Fill in this information to identify the case:	
Debtor 1 TAYLOR BEAN & WHITAKER MORTG	
Debtor 2 (Spouse, if filing)	<u>`</u>
United States Bankruptcy Court for the: MIDDLE	District of FLORIDA
Case number3:09-bk-07047-JAF (11)	(State)

RECEIVED

MAR 18 2016 BMC GROUP

ADMINISTRATIVE CLAIM

Official Form 410

Proof of Claim

12/15

pade :

Mortgage Corp

03527

T B & W

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1.	Who is the current creditor?	LOS ANGELES COUNTY TREASURER AND TAX COLLECTOR Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor								
ź.				•						
2.	Has this claim been acquired from someone else?	 ✓ No ❑ Yes. From whom? 	·····		·					
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should different)	payments to the credito	or be sent? (if					
		LOS ANGELES COUNTY TREASURER & TAX COLLECTOR	8	•						
	Federal Rule of Bankruptcy Procedure	Name	Name	· · · · · · · · · · · · · · · · · · ·	<u> </u>					
	(FRBP) 2002(g)	PO BOX 54110								
		Number Street	Number St	treet						
		LOS ANGELES CA 90054-0110								
		City State ZIP Code	City	State	ZIP Code					
		Contact phone (213) 974-7803	Contact phone	· .						
		Contact email bankruptcy@ttc.lacounty.gov	Contact email							
	· · ·	Uniform claim identifier for electronic payments in chapter 13 (if you use	one):		-					
4.	Does this claim amend	D No		· ·						
	one already filed?	Yes. Claim number on court claims registry (if known) 35	502	Filed on 01/13	8/2012					
				MM / 0	DD / YYYY					
5.	Do you know if anyone else has filed a proof of claim for this claim?	 ✓ No ❑ Yes. Who made the earlier filing? 								

Do you have any number you use to identify the debtor?	No ✓ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 2 0 1 1				
How much is the claim?	\$41,310.17 Does this amount include interest or other charges?				
	No				
	Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).				
What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.				
olum.	Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).				
	Limit disclosing information that is entitled to privacy, such as health care information.				
	PROPERTY TAXES AND ESTIMATED TAXES				
Is all or part of the claim secured?					
	Yes. The claim is secured by a lien on property.				
	Nature of property:				
	Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.				
	Motor vehicle				
	Other. Describe:				
	Basis for perfection:				
	Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for				
	example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)				
	Value of property: <u>\$</u> 362,051.00				
	Amount of the claim that is secured: \$_41,310.17				
	Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line				
	Amount necessary to cure any default as of the date of the petition: \$				
	Annual Interest Rate (when case was filed) 18 %				
	☑ Fixed □ Variable				
Is this claim based on a	M No				
lease?	Yes. Amount necessary to cure any default as of the date of the petition.				
Is this claim subject to a right of setoff?	M NO				
	Yes. Identify the property:				
	- res. identity the property:				
	Yes. Identity the property:				

12. Is all or part of the claim	Mo No	
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check all that apply:	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example,	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
in some categories, the law limits the amount entitled to priority.	□ Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$
	Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$
	Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$
	Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$
	□ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$
	* Amounts are subject to adjustment on 4/01/16 and every 3 years after that for cases begun on or after	er the date of adjustment.

Part 3: Sign Below

The person completing Check the appropriate

this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- L am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date

date 03/16/2016

Oscar Estrada

Signature

Print the name of the person who is completing and signing this claim:

Name	OSCAR	ESTRADA					
	First name	Middle name		Last name			
Title	TAX SERVICES SPE	CIALIST					
Company	LOS ANGELES COUNTY						
	Identify the corporate serv	vicer as the company if the authori	zed agent	t is a servicer.			
Address	PO BOX 54110						
Address	PO BOX 54110 Number Street						
Address			СА	90054-0110			
Address	Number Street		CA State	90054-0110 ZIP Code			



DECLARATION OF SERVICE OF MAIL

STATE OF CALIFORNIA, County of Los Angeles:

