

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  
(State)

Case number 19-42510 PJS

Official Form 410  
Proof of Claim

12/15

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? Oakland County Treasurer  
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? \_\_\_\_\_

Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>OAKLAND COUNTY TREASURER</u> Name <u>1200 N. TELEGRAPH ROAD DEPT 479</u> Number Street <u>PONTIAC MI 48341</u> City State ZIP Code Contact phone <u>248-858-0622</u> Contact email <u>ROARKD@OAKGOV.COM</u>	<u>OAKLAND COUNTY TREASURER</u> Name <u>1200 N. TELEGRAPH ROAD DEPT 479</u> Number Street <u>PONTIAC MI 48341</u> City State ZIP Code Contact phone <u>248-858-0622</u> Contact email <u>ROARKD@OAKGOV.COM</u>
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) 139 Filed on 07/08/2019  
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: See below

PLEASE SEE ATTACHED STATEMENTS

7. How much is the claim? \$ 32,648.39 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.

PROPERTY TAXES

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:

BUSINESS PERSONAL PROPERTY TAXES

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: \$ 32,648.39

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) 12 %

Fixed With an additional 4% admin fee for amounts turned over to Treasurer after the case is filed (pursuant to MCL 211.78a). The interest rate is 18% for all real property subject to forfeiture and/or foreclosure (pursuant to MCL 211.78g).  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: PLEASE SEE ATTACHED STATEMENTS

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

No

Yes. Check all that apply:

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

Up to \$2,775\* 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 \$12,475\*) 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.

**Amount entitled to priority**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/16 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 08/26/2019  
MM / DD / YYYY

/s/ DIANE ROARK

Signature

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

Name Diane L. Roark  
First name Middle name Last name

Title Bankruptcy Specialist

Company Oakland County Treasurer  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1200 N. Telegraph Road, Dept 479  
Number Street

Pontiac MI 48341  
City State ZIP Code

Contact phone 248-858-0622 Email roarkd@oakgov.com



**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 50 99-00-017-046  
**Taxpayer:** LIGHT RX FACE & BODY  
**Property Address:** 44150 W TWELVE MILE, STE 200 NOVI MI 48377-  
**Property Description:** PERSONAL PROPERTY

**Statement**  
**Statement No:** 39295  
**Page:** 1 of 1  
**Date:** August 26, 2019

**Taxable Value:** \$107,560

**Tax Payments:**

Year	----- Due -----			Sale No.	Status
	Tax	Interest & Fees	Total		
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$4,760.10	\$476.01	\$5,236.11		Delinquent - Immediate Payment Required
<b>Total</b>			\$5,236.11		
<b>Statement Total</b>			<b>\$5,236.11</b>		If paid in August

DR

LIGHT RX FACE & BODY

44150 W TWELVE MILE, STE 200  
 NOVI MI 48377-

(248) 858-0612

CITY OF NOVI

TAX CERTIFICATION  
TAX SUMMARY FOR CALENDAR YEAR 2019

School: 63100

Property #: 50-99-00-017-046

CITY OF NOVI  
45175 TEN MILE RD  
NOVI, MI 48375-3024

SITE ADDRESS:

44150 W TWELVE MILE RD STE 200

SEV 118,320  
AV 118,320  
TAXV 118,320

LIGHT RX FACE & BODY

44150 W TWELVE MILW RD STE 200

Novi MI 48377

Mortgage Company of Record:  
NONE

Prop Type : Commercial Personal  
PRE/MBT %: 100

Summer Tax Bill

Winter Tax Bill

TAX TYPE	TAX AMOUNT
OAK.ISD-VOTED	362.11
OAK.ISD-ALLOC	22.88
OAK.COMM COLLEGE	181.06
STATE EDUCATION	709.92
SCHOOL OPERATING	320.93
SCHOOL DEBT NOVI	414.12
SCHOOL SINK 631	27.99
SCHOOL SUPP >18	55.61
SCHOOL SUPP <18	168.68
GENERAL	565.03
STREETS	168.87
POLICE/FIRE	160.79
PARKS & REC	43.39
DRAINS	66.05
LIBRARY	86.87
2008 LIBR DEBT	41.06
CAPITAL IMPRVMT	113.17
PA359 ECON DVLP	1.52
OAK.COUNTY OPER	478.01
SCHOOL OPER FC	0.00

