B10 (6/95)

UNITED STATES BANKRUPTCY COURT

District of District of Idaho (Boise)

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

PROOF OF CLAIM

Chapter
(please check the approiate box)

7[ ] 11[X] 12[ ] 13[ ]

Proof of Claim Form and Supporting Documents are to be filed in DUPLICATE on chapter 12 and 13 cases

THIS SPACE IS FOR COURT USE ONLY

U.S. COURTS

MAR - 3 1998

REC'D_____ FILED_____
CAMERON S. BURKE
CLERK IDAHO

In re (Name of Debtor)
Cascade Builders-Developers Inc

Case Number: **98-00476 - ach**

NAME AND MAILING ADDRESS OF CREDITOR (The person or other entity to whom the debtor owes money or property)

Advanced Heating & Cooling, Inc.
113 South 24th
Boise, ID 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: 03200

Check here if this claim ☐ replaces ☐ amends a previously filed claim, dated :_____

1. BASIS FOR CLAIM: [ ] Goods Sold [X] 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 #:_____
Unpaid compensation for services performed from 5/28/97 (date) to 8/28/97 (date)

2. DATE DEBT WAS INCURRED 05/28/97

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 CLAIM $ 289.25
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.

UNSECURED PRIORITY CLAIM $ _____
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 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 of governmental units—11 U.S.C. § 507(a)(8)
[ ] Other-Specify applicable paragraph of 11 U.S.C. § 507(a)

5. TOTAL AMOUNT OF CLAIM AT THE TIME THE CASE WAS FILED:
$ 289.25 (Unsecured) $ _____(Secured) $ _____ (Priority) $ _____(Total)
[X] 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.

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.

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DATE: 3/2/98

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): Andi Johnson - Office Manager

Andi Johnson

Telephone No: (208) 336-2465

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.

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