Oscar Estrada states: I am and at all times herein mentioned have been a citizen of the United States and a resident of the County of Los Angeles, over the age of eighteen years and not a party to nor interested in the within action; that my business address is 130 Kenneth Hahn Hall of Administration, City of Los Angeles, County of Los Angeles, State of California; that I am readily familiar with the business practice of the Los Angeles County Treasurer and Tax Collector for collection and processing of correspondence for mailing with the United States Postal Service; and that the correspondence would be deposited within the United States Postal Service that same day in the ordinary course of business;

That on the **16th day** of **March**, **2016**, I served the attached **PROOF OF CLAIM** upon Interested Party(ies) by depositing copies thereof, enclosed in a sealed envelope and placed for collection and mailing on that date following ordinary business practices in the United States Postal Service, addressed as follows:

Debtor or Debtor's Attorney

Edward J Peterson III Stichter Riedel Blain & Postler PA 110 E Madison St Ste 200 Tampa FL 33602

Chapter 7 or 13 Standing Attorney

N/A

l declare under penalty of perjury that the foregoing is true and correct. Executed this **16th day** of **March, 2016**, at Los Angeles, California.

Oscar Estrada

LOS ANGELES COUNTY TAX COLLECTOR 225 NORTH HILL STREET, LOS ANGELES, CA 90012 STATEMENT OF PRIOR YEAR TAXES

AS OF 03/16/16

CRT: N#92 E484767

PARCEL INFORMATION

ASSESSOR'S ID# 3001 132 040 YRSEQ AIN

SPECIAL INFORMATION

TAX DEFAULTED IN 2012 FOR UNPAID TAXES OF 2011.

FEDERAL HOME LOAN MORTGAGE COR 1417 N MAGNOLIA AVE OCALA FL 34475

DESCRIPTION TR=49016-08 LOT 141

ASSESSOR'S	ESSOR'S D/O TAX AMOUNT PENALTY & COST		& COST	REDEMPTION				
ID NO	YRSEQ	YR	ORIGINAL	BALANCE	ORIGINAL	BALANCE	PENALTY	TOTAL
3001 132 040	11000	12	4601.05	4601.05	470.10	470.10	3105.70	8176.85
3001 132 040	12000	13	4560.53	4560.53	466.04	466.04	2257.46	7284.03
3001 132 040	13000	14	4582.23	4582.23	468.22	468.22	1443.40	6493.85
3001 132 040	14000	15	5578.41	5578.41	567.84	56784	753.08	6899.33
	TOTAL		19322.22		1972.20		7559.64	28854.06
						REDEMPTION FEE:		15.00
						AMOUNT TO PAY:		28869.06*

*ADD \$289.83 PENALTY PER MONTH, FROM 04/16, IF NOT PAID BY 04/15/16.

THERE WILL BE A \$50.00 SERVICE CHARGE FOR ANY CHECK RETURNED BY THE BANK. KEEP THIS UPPER PORTION OF THE BILL FOR YOUR RECORDS. YOUR CANCELLED CHECK IS YOUR RECEIPT.

	DETACH AND MAIL THIS STUB WITH YOUR PAYMENT	STATEMENT OF PRIOR YEAR TAXES	
PLEASE SEE	FEDERAL HOME LOAN MORTGAGE COR	YR SEQ MPBK PGE PCL PK TYPE AK DSEQ	
REVERSE FOR	1417 N MAGNOLIA AVE OCALA FL 34475	00 000 3001 132 040 7 1 0 000	
PERTINENT	MUST BE RECEIVED BY: 04/15/16 COMP DTE 1603 TAX DEF 2012 LOAN ID:	TOTAL DUE INDICATE AMOUNT 28869.06	PAID
INFORMATION	MAKE CHECK PAYABLE TO:	LOS ANGELES COUNTY TAX COLLECTOR	
	CRT: N#92 E484767	P. O. BOX 54088 LOS ANGELES, CA 90054-0088	

000007000330011320406000288690651016041516038



SUBSTITUTE SECURED PROPERTY TAX BILL

JULLES ANGELES COUNTY TAX COLLECTOR 2016

225 North Hill Street, Los Angeles, CA 90012

E4 8-6 RASSISTANCE CALL 1(213) 974-2111 OR 1(888) 807-2111, ON THE WEB AT www.lacountypropertytax.com

