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| UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA JACKSONVILLE DIVISION | | PROOF OF CLAIM | |
| In re: TAYLOR, BEAN & WHITAKER MORTGAGE CORP. | | Case Number: 3:09-bk-07047-JAF | |
| 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: the person or other entity to whom the debtor owes money or property <i>If necessary, please cross out pre-printed address and write in change of address</i> | | CLAIM FILED JACKSONVILLE, FLORIDA JUN 04 2010 CLERK, U.S. BANKRUPTCY COURT | |
| Thomas Joseph Williams Allesyn Brooke Stuart 157 Sunset Pointe Dr. Clayton N.C. 27520 | | If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again. | |
| Creditor Telephone Number <u>919-422-0987</u> | | <input type="checkbox"/> Check box if address is where goods are to be sent | |
| Name and address where payment should be sent (if different from above): Thomas Joseph Williams 157 Sunset Pointe Dr Clayton N.C. 27520 | | <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: _____ | |
| 1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ <u>795.12</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. | | | |
| 2. BASIS FOR CLAIM: <u>Escrow Account (Mortgage)</u> | | 3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: <u>9151</u> | |
| (See instructions #2 and #3a on reverse side.) | | 3a. Debtor may have scheduled account as: _____ | |
| 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 set off and provide the requested information | | Secured Claim Amount: \$ _____ | |
| Nature of property or right of setoff: 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: _____ | |
| 5. PRIORITY CLAIM | | | |
| <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: \$ _____ | |
| Include ONLY the priority portion of your unsecured claim here. | | | |
| You MUST 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"/> 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. | | | |
| 6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. | | | |
| 7. SUPPORTING DOCUMENTS: Attach redacted copies of supporting documents, 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. | | DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. | |
| DATE-STAMPED COPY To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim. | | | |
| 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). | | THIS SPACE FOR COURT USE ONLY | |
| 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 | |
| T, B & W Mortgage Corp. | |  01668 | |
| DATE <u>5-25-2010</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>Thomas Joseph Williams</u> Scanned: 6/4/2010 2:40:49 PM | |

Penalty for presenting fraudulent claim is a fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 AND 357f.

6-75-2010 Allesyn Brooke Stuart ~~Thomas Joseph Williams~~ Allesyn Brooke Stuart

* This check did not clear and the money was drafted out of my account and I'm \$795.12 short because of this.

Thank-you

Thomas W. Williams

THIS DOCUMENT CONTAINS SECURITY FEATURES

TAYLOR, BEAN & WHITAKER

Mortgage Corporation

315 NE 14th Street

Ocala, Florida 34470

Escrow Disbursement Clearing Account

Platinum Community Bank

70-7445-719

NO. 393030

CHECK NO. 393030

Seven Hundred Ninety Five and 12/100

-Dollars

DATE

August 5, 2009

AMOUNTS

\$795.12


PAY TO THE ORDER OF:

THOMAS J WILLIAMS & ALLESYN B STUART
157 SUNSET POINTE DRIVE
CLAYTON NC 27520

Thomas Williams

AUTHORIZED SIGNATURE

⑆ 393030⑆ ⑆ 071974453⑆ 0000904015⑆

Security Features: 

- Bank MICR Numbers
- MICR routing and account numbers show red image on back.
- Void Pantograph
- Void appears in body of check when photocopied or faxed
- Warning Band
- Border warning of security features

FOR DEPOSIT ONLY
 STATE EMPLOYEES' CREDIT UNION
 SMITHFIELD-038 TELLER# P002

5-31-2011

RESERVED FOR FINANCIAL INSTITUTION USE

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE

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01
State Employees' Credit Union

Statement Date: 09-08-09

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#BWNCTLS
 #MEHDD HJS DDHQQ CM2#

THOMAS J WILLIAMS
 157 SUNSET POINTE DR
 CLAYTON NC 27520-4345

SUMMARY OF ACCOUNTS

| Account Type | Account Number | Beginning Balance | Debits | Credits | Ending Balance |
|--------------------------|----------------|-------------------|------------|------------|----------------|
| Interest Checking Shares | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |

For your safety, no social security or other tax identification numbers are printed on this statement.