TAX TYPE	TAX AMOUNT
SCHOOL OPERATING	320.93
SCHOOL DEBT NOVI	414.12
SCHOOL SINK 631	27.98
SCHOOL SUPP >18	55.61
SCHOOL SUPP <18	168.68
OAK.COUNTY PK&RC	27.55
OAK.COUNTY HCMA	25.04
OAK.COUNTY ZOO	11.61
OAK.COUNTY ART	23.01
SCHOOL OPER FC	0.00

TOTAL TAXES	3,988.06
ADMIN FEE	0.00
INTEREST	0.00
TOTAL BILL	3,988.06

TOTAL TAXES	1,074.53
ADMIN FEE	0.00
INTEREST	0.00
TOTAL BILL	1,074.53

Date Prepared: 08/26/2019



**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 08 99-00-017-031

**Taxpayer:** LIGHT-RX, FACE & BODY

**Property Address:** 33466 WOODWARD AVE BIRMINGHAM MI 48009-0906

**Property Description:** PERSONAL PROPERTY

**Statement**

**Statement No:** 39296

**Page:** 1 of 1

**Date:** August 26, 2019

**Taxable Value:** \$128,240

**Tax Payments:**

Year	----- Due -----			Sale No.	Status
	Tax	Interest & Fees	Total		
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$6,438.42	\$643.84	\$7,082.26		Delinquent - Immediate Payment Required

**Total** \$7,082.26

**Statement Total** **\$7,082.26** If paid in August

DR LIGHT-RX, FACE & BODY

33466 WOODWARD AVE  
 BIRMINGHAM MI 48009-0906

(248) 858-0612

CITY OF BIRMINGHAM

TAX CERTIFICATION  
TAX SUMMARY FOR CALENDAR YEAR 2019

School: 63010

Property #: 08-99-00-017-031

CITY OF BIRMINGHAM  
151 MARTIN STREET  
P.O. BOX 3001  
BIRMINGHAM, MI 48012-3001

SITE ADDRESS:

33466 WOODWARD AVE  
  
LIGHT-RX  
FACE & BODY  
33466 WOODWARD AVE  
BIRMINGHAM MI 48009-0906

SEV 131,320  
AV 131,320  
TAXV 131,320

Mortgage Company of Record:  
NONE

Prop Type : COMM PP  
PRE/MBT %: 100

Summer Tax Bill

Winter Tax Bill

TAX TYPE	TAX AMOUNT
COUNTY OPERATING	530.53
OIS ALLOCATED	25.39
OIS VOTED	401.90
OCC VOTED	200.95
STATE EDUCATION	787.92
SCHOOL OPERATING	366.52
SCHOOL DEBT	499.01
SCHOOL SUPPLEMNT	472.41
CITY OPERATING	1,460.35
REFUSE	102.46
LIBRARY	180.09
CITY DEBT	142.62
SCHOOL OPER FC	0.00

TAX TYPE	TAX AMOUNT
COUNTY PK & REC	0.00
HCMA	0.00
OCPTA	0.00
SCHOOL OPERATING	0.00
SCHOOL SUPPLEMNT	0.00
ZOO AUTHORITY	0.00
SCHOOL OPER FC	0.00
ART INSTITUTE	0.00

TOTAL TAXES	5,170.15
ADMIN FEE	0.00
INTEREST	0.00
TOTAL BILL	5,170.15

TOTAL TAXES	0.00
ADMIN FEE	0.00
INTEREST	0.00
TOTAL BILL	0.00

Date Prepared: 08/26/2019



**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 88 99-00-407-535  
**Taxpayer:** RX FACE LIGHT BODY LIGHT  
**Property Address:** 3342 ROCHESTER RD TROY MI 48083-5426  
**Property Description:** PERSONAL PROPERTY

