
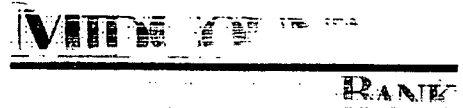


UNITED STATES BANKRUPTCY COURT Middle District of Florida, Jacksonville Div.		PROOF OF CLAIM
Name of Debtor: TAYLOR, BEAN & WHITAKER MORTGAGE CORP.		Case Number: 3:09-bk-07047-JAF
<i>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.</i>		
Name of Creditor (the person or other entity to whom the debtor owes money or property): BRUCE E FINLEY		Check this box to indicate that this claim amends a previously filed claim. <input type="checkbox"/>
Name and address where notices should be sent: BRUCE FINLEY 18 100 NEW DENNISON MARIOW ILLINOIS		Court Claim Number: _____ (If known)
Telephone number: 618-982-2828		Filed on: _____
Name and address where payment should be sent (if different from above): SAME		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
Telephone number:		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
1. Amount of Claim as of Date Case Filed: \$ <u>12,080.60</u>		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim.
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		
2. Basis for Claim: <u>ESCROW ACCOUNT - WORTHLESS CHECK.</u> (See instruction #2 on reverse side.)		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).
3. Last four digits of any number by which creditor identifies debtor: <u>5119.</u>		<input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).
3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.		<input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input checked="" type="checkbox"/> Other Describe: JACKSONVILLE, FLORIDA		<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).
Value of Property: \$ _____ Annual Interest Rate: _____ %		<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507 (a)(____).
Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____		Amount entitled to priority: \$ _____
Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		<i>*Amounts are subject to adjustment on 4/1/10 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.		
7. 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. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)		
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.		
If the documents are not available, please explain:		
Date: <u>1-10-10</u>	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. <i>Bruce Finley</i>	FOR COURT USE ONLY T, B & W Mortgage Corp.  00671

RETURNED ITEM NOTICE



MIDCOUNTRY BANK
 14617 HWY 7 (AT WILLISTON RD)
 MINNETONKA, MN 55345
 1 800 255 6795

ACCOUNT NUMBER	DATE
DD72003119	09/10/2009

WE HAVE CHARGED YOUR ACCOUNT FOR THE FOLLOWING ITEM(S):

DATE	DRAWN BY	DRAWN ON	REASON NO.	AMOUNT
09/10/2009	TAYLOR BEAN WHITTAKER	PLATINUM COMMUNITY BANK 305 N.E. 114TH ST OCALA, FL	7	\$12,069.60

REASON FOR NON-PAYMENT

1. Account Closed
2. Amounts Disagree
3. Cannot Locate Account
4. Drawn Against Uncollected Funds
5. Endorsement
6. Guarantee Amount
7. Not Sufficient Funds
8. Payee Missing
9. Payment Stopped
10. Post Dated
11. Refer to Maker
12. Signature Irregular
13. Signature Missing
14. Signature Not on File
15. Signature Unauthorized
16. Stale Dated
17. Counterfeit
18. Forgery
19. Unable to Locate Lost/Stolen
20. Foreign Currency

HANDLING CHARGES	\$0.00	5.00
TOTAL AMOUNT	\$12,069.60	12074.60

These items are being returned to you.

GUNCREEK DACHSHUNDS
 BRUCE E FINLEY
 18100 NEW DENNISON RD
 MARION IL 62959