3001 132 040 FEDERAL HOME LOAN MORTGAGE CORP ID#:19 3001 132 040 5 YR:15 SEQ:0003 1417 N MAGNOLIA AVE OCALA FL 34475

SITUS ADDRESS: 4326 CLUB VISTA DR PALMDALE CA 93551-5658

Map Book Pag		Page Parcel Yea		Seq. No.	1 ST INSTALLMENT 10% Penalty After	2ND INSTALLMENT 10% Penalty + \$10.00 Cost After 0.4 1.0 1.6	TOTAL TAX Penalties Apply When Shown
300-	131	TAX) 19	-004	2893 29	2893:28	5786 57
		PENALT	Y		289: 32	<u> </u>	289' 32
		TOTAL			3182 61	2893 28	6075' 89
		NET PD	/REF		5102 01	2000 200	00
		DUE		公司的全部 。19	3182' 61	2893: 28	6075' 89

ROLL YEAR	CURRENT ASSESSED VALUE	PRIOR ASSESSED VALUE	TAXABLE VALUE
LAND	90002		90002
IMPROVEMENTS	272042		272049
FIXTURES	272013		272019
		TOTAL	
AUTH. NO.	.: 000153 I	C LESS EXEMPTION	362051
PRINT DAT	FE: 03 16 1	6 NET TAXABLE VALUE	362051

ANY RETURNED PAYMENT MAY BE SUBJECT TO A FEE UP TO \$50.00.

IN ADDITION TO THIS BILL OUR RECORDS INDICATE THAT THERE ARE OTHER TAXES DUE ON THIS PROPERTY

53605

NET TAXABLE VALUE		362051					
PRIOR DELINQUENCY		USE		MBERS ON AL		S	1
FEDERAL HOME LOAN MORTGAGE CORP		ASSESSOR'S ID. NO.					Pay
1417 N MAGNOLIA AVE		Map Book	Page	Parcel	Year	Seq. No.	Key
OCALA FL 34475		3001	. 13	2 040	0 15	000	2
		2ND IN	STALLME	ENT	IND	ICATE AM	OUNT PAID

000153 LC

3192 60

PAY THIS AMOUNT BY: 04 10 16

If not paid by add penalty and cost 04 10 16 MAKE PAYMENT PAYABLE TO: to 2nd Installment 299 32 Please write the ASSESSOR'S ID. NO. on the lower left corner of your payment.

LOS ANGELES COUNTY TAX COLLECTOR P.O. BOX 54018 LOS ANGELES, CA 90054-0018

2893

28

CRT: N#92

765983 (REV. 5/2012)

16515000330011320400000289328000031926060520411

DETACH AND MAIL THIS STUB WITH 2ND INSTALLMENT PAYMENT

ANNUAL

for a total of:

E484767

CRT: N#92

ASSESSOR'S ID. NO.

ANNUAL

٦

PRIOR DELINOUENCY

FEDERAL HOME LOAN MORTGAGE CORP	ASSESSOR'S ID. NO.
1417 N MAGNOLIA AVE OCALA FL 34475	Map Book Page Parcel Year Seq. No. Key
	3001 132 040 15 000 1 1ST INSTALLMENT INDICATE AMOUNT PAID
000153 LC PAY THIS AMOUNT BY: 12 10 15	5 3182 61
If not paid by add penalty	63688
ID. NO. on the lower left corner P.O.	
for a total of:	ANGELES, CA 90054-0018
CRT: N#92 E484767 X 9961500033001133	204000031856100003185616881999

DETACH AND MAIL THIS STUB WITH 1ST INSTALLMENT PAYMENT



CLAIM ATTACHMENT SHEET

This claim is a secured tax secured by a statutory lien under California state law. This claim is secured under 11 U.S.C. Section 506(b).

This claim is subject to interest under California Revenue and Taxation Code Section 4103, 11 U.S.C. Section 506 (b) and 11 U.S.C. Section 511 as well as costs, fee and attorney fees.

The claim will continue to increase and interest will continue to accrue until it is paid.

Taxes for **2016-2017** in the amount of **\$6,365.22** due to statutory lien date of January 1st per the California Revenue and Taxation Code Section 2192. The amount of taxes is to be determined. An Amended claim will be filed once the exact dollar amount is available.

