically, FRBP	_	trustee, or the debtor, or their authorized agent. Bankru		14.				
5005(a)(2) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.							
to establish local rules specifying what a signature								
is.		that an authorized signature on this <i>Proof of Claim</i> server claim, the creditor gave the debtor credit for any paym				ting the		
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.							
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.							
3571.	Executed on date 07/01/2019							
MM / DD / YYYY								
	Karen F. F	арр						
	Signature							
	Print the name of the person who is completing and signing this claim:							
	Name	Karen Rapp						
		First name Middle name		Last name				
	Title	Ms.						
Company self								
Identify the corporate servicer as the company if the authorized agent is a servicer.								
	Address							
		Number Street						
		City	State	ZIP Code				
	Contact phone		Email					