INTEREST CHECKING

Daily Rates: 04-22-04 Thru 09-08-09 0.750%, Annual Percentage Yield: 0.750%

Statement Period: 08-06-09 Thru 09-08-09

THOMAS J WILLIAMS

Overdraft Account Number: [REDACTED]

Regular Shares

Account Number: [REDACTED]

ACCOUNT ACTIVITY

Beginning Balance: [REDACTED]

Interest Period: 08-06-09 Thru 09-08-09

SECU Foundation Year To Date: 9.00

Interest Earned Year To Date: 4.60

Number Of Days In Interest Period: 34

| Posted Date | Effective Date | + / - | Amount | Transaction Description | Ending Balance |
|-------------|----------------|-------|--------|---|----------------|
| 08-06-09 | 08-07-09 | + | 445.62 | SYSCO RALEIGH LL DIRECT DEP 020092188161240 | 1,092.64 |
| 08-07-09 | 08-07-09 | - | 4.94 | INTERLINK POS DEBIT L340 TIME 01.53 AM DATE 08-07 | |
| 08-07-09 | 08-07-09 | - | 2.14 | HANDY MART #162 SMITHFIELD NC VISA CHECK POS DEBIT L340 DATE 08-06 | 1,085.56 |
| 08-10-09 | 08-10-09 | - | .75 | MCDONALD'S F5134 SMITHFIELD ATM USAGE FEE | |
| 08-10-09 | 08-10-09 | - | 20.00 | ATM CASH WITHDRAWAL B1GA TIME 09.42 PM DATE 08-08 | |
| 08-10-09 | 08-10-09 | - | 20.00 | 1000 VANDORA SPRIGARNER NC ATM CASH WITHDRAWAL B1GA TIME 09.43 PM DATE 08-08 | |
| 08-10-09 | 08-10-09 | - | 3.62 | 1000 VANDORA SPRIGARNER NC INTERLINK POS DEBIT L343 TIME 10.46 PM DATE 08-07 EXXONMOBIL POS CLAYTON NC | |

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Statement is continued on next page

State Employees' Credit Union

THOMAS J WILLIAMS

Account Number: [REDACTED]

Statement Date: 09-08-09

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| Posted Date | Effective Date | + / - | Amount | Transaction Description | Ending Balance |
|-------------|----------------|-------|--------|---|----------------|
| 08-10-09 | 08-10-09 | - | 41.60 | INTERLINK POS DEBIT L343 TIME 12.15 PM DATE 08-08 CVS 3214 57 GLEN GARNER NC | |
| 08-10-09 | 08-10-09 | - | 64.04 | VISA CHECK POS DEBIT L340 DATE 08-07 CAROLINA TELECOM OCLAYTON | |
| 08-10-09 | 08-10-09 | - | 100.00 | VISA CHECK POS DEBIT L340 DATE 08-07 | 835.55 |
| 08-12-09 | 08-12-09 | - | 3.35 | ASURION SPRINT DED866-6446615 INTERLINK POS DEBIT L340 TIME 11.20 PM DATE 08-11 | 832.20 |
| 08-13-09 | 08-14-09 | + | 779.06 | HANDY MART #162 SMITHFIELD NC SYSCO RALEIGH LL DIRECT DEP 020092250474000 | |
| 08-13-09 | 08-13-09 | - | 20.00 | ATM CASH WITHDRAWAL BOSM TIME 05.03 PM DATE 08-12 502 N. BRIGHTLEAF SMITHFIELD NC | |
| 08-13-09 | 08-13-09 | - | 5.87 | VISA CHECK POS DEBIT L340 DATE 08-11 | 1,585.39 |
| 08-14-09 | 08-14-09 | + | 491.87 | CHICK-FIL-A #0102 SMITHFIELD Sysco Raleigh Manual Pay 020092260758007 | |
| 08-14-09 | 08-14-09 | - | 111.70 | VISA CHECK POS DEBIT L340 DATE 08-13 | |
| 08-14-09 | 08-14-09 | - | 779.06 | PAYPAL *YESCOMUSA 626-442-6629 SYSCO RALEIGH LL REVERSAL 020092260801550 | 1,186.50 |
| 08-17-09 | 08-17-09 | - | 28.81 | INTERLINK POS DEBIT L343 TIME 05.08 AM DATE 08-14 TRACTOR SUPPLY TRSELMA NC | |
| 08-17-09 | 08-17-09 | - | 16.14 | VISA CHECK POS DEBIT L340 DATE 08-14 | |
| 08-17-09 | 08-17-09 | - | 22.99 | PAYPAL *IVERNONOHI402-935-7733 VISA CHECK POS DEBIT L340 DATE 08-14 | |
| 08-17-09 | 08-17-09 | - | 26.98 | PAYPAL *SUPERIOR 402-935-7733 VISA CHECK POS DEBIT L340 DATE 08-14 | 1,091.58 |
| 08-18-09 | 08-18-09 | - | 12.95 | PAYPAL *WORLDWIDE 402-935-7733 VISA CHECK POS DEBIT L340 DATE 08-17 | 1,078.63 |
| 08-19-09 | 08-19-09 | + | 300.00 | Info.FreeCreditRepInfoFCR.com MEMBER DEPOSIT | 1,378.63 |
| 08-20-09 | 08-21-09 | + | 558.11 | SYSCO RALEIGH LL DIRECT DEP 020092322245451 | 1,936.74 |
| 08-21-09 | 08-21-09 | - | 431.68 | GMAC GMAC PAYMT 020092322318971 | 1,505.06 |
| 08-24-09 | 08-24-09 | - | 23.99 | VISA CHECK POS DEBIT L340 DATE 08-22 | 1,481.07 |
| 08-25-09 | 08-25-09 | - | 8.18 | PAYPAL *LHLMERCHAN402-935-7733 INTERLINK POS DEBIT L340 TIME 01.14 AM DATE 08-25 | |
| 08-25-09 | 08-25-09 | - | 6.47 | HANDY MART #162 SMITHFIELD NC VISA CHECK POS DEBIT L340 DATE 08-24 | 1,466.42 |
| 08-27-09 | 08-28-09 | + | 677.54 | WENDY'S SMITHFIELD SYSCO RALEIGH LL DIRECT DEP 020092393783430 | |

