

United States Bankruptcy Court  
District of Idaho

PROOF OF CLAIM  
Chapter  
7[✓] 11[] 12[] 13[]

This Space For  
Court Use Only.  
U.S. COURTS

Instructions: Complete this form and mail to:

US Bankruptcy Court, 250 S. 4th Ave, Pocatello, ID 83202  
US Bankruptcy Court, 550 W Fort St., MSC 042, Boise, ID 83724-0042

Proof of Claim and Supporting Documents are to be filed in DUPLICATE on Ch 12 & 13. 98 OCT 27 PM 3: 22

In Re: Community Home Health, Inc.

Case No. 9802141 RECD FILED CAMERON S. BURKE, CLERK. IDAHO

Name and Mailing Address of Creditor:

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of this case.

Citicorp Leasing, Inc.  
c/o Jim Spinner, Esq.  
P.O. Box 6009  
Pocatello, ID 83205-6009

Account Number (or Other Number) by Which Creditor Identifies Debtor: 010-0613626-002 and 004

Check 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 U.S.C. § 1114(a) [ ] Wages, salaries and compensation: Social Security #: [✓] Unpaid balance on lease [ ] Unpaid Compensation for services performed from to .

2. Date Debt Occurred: November 1994

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 \$

Unsecured Priority Claim \$  
Specify the priority of the 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 \$ .

- [ ] Wages, salaries or commissions up to \$4,000, earned not more than 90 days before the 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 \$1800 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 USC § 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).

Unsecured Claim: \$163,474.71

Any 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:

\$163,474.71 (Unsecured) \$ (Secured) \$ (Priority) \$ (Total)

[ ] Check this box if claim includes charges in addition to the principal amount of the claim. Attach Itemized statement of all additional charges.

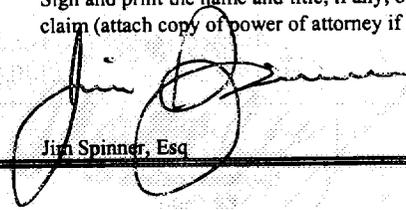
6. Credit and Setoffs. The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.

7. Supporting Documents. Attach copies of support 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.

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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):

10/27/98

  
Jim Spinner, Esq.

Telephone No.: (208)232-4471

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K