**Statement**  
**Statement No:** 39297  
**Page:** 1 of 1  
**Date:** August 26, 2019

**Taxable Value:** \$96,760

**Tax Payments:**

Year	----- Due -----			Sale No.	Status
	Tax	Interest & Fees	Total		
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$4,440.44	\$444.04	\$4,884.48		Delinquent - Immediate Payment Required
<b>Total</b>			<b>\$4,884.48</b>		
<b>Statement Total</b>			<b>\$4,884.48</b>	If paid in August	

DR RX FACE  
 LIGHT  
 34405 W 12 MILE RD STE 200  
 FARMINGTON MI 48331-5627

(248) 858-0612



CITY OF TROY

TAX CERTIFICATION  
TAX SUMMARY FOR CALENDAR YEAR 2019

School: 260

Property #: 88-99-00-407-535

CITY OF TROY  
500 W. BIG BEAVER  
TROY, MI 48084

SITE ADDRESS:

3342 ROCHESTER

SEV 120,950  
AV 120,950  
TAXV 120,950

LIGHT RX FACE & BODY

ATTN: ACCT MONICA

34405 WEST 12 MILE STE 200

FARMINGTON MI 48331

Mortgage Company of Record:  
NONE

Prop Type : 251 COM PP  
PRE/MBT %: 100

Summer Tax Bill

Winter Tax Bill

TAX TYPE	TAX AMOUNT
CITY GENERAL	786.17
CITY CAPITAL	168.07
CITY REFUSE	131.83
CITY DEBT	70.15
LIBRARY	82.74
SCHOOL OPERATING	362.85
SCHOOL SUPPL	295.33
SCH SINKING FUND	59.61
SCHOOL DEBT	247.95
ISD OPERATING	23.39
ISD EXTRA VOTED	370.16
COMM COLLEGE	185.08
STATE EDUC TAX	725.70
COUNTY OPERATING	488.63
SCHOOL OPER FC	0.00

TAX TYPE	TAX AMOUNT
COUNTY PARKS	28.16
H/CL METRO AUTH	25.60
SCHOOL OPERATING	362.85
SCHOOL SUPPL	295.33
SCH SINKING FUND	59.60
SCHOOL DEBT	247.93
OCPTA SMART	120.95
ZOO AUTHORITY	11.87
ART INSTITUTE	23.52
SCHOOL OPER FC	0.00

TOTAL TAXES	3,997.66
ADMIN FEE	27.58
INTEREST	0.00
TOTAL BILL	4,025.24

TOTAL TAXES	1,175.81
ADMIN FEE	11.75
INTEREST	0.00
TOTAL BILL	1,187.56

Date Prepared: 08/26/2019

# 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:**

**Trustee:**

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

*Creditor:* (26040693)

**Claim No:** 139

*Status:*

OAKLAND COUNTY

*Original Filed*

*Filed by:* CR

TREASURER

*Date:* 07/05/2019

*Entered by:* Diane Roark

1200 N TELEGRAPH

*Original Entered*

*Modified:*

DEPT 479

*Date:* 07/05/2019

PONTIAC

*Last Amendment*

MI

*Filed:* 08/27/2019

48341

*Last Amendment*

*Entered:* 08/27/2019

Amount claimed: \$32648.39

Secured claimed: \$32648.39

### *History:*

[Details](#)

[139-](#) 07/05/2019 Claim #139 filed by OAKLAND COUNTY TREASURER, Amount claimed: \$12206.39 (Roark, Diane)  
[1](#)

[Details](#)

[139-](#) 07/08/2019 Amended Claim #139 filed by OAKLAND COUNTY TREASURER, Amount claimed: \$17046.47 (Roark, Diane)  
[2](#)

[Details](#)

[139-](#) 08/27/2019 Amended Claim #139 filed by OAKLAND COUNTY TREASURER, Amount claimed: \$32648.39 (Roark, Diane)  
[3](#)

*Description:* (139-1) Taxes plus interest at 12% per annum pursuant to MCL 211.59