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State Employees' Credit Union*

THOMAS J WILLIAMS

Account Number: [REDACTED]

Statement Date: 09-08-09

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| Posted Date | Effective Date | + / - | Amount | Transaction Description | Ending Balance |
|-------------|----------------|-------|--------|---|----------------|
| 08-27-09 | 08-27-09 | - | 4.66 | VISA CHECK POS DEBIT L340 DATE 08-26 | |
| 08-27-09 | 08-27-09 | - | 144.49 | WENDY'S SMITHFIELD VISA CHECK POS DEBIT L340 DATE 08-26 | 1,994.81 |
| 08-28-09 | 08-28-09 | - | 60.00 | ALLSTATE *PAYMN800-255-7828 ATM CASH WITHDRAWAL B3GE TIME 12.56 PM DATE 08-28 1120 RAND RD. GARNER NC | |
| 08-28-09 | 08-28-09 | - | 3.35 | INTERLINK POS DEBIT L341 TIME 01.59 AM DATE 08-28 | |
| 08-28-09 | 08-28-09 | - | 4.68 | HANDY MART #162 SMITHFIELD NC INTERLINK POS DEBIT L340 TIME 05.15 PM DATE 08-27 | 1,926.78 |
| 08-31-09 | 08-25-09 | - | 795.12 | MCDONALD'S F5134 SMITHFIELD NC RETURNED CHECK | |
| 08-31-09 | 08-31-09 | - | 7.22 | INTERLINK POS DEBIT L341 TIME 06.08 PM DATE 08-29 | |
| 08-31-09 | 08-31-09 | - | 8.89 | JIMMY'S FOOD MAR CLAYTON NC INTERLINK POS DEBIT L341 TIME 12.40 PM DATE 08-28 | |
| 08-31-09 | 08-31-09 | - | 103.04 | TOM JONES DRUG GARNER NC INTERLINK POS DEBIT L340 TIME 09.46 AM DATE 08-29 | |
| 08-31-09 | 08-31-09 | - | 4.90 | WAL-MART #1321 SMITHFIELD NC VISA CHECK POS DEBIT L340 DATE 08-28 | |
| 08-31-09 | 08-31-09 | - | 6.39 | BOJANGLES 22 0190GARNER VISA CHECK POS DEBIT L340 DATE 08-28 | |
| 08-31-09 | 08-31-09 | - | 13.76 | BURGER KING #6216 CLAYTON VISA CHECK POS DEBIT L340 DATE 08-29 | |
| 08-31-09 | 08-31-09 | - | 60.00 | GOLDEN CORRAL 620 SMITHFIELD VISA CHECK POS DEBIT L340 DATE 08-28 | |
| 08-31-09 | 08-31-09 | - | 5.00 | GARNER FAMILY PRACGARNER RETURNED CHECK FEE | 922.46 |
| 09-01-09 | 09-01-09 | - | 9.73 | INTERLINK POS DEBIT L341 TIME 02.15 AM DATE 09-01 | |
| 09-01-09 | 09-01-09 | - | 7.18 | HANDY MART #162 SMITHFIELD NC VISA CHECK POS DEBIT L340 DATE 08-31 | 905.55 |
| 09-02-09 | 09-02-09 | - | 8.00 | WHITE SWAN SMITHFIELD STOP PAY FEE FOR CHECK 1279 | |
| 09-02-09 | 09-02-09 | - | 20.00 | ATM CASH WITHDRAWAL B2SM TIME 05.02 AM DATE 09-02 350 US HWY. 70 E.SELMA NC | |
| 09-02-09 | 09-02-09 | - | 3.21 | VISA CHECK POS DEBIT L340 DATE 09-01 | 874.34 |
| 09-03-09 | 09-03-09 | + | 795.00 | WENDY'S SMITHFIELD MEMBER DEPOSIT | |
| 09-03-09 | 09-04-09 | + | 477.89 | SYSCO RALEIGH LL DIRECT DEP 020092466056894 | |
| 09-03-09 | 09-03-09 | - | 13.40 | INTERLINK POS DEBIT L340 TIME 02.32 AM DATE 09-03 | 2,133.83 |
| 09-08-09 | 09-08-09 | - | 3.87 | WAL-MART #1321 SMITHFIELD NC INTERLINK POS DEBIT L341 TIME 03.26 AM DATE 09-08 HANDY MART #162 SMITHFIELD NC | |

