

UNITED STATES BANKRUPTCY COURT Middle District of Tennessee		PROOF OF CLAIM
Name of Debtor: ORECK MANUFACTURING COMPANY	Case Number: 1304013	<div style="writing-mode: vertical-rl; transform: rotate(180deg);">FILED</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">2014 OCT 28 AM 9:58</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">MIDDLE DISTRICT OF TN</div>
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): FRANCHISE TAX BOARD		COURT USE ONLY
Name and address where notices should be sent: BANKRUPTCY SECTION MS A340 FRANCHISE TAX BOARD PO Box 2962 Sacramento CA 95812-2952		<input checked="" type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: <u>79</u> <i>(if known)</i> Filed on: <u>09/15/2013</u>
Telephone number: (916) 945-4750 email:		
Name and address where payment should be sent (if different from above): <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED OCT 29 2014 BMC GROUP </div>		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone number: email:		
1. Amount of Claim as of Date Case Filed: \$0.00 If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>Taxes and fees</u> <i>(See instruction #2)</i>		
3. Last four digits of any number by which creditor identifies debtor: 4153	3a. Debtor may have scheduled account as: <i>(See instruction #3a)</i>	3b. Uniform Claim Identifier (optional): <i>(See instruction #3b)</i>
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual interest rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable <i>(when case was filed)</i>		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Amount of Secured Claim: \$ _____ Amount Unsecured: <u>General \$0.00</u>
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.		
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B)	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,475) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier - 11 U.S.C. § 507 (a)(4)	<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507 (a)(5)
<input type="checkbox"/> 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)	<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(8)	<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(9)
		Amount entitled to priority: <u>\$0.00</u>
<i>*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</i>		
6. Credits The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		

Oreck POC



13-00079-2

7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 300.1(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box.



I am the creditor.



I am the creditor's authorized agent.



I am the trustee, or the debtor, or their authorized agent. (See Bankruptcy Rule 3004.)



I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: GENEVIEVE ADAIR

Title: Franchise Tax Board Claim Agent

Company: Franchise Tax Board

Address and telephone number (if different from notice address above):

(S) GENEVIEVE ADAIR
(Signature)

10/15/14
(Date)

Telephone number: (018) 845-4750

Email:

Penalty for presenting fraudulent claim: Fine up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.



STATE OF CALIFORNIA
BANKRUPTCY SECTION MS A340
FRANCHISE TAX BOARD
PO BOX 2952
SACRAMENTO CA 95812-2952

Phone: (916) 845-4750

Fax: (916) 845-9799

Bankruptcy Case Number:
1304013

Account Number(s):
XXX4153XXX

Proof of Claim

BMC Group, Inc.

600 First Avenue, Suite 300
Seattle WA 98104

Type of Liability:

BANK AND CORPORATION

Debtor(s): ORECK MANUFACTURING COMPANY

Basis of Liability Statement

Claim	Basis	Period	Tax	Penalty	Interest	Costs	Total Claim
B	3	02/30/2012	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
B	3	05/30/2013	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
B	4	03/19/2010	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
C	3	05/30/2012	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
T	4	05/30/2009	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
T	4	05/30/2010	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
T	4	05/30/2011	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Claim

- A. Secured
- B. Unsecured Priority
- C. Unsecured General
- T. To Be Determined

Basis

- 1. Return filed with balance due
- 3. No return filed
- 4. Audit Assessment
- 5. Other

Tax Lien Information for Secured Claim

Lien Certificate Number	Recording Date	County Recorder or Secretary of State	Recording Information	Tax Years Secured

The Franchise Tax Board Bankruptcy Section takes an active role in resolving bankruptcy issues. We can receive delinquent tax returns and encourage correspondence and telephone calls. We provide assistance to prevent unnecessary litigation.

Case 3:13-bk-04013 Claim 79-2 Filed 10/28/14 Desc Main Document Page 3 of 4



STATE OF CALIFORNIA
BANKRUPTCY SECTION MS A340
FRANCHISE TAX BOARD
PO BOX 2952
SACRAMENTO CA 95812-2952

Phone: (916) 545-4750

Fax: (916) 545-9799

Date: 10/15/14

Bankruptcy Case Number: 1304013

Petition Date: 05/06/2013

Debtor Name: ORECK MANUFACTURING COMPANY

Attachment

Franchise Tax Board (FTB) reserves the right to amend this claim/request based on any audit or investigation of any filed income tax returns or any other audit or investigation.

FTB reserves the right to amend this claim/request in accordance with applicable law, including, without limitation, modifying the amounts claimed as an administrative expense, secured, priority, and unsecured for the purposes of this bankruptcy case.

FTB reserves the right to amend this claim/request to add additional penalties and interest.

FTB's records indicate an income tax return has **not** been filed for the following tax year(s):
2012, 2013.

Accordingly, FTB reserves the right to amend this claim/request based upon receipt of such income tax return(s), any audit or investigation of such return(s), or any other audit or investigation.

FTB's claim, to the extent it is secured, is secured by all property and rights to property whether real or personal, tangible or intangible, including all after-acquired property and rights to property, belonging to the debtor(s) and located in this state. (California Revenue & Taxation Code §19221, California Government Code § 7170.) Should the value of the collateral be determined to be less than the amount of the secured claim or should the lien be avoided in whole or in part, FTB reserves the right to amend this claim to state its unsecured non-priority claim and its unsecured priority claim.

MIDDLE DISTRICT OF TENNESSEE

Claims Register

3:13-bk-04013 Oreck Manufacturing Co.

Judge: Keith M Lundin **Chapter:** 11
Office: Nashville **Last Date to file claims:**
Trustee: **Last Date to file (Govt):**

Creditor: (5289406)	Claim No: 79	Status:
FRANCHISE TAX BOARD	<i>Original Filed</i>	<i>Filed by:</i> CR
BANKRUPTCY SECTION MS	<i>Date:</i> 09/13/2013	<i>Entered by:</i> jmw
A340	<i>Original Entered</i>	<i>Modified:</i>
PO BOX 2952	<i>Date:</i> 09/13/2013	
SACRAMENTO CA 95812	<i>Last Amendment</i>	
2952	<i>Filed:</i> 10/28/2014	
	<i>Last Amendment</i>	
	<i>Entered:</i> 10/28/2014	
Amount claimed: \$0.00		

History:

Details 79-1 09/13/2013 Claim #79 filed by FRANCHISE TAX BOARD, Amount claimed: \$10124.34 (krn)
Details 79-2 10/28/2014 Amended Claim #79 filed by FRANCHISE TAX BOARD, Amount claimed: \$0.00 (jmw)

Description:

Remarks:

Claims Register Summary

Case Name: Oreck Manufacturing Co.
Case Number: 3:13-bk-04013
Chapter: 11
Date Filed: 05/06/2013
Total Number Of Claims: 1

Total Amount Claimed*	\$0.00
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		

