

**United States Bankruptcy Court
District of Idaho**

Complete this form and mail to: U.S. Bankruptcy Court 550 W. Fort St. Boise, ID 83724

PROOF OF CLAIM

THIS SPACE IS FOR COURT USE ONLY

U.S. COURTS
01 JUL 27 PM 4:47
REC'D
CAMERON BURKE
CLERK IDAHO

Name of Debtor: **ROARK, ASA WILLET "BILL"** Case Number: **01-02073**

Chapter: **13** Trustee: **BERNIE R. RAKOZY**
Proof of claim form and all supporting documents must be filed in **DUPLICATE** on Chapter 12 and 13 cases

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 U.S.C. §503

Name of Creditor (The person or other entity to whom the debtor owes money or property):

**Ada County Treasurer
P.O. Box 2868
Boise, Idaho 83701**

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.

Account or other number by which identifies debtor:
S0513417682 – 1999, 2000

Check here if this claim: Replaces Amends a previously filed claim dated:

1. Basis for Claim Goods Sold Services Performed Money Loaned Personal Injury/Wrongful Death Taxes
 Retiree benefits as defined in 11 U.S.C. §1114(a) Other (please describe):
 Wages, Salaries and compensation: Your Social Security Number: _____
 Unpaid Compensation for services performed from _____ (date) to _____ (date)

2. Date debt was incurred: First Position Lien as of Jan 1 each year. I.C. § 63-206

3. If court Judgment, date obtained:

4. SECURED CLAIM
 Check 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 \$ **58,400.00**

Amount of arrearage and other charges *at time the case was filed* included in secured claim, if any:

\$ **2,109.80***

Plus interest accruing at 1% per month - Idaho Code § 63-1001

*Includes a one time late charge of 2% as provided by statute.

5. UNSECURED PRIORITY CLAIM
 Check box if you have an unsecured priority claim
Amount entitled to priority \$ _____
SPECIFY PRIORITY OF CLAIM:
 Wages, Salaries, or commissions (up to \$4000)* 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 \$1,800* 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 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.*

6. TOTAL AMOUNT OF CLAIM AT TIME CASE WAS FILED

UNSECURED \$ _____ SECURED \$ **2,109.80**

PRIORITY \$ _____ TOTAL \$ **2,109.80**

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

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, mortgage security agreements, and evidence of perfection of . DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, please 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)

July 26, 2001

LYNDA FISCHER *Lynda Fischer*
ADA COUNTY TREASURER

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

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 27th day of July, 2001, I served a true and correct copy of the foregoing PROOF OF CLAIM to the following person(s) by the following method:

BERNIE R. RAKOZY
P.O. BOX 1738
BOISE, ID 83701

_____ Hand Delivery
 X U.S. Mail
_____ Certified Mail
_____ Telecopy (FAX)

J. BART GREEN III
929 E. 1ST ST., #2
MERIDIAN, ID 83642

_____ Hand Delivery
 X U.S. Mail
_____ Certified Mail
_____ Telecopy (FAX)

Nancy Jackell



ADA COUNTY TREASURERS OFFICE
650 MAIN STREET
BOISE ID 83702
(208) 364-2233

07/25/2001

ROARK ASA W
ROARK DORI ROSE
2010 N LINDER RD
MERIDIAN ID 83642-1316

Parcel# S0513417682

Property Address
7242 N GARY LN
BOISE ID 83703-0000

Interest as of 07/25/2001

Year	Roll	Half	Base Tax	Late Charge	Interest	Received	Taxes Due
2000	Primary	1	461.82	9.19	31.73	0.00	502.74
	Primary	2	461.82	9.19	31.73	0.00	502.74
1999	Primary	1	456.04	9.12	87.00	0.00	552.16
	Primary	2	456.04	9.12	87.00	0.00	552.16
1998	Primary	1	319.53	0.00	0.00	-319.53	0.00
	Primary	2	319.53	0.00	0.00	-319.53	0.00
1997	Primary	1	316.88	0.00	0.00	-316.88	0.00
	Primary	2	316.88	6.34	21.19	-344.41	0.00
1996	Primary	1	384.85	0.00	0.00	-384.85	0.00
	Primary	2	384.85	0.00	0.00	-384.85	0.00
1995	Primary	1	347.18	0.00	0.00	-347.18	0.00
	Primary	2	347.18	0.00	0.00	-347.18	0.00
1994	Primary	1	374.71	0.00	0.00	-374.71	0.00
	Primary	2	374.71	0.00	0.00	-374.71	0.00
1993	Primary	1	378.15	0.00	0.00	-378.15	0.00
	Primary	2	378.15	7.56	33.72	-419.43	0.00
Total Amount Due							2,109.80