(139-2) Taxes plus interest at 12% per annum pursuant to MCL 211.59

(139-3) Taxes plus interest at 12% per annum pursuant to MCL 211.59

*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

<b>Total Amount Claimed*</b>	\$32648.39
<b>Total Amount Allowed*</b>	

\*Includes general unsecured claims

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

	<b>Claimed</b>	<b>Allowed</b>
<b>Secured</b>	\$32648.39	
<b>Priority</b>		
<b>Administrative</b>		

**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  
(State)

Case number 19-42510 PJS

**Official Form 410**  
**Proof of Claim**

12/15

**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?** Oakland County Treasurer  
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. <b>Where should notices and payments to the creditor be sent?</b> Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>	<b>Where should payments to the creditor be sent? (if different)</b>
	<p><u>OAKLAND COUNTY TREASURER</u> Name</p> <p><u>1200 N. TELEGRAPH ROAD DEPT 479</u> Street</p> <p><u>PONTIAC MI 48341</u> City State ZIP Code</p> <p>Contact phone <u>248-858-0622</u></p> <p>Contact email <u>ROARKD@OAKGOV.COM</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p><u>OAKLAND COUNTY TREASURER</u> Name</p> <p><u>1200 N. TELEGRAPH ROAD DEPT 479</u> Street</p> <p><u>PONTIAC MI 48341</u> City State ZIP Code</p> <p>Contact phone <u>248-858-0622</u></p> <p>Contact email <u>ROARKD@OAKGOV.COM</u></p>

4. **Does this claim amend one already filed?**  No  
 Yes. Claim number on court claims registry (if known) 139 Filed on 07/05/2019  
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: See below

PLEASE SEE ATTACHED STATEMENTS

7. How much is the claim? \$ 17,046.47 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.

PROPERTY TAXES

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:

BUSINESS PERSONAL PROPERTY TAXES

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: \$ 17,046.47

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) 12 %

Fixed With an additional 4% admin fee for amounts turned over to Treasurer after the case is filed (pursuant to MCL 211.78a). The interest rate is 18% for all real property subject to forfeiture and/or foreclosure (pursuant to MCL 211.78g).  
 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: PLEASE SEE ATTACHED STATEMENTS

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

No

Yes. Check all that apply:

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

Up to \$2,775\* 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 \$12,475\*) 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.

**Amount entitled to priority**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/16 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.

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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 07/05/2019  
MM / DD / YYYY

/s/ DIANE ROARK

Signature

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

Name Diane L. Roark  
First name Middle name Last name

Title Bankruptcy Specialist

Company Oakland County Treasurer  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1200 N. Telegraph Road, Dept 479  
Number Street

Pontiac MI 48341  
City State ZIP Code

Contact phone 248-858-0622 Email roarkd@oakgov.com



**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 88 99-00-407-535  
**Taxpayer:** RX FACE LIGHT BODY LIGHT  
**Property Address:** 3342 ROCHESTER RD TROY MI 48083-5426  
**Property Description:** PERSONAL PROPERTY

**Statement**  
**Statement No:** 33430  
**Page:** 1 of 1  
**Date:** July 8, 2019

**Taxable Value:** \$96,760

**Tax Payments:**

Year	----- Due -----			Sale No.	Status
	Tax	Interest & Fees	Total		
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$4,440.44	\$399.64	\$4,840.08		Delinquent - Immediate Payment Required
<b>Total</b>			<b>\$4,840.08</b>		
<b>Statement Total</b>			<b>\$4,840.08</b>	If paid in July	

DR RX FACE  
 LIGHT  
 34405 W 12 MILE RD STE 200  
 FARMINGTON MI 48331-5627

(248) 858-0612



**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 50 99-00-017-046  
**Taxpayer:** LIGHT RX FACE & BODY  
**Property Address:** 44150 W TWELVE MILE, STE 200 NOVI MI 48377-  
**Property Description:** PERSONAL PROPERTY

