

<b>UNITED STATES BANKRUPTCY COURT Middle District of Florida, Jacksonville Div.</b>	<b>PROOF OF CLAIM</b>
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Name of Debtor: Taylor, Bean & Whitaker Mortgage Corp.	Case Number: 3:09-bk-07047-JAF
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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.

Name of Creditor (the person or other entity to whom the debtor owes money or property): Michael W & Cynthia C Cook	<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number: _____ (If known)  Filed on: _____
Name and address where notices should be sent: Michael W and Cynthia C Cook 975 Blue Jay Way, Gallatin, TN 37066	<div style="font-size: 2em; font-weight: bold; margin: 0;">CLAIM FILED</div> <div style="font-weight: bold; margin: 0;">JACKSONVILLE, FLORIDA</div> <div style="font-size: 1.5em; font-weight: bold; margin: 10px 0 0 0;">MAR 02 2010</div>
Telephone number: (615) 452-5071	

Name and address where payment should be sent (if different from above): CLERK, U. S. BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA	<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.  <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
Telephone number:	

1. Amount of Claim as of Date Case Filed: \$ <u>3,476.90</u>  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.	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.  <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 \$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).  <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).  <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).  <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)( ).  Amount entitled to priority: \$ _____  *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.
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2. Basis for Claim: Unpaid escrow refund  
(See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: None

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:  Real Estate  Motor Vehicle  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: 02/22/2010	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.  <div style="font-family: cursive; font-size: 1.2em; margin-top: 10px;"> <span style="margin-right: 50px;">Michael W. Cook</span> <span>Cynthia C. Cook</span> </div>	FOR COURT USE ONLY  T, B & W Mortgage Corp.  01010
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\*061000146\*  
09/03/2009  
6316367630

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

0642089512 08/28/2009  
0000082375804

**TAYLOR, BEAK & WHEELER** Platinum Community Bank NO. 387967  
Mortgage Corporation  
315 NE 1st St.  
Orlando, Florida 32801  
Every Dubois Street Chicago Account

10-798-718

DATE: 08/26/2009 5:12 PM  
AMOUNT: \$3,478.00

THREE THOUSAND FOUR HUNDRED SEVENTY SIX AND 00/100

PAY TO THE ORDER OF: MICHAEL W COOK & SYNTIAC COOK  
875 BLUE JAY WAY  
GALLATIN TN 37066

320518901 08-19-09 0015857 00000401511

REASON: RECEIVED FROM DEBIT CARD

00000347690

⑆387967⑆

410719744531

⑆0000904015⑆

⑆0000347690⑆