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State Employees' Credit Union*

THOMAS J WILLIAMS

Statement Date: 09-08-09

Account Number: [REDACTED]

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| Posted Date | Effective Date | + / - | Amount | Transaction Description | Ending Balance |
|-------------|----------------|-------|--------|---|----------------|
| 09-08-09 | 09-08-09 | - | 4.30 | INTERLINK POS DEBIT L341 TIME 03.11 PM DATE 09-06 SCOTCHMAN 5 WHITE LAKE NC | |
| 09-08-09 | 09-08-09 | - | 9.59 | INTERLINK POS DEBIT L343 TIME 01.23 AM DATE 09-07 HANDY MART #162 SMITHFIELD NC | |
| 09-08-09 | 09-08-09 | - | 6.35 | VISA CHECK POS DEBIT L340 DATE 09-04 HARDEE'S #1215 SMITHFIELD | |
| 09-08-09 | 09-08-09 | - | 30.00 | VISA CHECK POS DEBIT L340 DATE 09-04 PAWS N CLAWS GROOMSMITHFIELD | |
| 09-08-09 | 09-08-09 | - | 1.00 | SECU FOUNDATION | |
| 09-08-09 | 09-08-09 | + | .84 | DIVIDEND EARNED | 2,079.56 |

SHARES

Daily Rates: 02-07-06 Thru 09-08-09 1.730%, Annual Percentage Yield: 1.750%

Statement Period: 08-06-09 Thru 09-08-09

THOMAS J WILLIAMS

Account Number: [REDACTED]

ACCOUNT ACTIVITY

Beginning Balance: [REDACTED]
Interest Period: 08-06-09 Thru 09-08-09

Interest Earned Year To Date: 2.48
Number Of Days In Interest Period: 34

| Posted Date | Effective Date | + / - | Amount | Transaction Description | Ending Balance |
|-------------|----------------|-------|--------|--|----------------|
| 08-12-09 | 08-12-09 | + | 458.98 | Member Deposit | 511.92 |
| 08-19-09 | 08-19-09 | - | 460.00 | ATM Withdrawal B0sm Time 2.47 Pm Date 08-18 502 N. Brightleafsmithfield NC | 51.92 |
| 09-08-09 | 09-08-09 | + | .21 | Interest Payment | 52.13 |