**Statement**  
**Statement No:** 33109  
**Page:** 1 of 1  
**Date:** July 2, 2019

**Taxable Value:** \$107,560

**Tax Payments:**

Year	Due			Sale No.	Status
	Tax	Interest & Fees	Total		
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$4,760.10	\$428.41	\$5,188.51		Delinquent - Immediate Payment Required
<b>Total</b>			\$5,188.51		
<b>Statement Total</b>			<b>\$5,188.51</b>		If paid in July

LM

LIGHT RX FACE & BODY

44150 W TWELVE MILE, STE 200  
 NOVI MI 48377-

(248) 858-0612





**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 08 99-00-017-031  
**Taxpayer:** LIGHT-RX, FACE & BODY  
**Property Address:** 33466 WOODWARD AVE BIRMINGHAM MI 48009-0906  
**Property Description:** PERSONAL PROPERTY

**Statement**  
**Statement No:** 33110  
**Page:** 1 of 1  
**Date:** July 2, 2019

**Taxable Value:** \$128,240

**Tax Payments:**

Year	Due			Sale No.	Status
	Tax	Interest & Fees	Total		
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$6,438.42	\$579.46	\$7,017.88		Delinquent - Immediate Payment Required
<b>Total</b>			\$7,017.88		
<b>Statement Total</b>			<b>\$7,017.88</b>		If paid in July

LM

LIGHT-RX, FACE & BODY

33466 WOODWARD AVE  
 BIRMINGHAM MI 48009-0906

(248) 858-0612

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

<p><i>Creditor:</i> (26040693)  OAKLAND COUNTY  TREASURER  1200 N TELEGRAPH  DEPT 479  PONTIAC  MI  48341</p>	<p><b>Claim No:</b> 139  <i>Original Filed</i>  Date: 07/05/2019  <i>Original Entered</i>  Date: 07/05/2019  <i>Last Amendment</i>  Filed: 07/08/2019  <i>Last Amendment</i>  Entered: 07/08/2019</p>	<p><i>Status:</i>  Filed by: CR  Entered by: Diane Roark  Modified:</p>
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Amount claimed: \$17046.47  
Secured claimed: \$17046.47

*History:*

- [Details](#)    [139-](#) 07/05/2019 Claim #139 filed by OAKLAND COUNTY TREASURER, Amount claimed: \$12206.39 (Roark, Diane)
- [Details](#)    [139-](#) 07/08/2019 Amended Claim #139 filed by OAKLAND COUNTY TREASURER, Amount claimed: \$17046.47 (Roark, Diane)

*Description:* (139-1) Taxes plus interest at 12% per annum pursuant to MCL 211.59  
(139-2) Taxes plus interest at 12% per annum pursuant to MCL 211.59

*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

<b>Total Amount Claimed*</b>	\$17046.47
<b>Total Amount Allowed*</b>	

\*Includes general unsecured claims

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

	<b>Claimed</b>	<b>Allowed</b>
<b>Secured</b>	\$17046.47	
<b>Priority</b>		
<b>Administrative</b>		

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  
Case number 19-42510 PJS  
(State)

Official Form 410

Proof of Claim

12/15

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? Oakland County Treasurer  
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?  
OAKLAND COUNTY TREASURER  
Name  
1200 N. TELEGRAPH ROAD DEPT 479  
Number Street  
PONTIAC MI 48341  
City State ZIP Code  
Contact phone 248-858-0622  
Contact email ROARKD@OAKGOV.COM  
Where should payments to the creditor be sent? (if different)  
OAKLAND COUNTY TREASURER  
Name  
1200 N. TELEGRAPH ROAD DEPT 479  
Number Street  
PONTIAC MI 48341  
City State ZIP Code  
Contact phone 248-858-0622  
Contact email ROARKD@OAKGOV.COM

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  
01169

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: See below

PLEASE SEE ATTACHED STATEMENTS

7. How much is the claim? \$ 12,206.39. 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.

PROPERTY TAXES

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: BUSINESS PERSONAL PROPERTY TAXES

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: \$ 12,206.39

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) 12 %  Fixed With an additional 4% admin fee for amounts turned over to Treasurer after the case is filed (pursuant to MCL 211.78a). The interest rate is 18% for all real property subject to forfeiture and/or foreclosure (pursuant to MCL 211.78g).  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: PLEASE SEE ATTACHED STATEMENTS

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

No

Yes. Check all that apply:

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

Up to \$2,775\* 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 \$12,475\*) 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.

