

CERTIFICATE OF SERVICE

District/off: 0976-1
Case: 02-03779

User: sueb
Form ID: #03

Page 1 of 1
Total Served: 48

Date Rcvd: Jun 04, 2003

The following entities were served by first class mail on Jun 06, 2003.

db Timothy James Old, 1587 N Ellington Wy, Eagle, ID 83616
jdb Frances Justine Old, 1587 N Ellington Wy, Eagle, ID 83616
aty Lawrence G Sirhall, Jr, POB 1112, Boise, ID 83701
aty Susan J Robinson, 720 7th Ave #300, Seattle, WA 98104
tr Lois K Murphy, POB 609, Kuna, ID 83634
ust United States Trustee, 304 N 8th St Rm 347, Boise, ID 83702
cr +Long Beach Mortgage, c/o Susan J Robinson, 720 7th Ave #300, Seattle, WA 98104-1960
1994458 Action Collection, 1325 Vista Avenue, Boise Id 83705
1994433 Ada County Treasurer, PO Box 2868, Boise Id 83701
1994457 Anesthesia Associates, 111 West State Street, Boise Id 83702
1994447 Boise Pathology/Action Collection, 1325 Vista Avenue, Boise Id 83705
1994454 Bonneville Collections, PO Box 15986, Boise Id 83715
1994468 +Cash Express, 6886 West State Street, Boise Id 83714-7415
1994452 Check Rite, PO Box 5067, Boise Id 83705
1994469 Check n Go of Idaho Inc, 5865 Glenwood Street, Boise Id 83714
1994455 Country Book Club, Camp Hill PA 17011-9559, 17011-9559
1994436 DST Collection, PO Box 43050, Phoenix AZ 85080
1994435 Discover, PO Box 30395, Salt Lake City, UT 84130
1994442 Dr. Stillings, 10552 Garverdale Court, Boise Id 83704
1994438 Dr. Tony Salkas, 331 North Allumbaugh, Boise Id 83704
1994451 Earthlink, PO Box 221406, Cleveland OH 44122
1994456 First Consumers National Bank, PO Box 18008, Hauppauge NY 11788-8808
1994431 Frances Ledbetter, 802 Shoreline Drive, Lakeside City, TX 76308
1994434 +Idaho State Tax Commission, PO Box 36, Boise Id 83722-0036
1994439 +Intermountain Hospital, Receivable Mngmt, PO Box 166, Ogden UT 84402-0166
1994471 Internal Revenue Service, Chief, Special Procedures, 550 W Fort MSC 041, Boise ID 83724
1994464 Jeffrey M. Wilson, 420 West Washington, Boise Id 83702
1994461 Kevin L. String, Atty., PO Box 221406, Cleveland OH 44122
1994446 Key Bank, PO Box 94892, Cleveland OH 44101 4892
1994453 Kroger Check Recovery, PO Box 30650, Salt Lake City UT 84130-0650
1994448 +Lexington Hills HOA, 9601 West State Street, Ste. 203, Boise Id 83714-4021
1994459 Michael Doolittle, Atty, PO Box 2773, Boise Id 83701 2773
1994466 Money Tree Inc., 3159 West State Street, Boise Id 83703
1994462 +OutSource receivables, PO Box 166, Ogden UT 84402 0166
1994470 Payday Loans, 4116 Chinden Blvd, Boise Id 83714
1994445 Pediatric Dentistry, 3270 North Maple Grove, Boise Id 83704-4214
1994463 Racine, Olson, Nye, Budge & Bailey Chtd, PO Box 1391, Pocatello ID 83204-1391
1994465 Singers Insta Cash, PO Box 190445, Boise Id 83719
1994467 +Singers Instacash, 6942 West State Street, Boise Id 83714-7417
1994460 St. Alphonsus Pathology, 1755 Westgate Drive, Ste. 200, Boise Id 83704
1994410 St. Alphonsus RMC, PO Box 190930, Boise Id 83719
1994450 St. Lukes Family Medical, 3212 Maple Grove, Boise Id 83704
1994441 +St. Lukes RMC, 190 East Hannock, Boise Id 83712-6298
1994437 Target, Retailers National Bank, PO Box 59287, Minneapolis Mn 55459 0287
1994443 US Bank, PO Box 790428, St. Louis MO 63179-0428
1994449 US Bank, PO Box 2846, Osh Kosh WI 54903-2846
1994430 Washington Mutual, PO Box 23990, Oakland CA 94623-0990
1994444 Wells Fargo Bank, PO Box 98798, Las Vegas, NV 89193-8798

U. S. COURTS
JUN 9 - 2003
REC'D FILED
CAMERON S. BURKE
CLERK IDAHO

The following entities were served by electronic transmission.
NONE.

