

Fill in this information to identify the case:

Debtor 1 BCA Acquisitions, LLC
 Debtor 2 _____
 (Spouse, if filing) _____
 United States Bankruptcy Court Eastern District of Michigan
 Case number: 19-42511

FILED
 U.S. Bankruptcy Court
 Eastern District of Michigan
 7/1/2019
 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?	<u>Silco Funding, LLC</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?	Where should notices to the creditor be sent? <u>Silco Funding, LLC</u> Name Harris Beach PLLC, Attn: Wendy A. Kinsella, Esq. 333 West Washington St., Suite 200 Syracuse, NY 13202 Contact phone <u>(315) 423-7100</u> Contact email <u>wkinsella@harrisbeach.com</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (if different) <u>Silco Funding, LLC</u> Name 72 East Jefferson Road Pittsford, NY 14534 Contact phone <u>(585) 746-3582</u> Contact email _____
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 _____ <div style="text-align: right;">MM / DD / YYYY</div>	
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? _____	

Official Form 410

Proof of Claim

page 1

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?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____</div>
7. How much is the claim?	<div><div>\$ 250000.00</div><div>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).</div></div>
8. What is the basis of the claim?	<div>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.</div> <div style="text-align: center;">Money Loaned</div>
9. Is all or part of the claim secured?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <div><input 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>.</div><div><input type="checkbox"/> Motor vehicle</div><div><input type="checkbox"/> Other. Describe: _____</div></div> <div>Basis for perfection: _____</div> <div>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.)</div> <div><div>Value of property:</div><div>\$ _____</div><div>Amount of the claim that is secured:</div><div>\$ _____</div><div>Amount of the claim that is unsecured:</div><div>\$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</div></div> <div><div>Amount necessary to cure any default as of the date of the petition:</div><div>\$ _____</div><div>Annual Interest Rate (when case was filed) _____ %</div><div><input type="checkbox"/> Fixed</div><div><input type="checkbox"/> Variable</div></div>
10. Is this claim based on a lease?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</div>
11. Is this claim subject to a right of setoff?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Identify the property: _____</div>

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).	\$ _____
	<input type="checkbox"/> 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	\$ _____
<small>* 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.</small>		

Part 3: Sign Below

<p>The person completing this proof of claim must sign and date it. FRBP 9011(b).</p> <p><small>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</small></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>7/1/2019</u></p> <p style="text-align: center;">MM / DD / YYYY</p> <p><u>/s/ Wendy A. Kinsella</u></p> <p>Signature</p> <p>Print the name of the person who is completing and signing this claim:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Name</td> <td style="border-bottom: 1px solid black; width: 80%;">Wendy A. Kinsella</td> </tr> <tr> <td></td> <td style="text-align: center; font-size: small;">First name Middle name Last name</td> </tr> <tr> <td>Title</td> <td style="border-bottom: 1px solid black;">Attorney</td> </tr> <tr> <td>Company</td> <td style="border-bottom: 1px solid black;">Harris Beach PLLC</td> </tr> <tr> <td></td> <td style="font-size: x-small;">Identify the corporate servicer as the company if the authorized agent is a servicer</td> </tr> <tr> <td>Address</td> <td style="border-bottom: 1px solid black;">333 West Washington St., Suite 200</td> </tr> <tr> <td></td> <td style="font-size: x-small;">Number Street</td> </tr> <tr> <td></td> <td style="border-bottom: 1px solid black;">Syracuse, NY 13202</td> </tr> <tr> <td></td> <td style="font-size: x-small;">City State ZIP Code</td> </tr> <tr> <td>Contact phone</td> <td style="border-bottom: 1px solid black;">(315) 423-7100</td> </tr> <tr> <td></td> <td style="font-size: x-small;">Email</td> </tr> <tr> <td></td> <td style="border-bottom: 1px solid black;">wkinsella@harrisbeach.com</td> </tr> </table>	Name	Wendy A. Kinsella		First name Middle name Last name	Title	Attorney	Company	Harris Beach PLLC		Identify the corporate servicer as the company if the authorized agent is a servicer	Address	333 West Washington St., Suite 200		Number Street		Syracuse, NY 13202		City State ZIP Code	Contact phone	(315) 423-7100		Email		wkinsella@harrisbeach.com
Name	Wendy A. Kinsella																								
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Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: Eastern District of Michigan

Case number 19-42511

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04/16

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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.

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1. Who is the current creditor?	<u>Silco Funding, LLC</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
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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? <u>Harris Beach PLLC, Attn: Wendy A. Kinsella</u> Name <u>333 West Washington St., Suite 200</u> Number Street <u>Syracuse NY 13202</u> City State ZIP Code Contact phone <u>(315) 423-7100</u> Contact email <u>wkinsella@harrisbeach.com</u>	Where should payments to the creditor be sent? (if different) <u>Silco Funding, LLC</u> Name <u>72 East Jefferson Road</u> Number Street <u>Pittsford NY 14534</u> City State ZIP Code Contact phone _____ 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	
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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? \$ 250,000.00 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.

Money Loaned

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 one:

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).

Amount entitled to priority

\$ _____

☐ 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).

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

\$ _____

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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 07/01/2019
MM / DD / YYYY

Signature

Wendy A. Kinsella

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

Name Wendy A. Kinsella
First name Middle name Last name

Title Attorney

Company Harris Beach PLLC, Attn: Wendy A. Kinsella
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 333 West Washington St., Suite 200
Number Street

Syracuse NY 13202
City State ZIP Code

Contact phone (315) 423-7100 Email wkinsella@harrisbeach.com

RESERVATION OF RIGHTS

Claim is based on money loaned and/or equity investment made for Debtor to acquire assets out of the bankruptcy case of Turkey Lake, LLC filed in the Northern District of New York under Main Case No. 15-12091. Claimant's \$250,000.00 debtor in possession loan converted to a loan and/or equity in BCA Acquisitions, LLC under Turkey Lake's confirmed Plan. Additional supporting documents are available upon request to Claimant's Counsel.

Claimant reserves its right to file an Amended Proof of Claim or Administrative Expense Claim setting forth the amount and classification of its claim, including additional accrued interest and attorneys' fees and costs, or other amounts as allowed by the Court.

Eastern District of Michigan Claims Register

[19-42511-pjs BCA Acquisitions, 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: (26034148)
Silco Funding, LLC
Harris Beach PLLC, Attn:
Wendy A. Kinsella, Esq.
333 West Washington St., Suite
200
Syracuse, NY 13202

Claim No: 9
Original Filed
Date: 07/01/2019
Original Entered
Date: 07/01/2019

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

Amount claimed: \$250000.00

History:

[Details 9-1](#) 07/01/2019 Claim #9 filed by Silco Funding, LLC, Amount claimed: \$250000.00 (ePOC)

Description:

Remarks:

Claims Register Summary

Case Name: BCA Acquisitions, LLC

Case Number: 19-42511-pjs

Chapter: 11

Date Filed: 02/22/2019

Total Number Of Claims: 1

Total Amount Claimed*	\$250000.00
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		