


<b>UNITED STATES BANKRUPTCY COURT Middle District of Florida, Jacksonville Div.</b>		<b>PROOF OF CLAIM</b>
Name of Debtor: <b>TAYLOR, BEAN &amp; WHITAKER MORTGAGE CORP.</b>		Case Number: <b>3:09-bk-07047-JAF</b>
<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): <b>Sam Rudd &amp; Amy Rudd</b>		Check this box to indicate that this claim amends a previously filed claim. <input type="checkbox"/>
Name and address where notices should be sent: <b>Sam Rudd 95 ASTON PARK DR.- EADS.TN. 38028</b>		Court Claim Number: _____ <i>(If known)</i>
Telephone number: <b>(901) 466-9985</b>		Filed on: _____
Name and address where payment should be sent (if different from above): <b>CLERK, U. S. BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA</b>		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. <input type="checkbox"/>
Telephone number: _____		Check this box if you are the debtor or trustee in this case. <input type="checkbox"/>
1. Amount of Claim as of Date Case Filed: \$ <u>2,912.85</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.  Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).  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).  Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5).  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).  Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8).  Other – Specify applicable paragraph of 11 U.S.C. §507 (a)(____).  Amount entitled to priority: \$ _____  <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>
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>Bounced check escrow RETURN</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: <u>6187</u>  3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
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.  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 _____ %  Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____  Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		
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: <b>02/01/2010</b>	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>Sam Rudd</i> <b>Sam Rudd</b>	<b>FOR COURT USE ONLY</b>  <b>T, B &amp; W Mortgage Corp.</b>  00864

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

\*081000045\*  
09/02/2009  
6112575241

This is a LEGAL COPY of  
your check. You can use it  
the same way you would  
use the original check.

RETURN REASON-X  
REFER TO IMAGE

FOPW  
SEP 02 2009

60840000267 08/27/2009  
642894001E00  
00  
92200004803

<b>TAYLOR, BEAN &amp; WHITAKER</b> Mortgage Corporation 315 NE 14th Street Orlando, Florida 32870 Escrow Disbursement Clearing Account		Platinum Community Bank 70-7445-719	<b>395835</b> CHECK NO. 395835
Two Thousand Nine Hundred Twelve and 85/100		Returned Not Paid Because	DATE August 7, 2009
PAY TO THE ORDER OF: SAM RUDD & AMY RUDD 95 ASTON PARK DR EADS TN 38028		NSB Presented	Twice
		Dollars \$2,912.85	
#395835# 1071974453# 0000904015#			

⑈395835⑈ 4:071974453: ⑈0000904015⑈ ⑈0000291285⑈



9/3/2009 Acct. Number 177968477  
Advice Number 695

This advice lists 1 item(s) being returned to your account 177968477 for a total of \$2,912.85, plus a service fee of \$10.00. For questions relating to this advice please call 901-542-7143. Thanks for choosing First Tennessee for all your banking needs.

Seq. No. 36830190  
Amount \$2,912.85

SAM RUDD  
AMY C RUDD  
95 ASTON PARK DR  
EADS, TN 38028

Totals: 1 \$2,912.85

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