


<b>UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA JACKSONVILLE DIVISION</b>		<b>PROOF OF CLAIM</b>	
In re: <b>TAYLOR, BEAN &amp; WHITAKER MORTGAGE CORP.</b>		Case Number: <b>3:09-bk-07047-JAF</b>	
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.		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	
Name of Creditor and Address: <small>the person or other entity to whom the debtor owes money or property If necessary, please cross out pre-printed address and write in change of address</small>		<b>CLAIM FILED</b> JACKSONVILLE, FLORIDA  <b>MAY 28 2010</b>  CLERK, U.S. BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA	
Dana R. Miller 7177 W 350th Greenfield, IN 46140			
Creditor Telephone Number (317) 891-0386	<input checked="" type="checkbox"/> Check box if address where Notice is to be sent.	<b>THIS SPACE IS FOR COURT USE ONLY</b>	
Name and address where payment should be sent (if different from above):	<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.		
Payment Telephone Number ( )	<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.	Claim Number (if known):	
Filed on: _____			
<b>1. AMOUNT OF CLAIM AS OF DATE CASE FILED</b> \$ <u>1862.48</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 checked="" 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.			
<b>2. BASIS FOR CLAIM:</b> <i>2.001</i> <u>refund check from escrow due to refinancing</u>		<b>3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:</b> <u>1269</u>	
<small>(See instructions #2 and #3a on reverse side.)</small>		3a. Debtor may have scheduled account as: _____	
<b>4. SECURED CLAIM</b> (See instruction #4 on reverse side.)			
Check the appropriate box if your claim is secured by a lien on property or a right of set off and provide the requested information		Secured Claim Amount: \$ _____	
<b>Nature of property or right of setoff:</b> Describe: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____		Unsecured Claim Amount: \$ _____	
Value of Property: \$ _____ Annual Interest Rate: _____ % if any: \$ _____		Amount of arrearage and other charges as of time case filed included in secured claim, _____	
		Basis for Perfection: _____	
<b>5. PRIORITY CLAIM</b>			
<input type="checkbox"/> 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.		Unsecured Priority Claim Amount: \$ _____	
<b>You MUST specify the priority of the claim:</b>		Include <b>ONLY</b> the priority portion of your unsecured claim here.	
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).		<input checked="" 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"/> 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"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).	
<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).		<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) ( _____ ).	
		* 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.	
<b>6. CREDITS:</b> The amount of all payments on this claim has been credited for the purpose of making this proof of claim.			
<b>7. SUPPORTING DOCUMENTS:</b> <u>Attach redacted copies of supporting documents</u> , such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of evidence of perfection of a security interest. (See definition of "redacted" on reverse side.) If the documents are not available, please explain.			
<b>DATE-STAMPED COPY</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.	
The original of this completed proof of claim form must be sent by mail, hand, courier or overnight delivery (facsimile, telecopy or other electronic means NOT accepted), so that it is actually received on or before 5:00 p.m. prevailing Eastern Time on June 15, 2010, the Bar Date (as defined in the Bar Date Notice).		<b>THIS SPACE FOR COURT USE ONLY</b>  T, B & W Mortgage Corp.  01629	
By Regular Mail to: BMC Group, Inc. Attn: Taylor, Bean & Whitaker Mortgage Corp. Claim Processing PO Box 3020 Chanhassen, MN 55317-3020			
By Hand, Courier, or Overnight Delivery to: BMC Group, Inc. Attn: Taylor, Bean & Whitaker Mortgage Corp. Claim Processing 18750 Lake Drive East Chanhassen, MN 55317			
DATE <u>5/15/10</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. <u>Dana R Miller</u> Scanned: 5/28/2010-1:02:30 PM		

# **INDIANA**

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## **Members Credit Union**

*Keeping It Simple*

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September 3, 2009

Account: 6001274308 - Miller

RE: Previously Deposited Check Returned

Dear Credit Union Member:

The enclosed check in the amount of \$1832.48, which was previously processed through your account, has been returned to us.

We have debited your account in the following manner:

- Your account has been debited \$, which includes a fee of \$.
- Your Loan, sub no. , has been debited \$, which includes a fee of \$.
- We have transferred \$1810.20, from your SAVINGS account to your CHECKING account. Your Checking account has been debited \$1862.48, which includes a fee of \$30.00.

All fees incurred should be collected from the person(s) or company that issued the check.

**RETURNED CHECK DEPOSITED FEES:**

- \$8.00 – NSF check deposited
- \$30.00 – NSF check deposited twice
- \$30.00 – NSF check deposited, payor is a business
- \$30.00 – NSF check deposited, payor is same as payee

Respectfully,

Item Processing Department  
Indiana Members Credit Union

Enclosed: Returned Check

\*071000301\*  
08/26/2009  
6219086809

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

08/25/2009  
212583153272800  
[274074040]

THIS DOCUMENT CONTAINS SECURITY FEATURES

**TAYLOR, BEAN & WHITAKER**  
Mortgage Corporation  
315 NE 14th Street  
Ocala, Florida 34470  
Escrow Disbursement Clearing Account

Platinum Community Bank

NO. 398124

70-7445-710

CHECK NO.  
398124

8

One Thousand Eight Hundred Thirty Two and 48/100

Dollars

PAY  
TO THE  
ORDER  
OF:

DANA MILLER  
7177 W 350 NORTH  
GREENFIELD IN 48140

DATE

August 12, 2009

AMOUNT

\$1,832.48

Returned No.

Because

NSF

*Laura Sigala*

320085421 08-25-2009 5266 01

⑆398124⑆ ⑆071974453⑆ 0000904015⑆

⑆398124⑆

⑆071974453⑆

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031000040 08/26/2009  
6119707146  
\*071000301\* 08/26/2009  
621906609

↑ Do not endorse or write below this line. ↓

*Chris R. Miller*

600274308

CA

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE  
RESERVED FOR FINANCIAL INSTITUTION

581719932  
631582723 882528 2718  
198 018 0802009

> 274074040 < 08/25/2009  
21256315327

Security Features:  
Bank MICR Numbers  
Void Panograph  
Warning Band

010578504  
08212009  
0710-0030-1  
PK# 190  
TRC=2187  
PK# 190  
08-26-09 101 5266 01

010578504  
08212009  
0710-0030-1  
PK# 190  
TRC=2187  
PK# 190  
08-26-09 101 5266 01