

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA JACKSONVILLE DIVISION	PROOF OF CLAIM
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In re: 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.

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. If necessary, please cross out pre-printed address and write the change of address.

CLAIM FILED

SEP 12 2011

CLERK, U. S. BANKRUPTCY COURT
MIDDLE DISTRICT OF FLORIDA

JACKSONVILLE, FLORIDA

Elizabeth Brock-Dorsa
724 NE 17 Ave
Ocala, FL 34470

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.
THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number 352 229-1869 Check box if address is where Notice is to be sent.

Name and address where payment should be sent (if different from above):

Same as above

Check this box if you are the debtor or trustee in this case.

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 \$ 969.24

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.

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: unpaid vacation time

(See Instructions #2 and #3a on reverse side.)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 2063

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

Nature of property or right of setoff:

Describe:

Real Estate Motor Vehicle Other _____

Value of Property: \$ _____ Annual Interest Rate: _____ % If any: \$ _____ Basis for Perfection: _____

Secured Claim Amount: \$ _____ **DO NOT** include the priority portion of your claim here.

Unsecured Claim Amount: \$ _____

Amount of arrearage and other charges as of time case filed included in secured claim, _____

5. PRIORITY CLAIM

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:

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) (_____).

* 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.

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.


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, teletype 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).

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
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THIS SPACE FOR COURT USE ONLY

T, B & W Mortgage Corp.



03480

DATE 9-9-11

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.


E. Brock-Dorsa

To: 'elizabeth.dorsa@yahoo.com' <elizabeth.dorsa@yahoo.com>

Cc: Lorraine Modafferi <lmodafferi@bmcgroup.com>; TBW2 <TBW2@bmcgroup.com>

Subject: TBW Vacation Error

Hi Elizabeth:

 I have confirmed that the books and records of TBW do indeed list you as having a vacation amount of \$969.24 and although it is not reflected in your claim, you will be paid the amount that is listed on the books and records. Please return the executed W-9 tax information form for processing.

Please let me know if you have any further questions or concerns.

Regards

Rose Serrette

Senior Manager

bmcgroup

rserrette@bmcgroup.com

o: 212.310.5911

c: 646-334-7767

f: 646-478-9816

875 Third Ave. 5th Floor . New York, NY 10022

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Subject: RE: TBW Vacation Error
From: Rosemarie Serrette (rserrette@bmcgroup.com)
To: elizabeth.dorsa@yahoo.com;
Date: Thursday, September 1, 2011 12:34 PM

To assure that a claim in the revised amount with your back up is on file you may file a proof of claim by logging on to the TBW website www.bmcgroup.com/tbwmortgage and click on "File A Claim" and mail the form to the address indicated.

Regards

Rose Serrette

Senior Manager

bmcgroup

o: 212.310.5911

From: elizabeth.dorsa@yahoo.com [mailto:elizabeth.dorsa@yahoo.com]
Sent: Thursday, September 01, 2011 9:15 AM
To: Rosemarie Serrette
Subject: Re: TBW Vacation Error

Thank you very much for researching this issue and responding. I will put the W-9 in the mail today. I really appreciate it!

Regards,
Elizabeth

Sent via BlackBerry by AT&T

From: Rosemarie Serrette <rserrette@bmcgroup.com>

Date: Thu, 1 Sep 2011 13:25:38 + 0000