

**UNITED STATES BANKRUPTCY COURT**  
District of District of Idaho (Boise)

**PROOF OF CLAIM**  
Chapter  
(please check the appropriate box)

THIS SPACE IS FOR  
COURT USE ONLY

Instructions: Complete this form and mail to:  
US Bankruptcy Court  
550 West Fort MSC 042  
Computerized Case Info (208) 334-9386  
Boise, ID 83724

U.S. COURTS  
7 [X] 11 [ ] 12 [ ] 13 [ ]  
97 APR - 1 PM 2:46  
Proof of Claim Form and  
Supporting Documents are to be  
filed in DUPLICATE on chapter 12  
and 13 cases  
CLERK THOMAS S. BURKE  
IDAHO

In re (Name of Debtor)  
**Sawtooth Enterprises Inc**

Case Number: **96-03050 - ach**

NAME AND MAILING ADDRESS OF CREDITOR (the person or other entity to whom the debtor owes money or property)  
**Margaret Mead Trust**  
~~7500 W. Edgemoor~~ c/o Nahas Benoit Companies  
~~Boise ID 83702~~ 102 South 17th  
Boise, Idaho 83702

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.

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:

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  Assignment  
 Retiree Benefits as defined in 11 USC Sec 1114(a)  
 Wages, salaries, and compensation: Social Security #: \_\_\_\_\_  
 Real property lease  
Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_  
(date) (date)

2. DATE DEBT WAS INCURRED  
2/1/96 - 1/17/97

3. IF COURT JUDGMENT, DATE OBTAINED:

4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following:  
a. Secured. b. Unsecured nonpriority. c. Unsecured Priority  
It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES below that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.

SECURED CLAIM \$ \_\_\_\_\_  
Attach evidence of perfection of security interest.  
Brief Description of Collateral:  Real Estate  Motor Vehicle  
 Other (Describe briefly):  
Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ \_\_\_\_\_

UNSECURED PRIORITY CLAIM \$ 5,398.75  
Specify the priority of the claim.  
 Wages, salaries, or commissions up to \$4000\* earned not more than 90 days before filing of the bankruptcy petition or cassation 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 of governmental units—11 U.S.C. § 507(a)(8)  
 Other—Specify applicable paragraph of 11 U.S.C. § 507(a) 11 U.S.C. § 507(a) (1)

UNSECURED CLAIM \$ 6,440.25  
A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.

5. TOTAL AMOUNT OF CLAIM AT THE TIME THE CASE WAS FILED:  
\$6,440.25 (Unsecured) \$ \_\_\_\_\_ (Secured) \$ 5,398.75 (Priority) \$ 11,839.00 (Total)  
 Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6. CREDITS AND SETOFFS. The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor. N/A

7. SUPPORTING DOCUMENTS. Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests to original and each copy. If the documents are not available, explain. If the documents are voluminous, attach a summary.  
DATE: 3/31/97

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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):  
Derrick J. O'Neill  
Telephone No: (208) 344-8535

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.