

B 10 (Official Form 10) (12/08)

RECD  
MAY 20 2009

UNITED STATES BANKRUPTCY COURT      Southern District of Ohio		PROOF OF CLAIM
Name of Debtor <b>Triad Resources, Inc</b>		Case Number <b>08-62733</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		
Name of Creditor (the person or other entity to whom the debtor owes money or property) <b>Ahola Corporation</b>		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim
Name and address where notices should be sent <b>Ahola Corporation c/o Michael J Kaczka, McDonald Hopkins LLC 600 Superior Avenue Suite 2100 Cleveland, OH 44114</b>		Court Claim Number _____ (If known)
Telephone number <b>(216) 348-5400</b>		Filed on _____
Name and address where payment should be sent (if different from above) <b>Ahola Corporation, 6820 W Snowville Road Brecksville OH 44141</b>		<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
Telephone number <b>(440) 717-7690</b>		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case
1 Amount of Claim as of Date Case Filed      \$ <u>1 303 30</u>		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 \$ _____  <small>*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.</small>
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>Services Provided</u> (See instruction #2 on reverse side)		
3 Last four digits of any number by which creditor identifies debtor _____  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 <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> 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 <b>05/22/2009</b>	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.  <b>/s/Michael J Kaczka</b>	

FILED  
MAY 22 2009

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571

1746264

Triad Resources Inc



33-00206

Ahola Corporation  
 6820 W Snowville Rd  
 Brecksville, OH 44141  
 Phone (440) 717-7620  
 Fax (440) 717-7690

# Invoice & Statement



Inv Date	Inv No.
12/31/2008	20907

**Triad Resources Inc**  
 27724 State Route 7  
 Marietta, OH 45750-5147

**TERMS - NET CASH ON RECEIPT**

Date	Description of Services	Rate	Unit (am)	Qty.	Subtotal	Total	Statement	
							Inv No.	Date Past Due
12/05/08	Payroll Fees - Cycle 28			147	163 55			
12/05/08	Stuff & Seal Checks	2 00	0 12ea	147	19 64			
12/05/08	Transmit 401-K Data	8 50		1	8 50			
12/05/08	E-Delivery of Payroll	1 75		1	1 75			
12/05/08	UPS Ground	6 95		1	6 95			
12/05/08	Direct Deposit Fee	5 00	0 20ea	145	34 00	234 39		
12/19/08	Payroll Fees - Cycle 29			143	160 35			
12/19/08	Stuff & Seal Checks	2 00	0 12ea	143	19 16			
12/19/08	Transmit 401-K Data	8 50		1	8 50			
12/19/08	E-Delivery of Payroll	1 75		1	1 75			
12/19/08	UPS Ground	6 95		1	6 95			
12/19/08	Direct Deposit Fee	5 00	0 20ea	139	32 80	229 51		
12/30/08	Payroll Fees - Cycle 30			121	142 75			
12/30/08	Stuff & Seal Checks	2 00	0 12ea	121	16 52			
12/30/08	Transmit 401-K Data	8 50		1	8 50			
12/30/08	E-Delivery of Payroll	1 75		1	1 75			
12/30/08	UPS Next Day Air	12 75		1	12 75			
12/30/08	Direct Deposit Fee	5 00	0 20ea	121	29 20	211 47		
12/30/08	Payroll Fees - Cycle 31			16	40 75			

Continued on Page...

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Date	Description of Services	Price	Unit (up)	Qty	Subtotal	Total	Statement		
							Inv. No.	Date	Fast Due
12/30/08	Stuff & Seal Checks	2 00	0 12ea	16	3 92				
12/30/08	Transmit 401K Data	8 50		1	8 50				
12/30/08	E Delivery of Payroll	1 75		1	1 75				
12/30/08	UPS Next Day Air	12 75		1	12 75	67 67			
12/31/08	W-2 Production	25 00	2 50ea	177	467 50				
12/31/08	Quarterly Reports (Handling)	7 50		1	7 50	475 00			
<b>Subtotal = 1,218.04 Taxable = 1,218.04 Tax @ 7.000% = 85.26 Invoice Amount = 1,303.30</b>							<b>Fast Due Balance = 0 00</b>		

No Payment is Due At This Time. Thank You!

Triad Resources Inc  
 27724 State Route 7  
 Marietta, OH 45750-5147

Ahola Corporation  
 6820 W. Snowville Rd  
 Brecksville, OH 44141-3214

Customer Number	9344
Invoice Date	12/31/2008
Invoice Number	20907
Invoice Amount	1,303 30
Fast Due Balance	0 00
Amount Received	0 00
Amount Due	0 00
Amount Paid	1,303 30

EFT Debit from 00002001034136 on 01/15/2009

# Southern District of Ohio Claims Register

2 08-bk-62733 Triad Resources, Inc

**Judge:** C Kathryn Preston

**Chapter:** 11

**Office:** Columbus

**Last Date to file claims:** 05/25/2009

**Trustee:**

**Last Date to file (Govt):**

<i>Creditor</i> (12429150) Ahola Corporation c/o Michael J Kaczka McDonald Hopkins LLC 600 Superior Avenue, East Suite 2100 Cleveland, OH 44114	<b>Claim No</b> 206 <i>Original Filed</i> <i>Date</i> 05/22/2009 <i>Original Entered</i> <i>Date</i> 05/22/2009	<i>Status</i> Filed by CR Entered by Kaczka, Michael Modified
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Unsecured claimed \$1303 30

**Total claimed \$1303.30**

History

Details 206-1 05/22/2009 Claim #206 filed by Ahola Corporation, total amount claimed \$1303 3  
(Kaczka, Michael )

Description (206-1) Services Provided

Remarks

## Claims Register Summary