

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF IDAHO (BOISE)**

PROOF OF CLAIM
U.S. COURTS
2003 JAN 16 AM 10:04
REC'D FILED
02-03228
1985166
THIS SPACE IS FOR COURT USE ONLY

Name of Debtor
Christina M Bosier

Case Number
02-03228

NOTE: This form should not be used to request a claim for an administrative expense arising after the commencement of this case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. §400.

Name of Creditor (The person or other entity to whom the debtor owes money or property):
Credit Data Idaho, Inc.
Name and Address where notices should be sent:

Credit Data Idaho, Inc.
PO Box 4068
Boise, ID 83711

Telephone Number:

- 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.

Account or other number by which creditor identifies debtor:
531822

Check here if replaces this claim 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:
7-01 - 11-01

3. If court judgment, date obtained:
PRN INT

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

\$ 1849.86 PRN 243.88 INT = 2093.74

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.
- 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.

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Date: 1-13-03
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):
Arnold J. J.

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.

01/14/03

CREDIT DATA IDAHO, INC.

PAGE 1

4:44 PM CAF

SELECTED

DEBTOR Name: BOSIER CHRIS M San: 0198888888 Cbr: Ph: 208 455-2109
 Adrl: 1619 HMLENA POE: GOLD TRANSPORTATION POB Ph: 200-453-1112
 Adr2: Adr: 710 E ALBANY Prog: Pay: 0.00
 City: CALDWELL Cty: CALDWELL Canc: Born:
 St: ID Zip: 83605 St: ID Zip: 82605 COP: Sal:

Clnt: 26336 IDAHO POWER CO., BOISE ID, 9222896462-071801 Org: 1510.65
 List: 07/20/01 Srv: 07/10/01 Ltrs: 9 Time: 07 Calls: 19 Con: 10 Bal: 1725.58
 Aty: 0 Int: 208.90

MULTIPLE ACCOUNTS

RM#	Acct	Name / Client	Let	Srv	Lpy	Col	Disp	Bal	Check Reason	Drivers License #
	PRN	INT	LI3	LI4	AIN	CC	ATY	MS1	FJI	
1	531822*	BOSIER, CHRIS M								
	9222896462-071001/26336/IDAHO P		07/20/01	07/18/01			BKD 40FC	1725.58		
	1516.65	0.00	0.00	0.00	218.90	0.00	0.00	0.00		
1	556082	BOSIER, CHRIS M								
	9222896462-112701/26336/IDAHO P		02/14/02	11/27/01			BKD 40FC	258.16		
	333.18	0.00	0.00	0.00	24.98	0.00	0.00	0.00		

** END OF REPORT **

CREDIT DATA IDAHO, INC.
P.O. BOX 4068
BOISE ID 83711-4068

208.322.3000 EXT. 3113
TOLL FREE 800.723.3223 EXT. 3113
FAX 208.322.3013

IDAHO POWER CO.
PO BOX 70
FAX # 388-6919
BOISE ID 83707

DEC 30 2002
BKD
337

REQUEST FOR ASSIGNMENT

A CHAPTER THIRTEEN (13) BANKRUPTCY HAS BEEN FILED BY THE DEBTOR. We are required by law to provide an itemized statement to file the proof of claim in this action. We have your account records currently on file there is no need for your to provide us with a statement.

We also would like to take this opportunity to have you sign the assignment attached below. This document is required if we are to represent you in this proceeding.

Please sign the assignment and return this original document. We appreciate your prompt attention to this matter.

Bankruptcy Desk
Clerical Department

Debtor Name: CHRIS M BOSIER
Our Acct # : 531822
Your Acct #: 9222896463-071801
List Date : 07/20/01
Serv. Date : 07/18/01
BALANCE : 1516.68

Debtor Address:
1619 HELENA
CALDWELL, ID 83605

ASSIGNMENT

For value received, and for the purpose of collection, IDAHO POWER CO. hereby assigns and transfers to CREDIT DATA IDAHO, INC. all of our rights, title, and interest in and to OUR/MY claim against CHRIS M BOSIER in the sum of \$1516.68, and we hereby authorize and direct you as the assigned to act in OUR/MY behalf.

Date: 1-2-03

IDAHO POWER CO.



AUTHORIZED SIGNATURE

*****Please Rush, Deadline to file a proof of claim is 012503, Thank you for your prompt attention to this matter. If you have any questions please contact me at (208) 947-3548.*****

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Please sign the assignment and return this original document. We appreciate your prompt attention to this matter.

Bankruptcy Desk
Clerical Department

Debtor Name: CHRIS M BOSIER
Our Acct # : 556082
Your Acct #: 9222896463-112701
List Date : 02/14/02
Serv. Date : 11/27/01
BALANCE : 333.18

Debtor Address:
1619 HELENA
CALDWELL, ID 83605

ASSIGNMENT

For value received, and for the purpose of collection, IDAHO POWER CO. hereby assigns and transfers to CREDIT DATA IDAHO, INC. all of our rights, title, and interest in and to OUR/MY claim against CHRIS M BOSIER in the sum of \$333.18, and we hereby authorize and direct you as the assigned to act in OUR/MY behalf.

Date: 1-2-03

IDAHO POWER CO.



AUTHORIZED SIGNATURE

*****Please Rush, Deadline to file a proof of claim is 012503, Thank you for your prompt attention to this matter. If you have any questions please contact me at (208) 947-3548.*****