TOTAL: 0

***** BYPASSED RECIPIENTS *****

NONE.

TOTAL: 0

Addresses marked '+' were corrected by inserting the ZIP or replacing an incorrect ZIP.
USPS regulations require that automation-compatible mail display the correct ZIP.

I, Joseph Speetjens, declare under the penalty of perjury that I have served the attached document on the above listed entities in the manner shown, and prepared the Certificate of Service and that it is true and correct to the best of my information and belief.

Date: Jun 06, 2003

Signature:

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INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In particular types of cases or circumstances, such as bankruptcy cases that are not filed voluntarily by a debtor, there may be exceptions to these general rules.

DEFINITIONS

Debtor

The person, corporation, or other entity that has filed a bankruptcy case is called the debtor.

Creditor

A creditor is any person, corporation or other entity to whom the debtor owed a debt on the date the bankruptcy case was filed

Proof of Claim

A form telling the bankruptcy court how much the debtor owed a creditor at the time the bankruptcy case was filed (the amount of the creditors claim). This form must be filed with the clerk of the bankruptcy court where the bankruptcy case was filed.

Secured Claim

A claim is a secured claim to the extent that the creditor has a lien on property of the debtor (collateral) that gives the creditor the right to be paid from that property before creditors who do not have liens on the property

Examples of liens are a mortgage on real estate and a security interest in a car, truck, boat, television set or other item of property. A lien may have been obtained through a court proceeding before the bankruptcy case began; in some states a court judgment is a lien. In addition, to the extent a creditor also owes money to the debtor (has a right of setoff), the creditor's claim may be a secured claim.

(See also Unsecured Claim)

Unsecured Claim

If a claim is not secured it is an unsecured claim. A claim may be partly secured and partly unsecured if the property on which a creditor has a lien is not worth enough to pay the creditor in full.

Unsecured Priority Claim

Certain types of unsecured claims are given priority, so they are to be paid in bankruptcy cases before most other unsecured claims (if there is sufficient money or property available to pay these claims). The most common types of priority claims are listed on the proof of claim form. Unsecured claims are not specifically given priority status by the bankruptcy laws are classified as *Unsecured Nonpriority Claims*.

ITEMS TO BE COMPLETED IN PROOF OF CLAIM FORM (IF NOT ALREADY FILLED IN)

Court, Name of Debtor and Case Number:

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example, District of Idaho), the name of the debtor in the bankruptcy case and the case number. If you receive a notice of the case from the court, all of this information is near the top of the notice.

Information about Creditor:

Complete the section giving the name, address and telephone number of the creditor to whom the debtor owes money or property, and the debtor's account number, if any. If anyone else has previously filed a proof of claim relating to this debt, if you have never received notices from the bankruptcy case about this case, if your address differs from that to which the court sent notice or if this proof of claim replaces or changes a proof of claim previously filed, check the appropriate box on the form.

1. Basis for Claim:

Check the type of debt for which the proof of claim is being filed. If the type of debt is not listed, check "Other" and briefly describe the type of debt. If you were an employee of the debtor, fill in your social security number and the dates of work for which you were not paid.

2. Date Debt Incurred:

Fill in the date when the debt first was owed by the debtor

3. Court Judgments:

If you have a court judgment for this debt, state the date the court entered the judgment.

4. Secured Claim:

Check the appropriate place if the claim is a secured claim. You must state the type and value of property that is collateral for the claim, attach copies of documentation of your lien, and state the amount past due on the claim as of the date the bankruptcy case was filed. A claim may be partly secured and partly unsecured. (See DEFINITIONS, above)

5. Unsecured Priority Claim:

Check the appropriate place if you have an unsecured priority claim, and state the amount entitled to priority. (See DEFINITIONS, above). A claim may be partly priority and partly nonpriority if, for example, the claim is for more than the amount given priority by the law. Check the appropriate place to specify the type of priority claim.

6. Total Amount of Claim at Time Case Filed:

Fill in the total amount of the entire claim. If interest or other charges in addition to the principal amount of the claim are included, check the appropriate place on the form and attach an itemization of the interest and charges

7. Credits:

By signing this proof of claim, you are stating under oath that in calculating the amount of your claim, you have given the debtor credit for all payments received from the debtor.

8. Supporting Documents:

You must attach to this proof of claim form copies of documents that show the debtor owes the debt claimed or if the documents are too lengthy, a summary of those documents. If the documents are not available, you must attach an explanation of why they are not available.