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FORM B10 (Official Form 10)(4/98)

UNITED STATES BANKRUPTCY COURT DISTRICT OF IDAHO (BOISE)		PROOF OF CLAIM
Name of Debtor Tonya Yvette Horvath	Case Number 01-00448	  <p>THIS SPACE IS FOR COURT USE ONLY</p>
<p><b>NOTE:</b> 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.</p>		
Name of Creditor (The person or other entity to whom the debtor owes money or property): Canyon County Treasurer Name and Address where notices should be sent:  Canyon County Treasurer Post Office Box 1010 Caldwell ID 83606	<input type="checkbox"/> 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. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Telephone Number: 1-208-454-7354	Account or other number by which creditor identifies debtor: R10770-000-0	<input type="checkbox"/> Check here if this claim <input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim, dated _____
<b>1. Basis for Claim</b> <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input checked="" type="checkbox"/> Taxes <input type="checkbox"/> Other _____	<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. §1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your SS #: _____ Unpaid compensation for services performed from _____ to _____ (date) (date)	
<b>2. Date debt was incurred:</b> January 1, 2000 est 2001	<b>3. If court judgment, date obtained:</b>	
<b>4. Total Amount of Claim at Time Case Filed:</b> \$ 2,847.29 If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.	<input checked="" type="checkbox"/> 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.	
<b>5. Secured Claim.</b> <input checked="" type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input checked="" type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral: \$ 62,900.00 Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ 2,847.29	<b>6. Unsecured Priority Claim.</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,300)* 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). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507(a)(4). <input type="checkbox"/> Up to \$ 1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 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)(____). *Amounts are subject to adjustment on 4/1/01 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.	
<b>7. Credits:</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. <b>8. Supporting Documents:</b> 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. <b>9. Date-Stamped Copy:</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.	THIS SPACE IS FOR COURT USE ONLY FILED MERRYL S. BURKE, CLERK, IDAHO MAR -1 PM 12:18 U.S. COURTS	
Date 02-27-01	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): Tracie Lloyd Canyon County Treasurer, Tracie Lloyd	

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.

#1

MODE:F ACTION: 2000 TAX INQUIRY as of 02/27/2001 8:51 TRQK701  
 OR10770000 0 N5075028005B 0000

002-00 \* \* CHECK FOR DELINQUENCIES \* \*

HORVATH, TONYA Y  
 & HORVATH, JAMES S-W/H

Original Tax 862.06

1412 E LINCOLN AVE  
 NAMPA ID 83686

Tax Adjustment 519.44

Total Due 1,381.50

27-3N-2W SE KURTZ ADD  
 S1/2 OF LT 5 LESS W 50',  
 LT 6 LESS W 50' BLK 28

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 690.75 | 690.75  
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1412 E LINCOLN AVE, NA

Outstanding Tax 1,381.50  
 Outstanding Late Chg 13.82

FCV 62,900  
 Homeowners 23,650

Information on this screen is subject to change without notice

MODE:F ACTION: TRQK940

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 System User- QUINTANA Date 02/27/2001 Time 8:51

TAX PAYMENT ESTIMATE

This is only an estimate and is subject to change without notice

		Date to be Paid	
Account Number	OR10770-000- -0	1st INST	2nd INST
HORVATH, TONYA Y		=====	=====
& HORVATH, JAMES S-W/H		Tax 690.75	690.75
		Late Chg 13.82	
		Interest 13.39	
		=====	=====

1412 E LINCOLN AVE  
 NAMPA ID 83686  
 Site Address: 1412 E LINCOLN AVE, NA

717.96 690.75

TOTAL AMOUNT DUE AS OF 02/27/2001 \$1,408.71

After 02/27/2001 additional interest per day is .23 until 06/20/2001.

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MODE:F ACTION: 2001 TAX INQUIRY as of 02/27/2001 8:57 TRQK701  
 1R10770000 0 N5075028005B 0000  
 002-00 \* \* CHECK FOR DELINQUENCIES \* \*  
 HORVATH, TONYA Y Original Tax .00  
 & HORVATH, JAMES S-W/H

1412 E LINCOLN AVE  
 NAMPA ID 83686 Total Due

27-3N-2W SE KURTZ ADD  
 S1/2 OF LT 5 LESS W 50',  
 LT 6 LESS W 50' BLK 28  
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 .00 | .00  
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1412 E LINCOLN AVE, NA Outstanding Tax .00

FCV 62,900 COM BKR

Information on this screen is subject to change without notice

MODE:F ACTION: PRE - PAID ESTIMATED TAXES TRQK730

01 ACCOUNT NUMBER 1R10700000 0 HOMEOWNERS? NO TOTAL DUE 1,438.58  
 ORIG FCV 65,500 HOMEOWNERS 0 ADJUSTED 65,500 AREA 002-00

0998	COUNTY	.004705162	308.18
0676	CITY NA	.008639865	565.92
0691	NA HWY 1	.001107140	72.52
0653	AMBULANCE	.000202800	13.28
0762	SCH 131 NA	.007308067	478.68

THIS IS AN ESTIMATE BASED ON THE 2000 LEVIES