**Amount entitled to priority**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/16 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 07/05/2019  
MM / DD / YYYY

/s/ DIANE ROARK

Signature

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

Name Diane L. Roark  
First name Middle name Last name

Title Bankruptcy Specialist

Company Oakland County Treasurer  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1200 N. Telegraph Road, Dept 479  
Number Street

Pontiac MI 48341  
City State ZIP Code

Contact phone 248-858-0622 Email roarkd@oakgov.com



**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 50 99-00-017-046  
**Taxpayer:** LIGHT RX FACE & BODY  
**Property Address:** 44150 W TWELVE MILE, STE 200 NOVI MI 48377-  
**Property Description:** PERSONAL PROPERTY

**Statement**  
**Statement No:** 33109  
**Page:** 1 of 1  
**Date:** July 2, 2019

**Taxable Value:** \$107,560

**Tax Payments:**

Year	----- Due -----			Sale No.	Status
	Tax	Interest & Fees	Total		
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$4,760.10	\$428.41	\$5,188.51		Delinquent - Immediate Payment Required
<b>Total</b>			<b>\$5,188.51</b>		
<b>Statement Total</b>			<b>\$5,188.51</b>		If paid in July

LM

LIGHT RX FACE & BODY

44150 W TWELVE MILE, STE 200  
 NOVI MI 48377-

(248) 858-0612



**ANDREW E MEISNER**  
**OAKLAND COUNTY TREASURER**  
 1200 NORTH TELEGRAPH ROAD, PONTIAC, MICHIGAN 48341

**Parcel Identification No:** 08 99-00-017-031

**Taxpayer:** LIGHT-RX, FACE & BODY

**Property Address:** 33466 WOODWARD AVE BIRMINGHAM MI 48009-0906

**Property Description:** PERSONAL PROPERTY

**Statement**

**Statement No:** 33110

**Page:** 1 of 1

**Date:** July 2, 2019

**Taxable Value:** \$128,240

**Tax Payments:**

**Due**

Year	Tax	Interest & Fees	Total	Sale No.	Status
2014	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2015	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2016	\$0.00	\$0.00	\$0.00		Not Returned Delinquent
2017	\$0.00	\$0.00	\$0.00		Paid
2018	\$6,438.42	\$579.46	\$7,017.88		Delinquent - Immediate Payment Required

**Total** \$7,017.88

**Statement Total** \$7,017.88 If paid in July

LM LIGHT-RX, FACE & BODY

33466 WOODWARD AVE  
 BIRMINGHAM MI 48009-0906

(248) 858-0612



# 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:**

**Trustee:**

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

*Creditor:* (26040693)

**Claim No:** 139

*Status:*

OAKLAND COUNTY

*Original Filed*

*Filed by:* CR

TREASURER

*Date:* 07/05/2019

*Entered by:* Diane Roark

1200 N TELEGRAPH

*Original Entered*

*Modified:*

DEPT 479

*Date:* 07/05/2019

PONTIAC

MI

48341

Amount claimed: \$12206.39

Secured claimed: \$12206.39

### *History:*

[Details](#) [139-](#) 07/05/2019 Claim #139 filed by OAKLAND COUNTY TREASURER, Amount claimed: \$12206.39 (Roark, Diane)

*Description:* (139-1) Taxes plus interest at 12% per annum pursuant to MCL 211.59

*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

<b>Total Amount Claimed*</b>	\$12206.39
<b>Total Amount Allowed*</b>	

\*Includes general unsecured claims

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

	<b>Claimed</b>	<b>Allowed</b>
<b>Secured</b>	\$12206.39	
<b>Priority</b>		
<b>Administrative</b>		