

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF IDAHO (TWIN FALLS)**

Name of Debtor  
Lynn Ketterling  
Jeanne Ketterling

Case Number  
03-41318 -12 U.S. COURTS

U.S. COURTS  
03 JUL 29 PM 1:41  
2156754

Name of Creditor (The person or other entity to whom the debtor owes money or property):  
Tom Armstrong  
Name and Address where notices should be sent:  
  
Tom Armstrong  
925 East 100 North  
Declo, ID 83323

- 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.
- Check box if you have never received any notices from the bankruptcy court in this case.
- Check box if the address differs from the address on the envelope sent to you by the court.



THIS SPACE IS FOR COURT USE ONLY

Telephone Number: 208-654-2582

Account or other number by which creditor identifies debtor:

Check here if  replaces  amends a previously filed claim, dated \_\_\_\_\_

**1. Basis for Claim**

- Goods sold
- Services performed
- Money loaned
- Personal injury/wrongful death
- Taxes
- Other \_\_\_\_\_

- Retiree benefits as defined in 11 U.S.C. §1114(a)
- Wages, salaries, and compensation (fill out below)  
Your SS #: \_\_\_\_\_  
Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_  
(date) (date)

**2. Date debt was incurred:**

12-3-02 12-9-02 12-10-02

**3. If court judgment, date obtained:**

**4. Total Amount of Claim at Time Case Filed:**

\$ 651.76

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

**5. Secured Claim.**

Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- Real Estate  Motor Vehicle
- Other \_\_\_\_\_

Value of Collateral: \$ \_\_\_\_\_

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ \_\_\_\_\_

**6. Unsecured Priority Claim.**

Check this box if you have an unsecured priority claim  
Amount entitled to priority \$ \_\_\_\_\_

Specify the priority of the claim:

- Wages, salaries, or commissions (up to \$4,650)\* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
- Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
- Up to \$ 2,100\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
- Alimony, maintenance, or support owed to a spouse, former spouse, or child - 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 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

**7. Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

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**8. Supporting Documents:** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

**9. 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.

Date

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

7-25-03

Tom Armstrong - Tom Armstrong

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.

Chapter 12 and 13 claims, along with any supporting must be filed in duplicate.

# Statement

Tom & Charlotte Armstrong

925 East, 100 North

Declo, ID 83323

DATE

7/23/2003

TO:

Lynn Ketterling  
100 N, 160 W  
Rupert, ID 83350

DATE	ITEM	DESCRIPTION	QTY	AMOUNT	BALANCE
05/31/02		Balance forward			0.00
12/09/02	Stacks	1602 bales of Straw from 400W. 40N.	18	414.00	414.00
12/10/02	Stacks	1886 bales Straw from 435N, 500W.	22	506.00	920.00
03/31/03		PMT #2115 - Partial Payment		-100.00	820.00
04/04/03	Fin. Chg.	Feb & Mar.	2	31.76	851.76
04/24/03		PMT #2179 - partial		-100.00	751.76
05/23/03		PMT #2239 - partial		-100.00	651.76

Thank You ! 654-2582

OR

312-2582

AMOUNT DUE

\$651.76

RETRIEVER FORM

START DATE \_\_\_\_\_ FINISH DATE \_\_\_\_\_ DRIVER: Lynn Ketterling  
 CUSTOMER: Lynn Ketterling

DATE	PICKUP AT	WEIGHT	NO. BALES	DELIVERED TO	REMARKS
	<u>20 N, 400 W</u>				
<u>12-3-02</u>	<u>20040 40 N Fall</u>	<u>2</u>	<u>178</u>	<u>Lynn's</u>	<u>11:35</u>
"		<u>2</u>	<u>178</u>	"	<u>12:50</u>
"		"	<u>178</u>	"	<u>3:00</u>
"		<u>2</u>	<u>178</u>	"	<u>4:55</u>
<u>12-9-02</u>	"	<u>2</u>	<u>178</u>	"	<u>10:00</u>
		<u>2</u>	<u>178</u>	"	<u>10:50</u>
		<u>2</u>	<u>178</u>	"	<u>11:35</u>
		<u>2</u>	<u>178</u>	"	<u>12:10</u>
		<u>2</u>	<u>178</u>	"	<u>12:50</u>
	<u>425 N, 500 W</u>	<u>2</u>	<u>176</u>	"	<u>1:35</u>
		<u>2</u>	<u>176</u>	"	<u>2:25</u>
		<u>2</u>	<u>176</u>	"	<u>3:20</u>
		<u>2</u>	<u>176</u>	"	<u>4:10</u>
		<u>2</u>	<u>176</u>	"	<u>5:00</u>
<u>12-10-02</u>	"	<u>2</u>	<u>170</u>	"	<u>10:10</u>
		<u>2</u>	<u>176</u>	"	<u>11:10</u>
		<u>2</u>	<u>176</u>	"	<u>12:10</u>
		<u>2</u>	<u>176</u>	"	<u>1:05</u>
		<u>2</u>	<u>176</u>	"	<u>2:00</u>
		<u>1+</u>	<u>132</u>	"	<u>3:00</u>
		<u>40</u>	<u>3488</u>		
	TOTAL	TOTAL			

Mr. and Mrs. Thomas E. Armstrong  
 925 East 100 North  
 Declo, ID 83323