

X

Fill in this information to identify the case:

Debtor 1 A. Dean Jenkins adj

Debtor 2 (Spouse, if filing) None

United States Bankruptcy Court for the: Northern District of Texas

Case number 19-34054-sgj11

FILED
 NOV 19 2020
 CLERK, U.S. BANKRUPTCY COURT
 NORTHERN DISTRICT OF TEXAS

Official Form 410

Proof of Claim

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

FILED

DEC 08 2020

CLERK, U.S. BANKRUPTCY COURT
 NORTHERN DISTRICT OF TEXAS

1. Who is the current creditor?
 Name of the current creditor (the person or entity to be paid for this claim) A. Dean Jenkins
 Other names the creditor used with the debtor None

2. Has this claim been acquired from someone else?
 No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p>Name <u>A. Dean Jenkins</u></p> <p>Number <u>3006</u> Street <u>N. Versailles Ave</u></p> <p>City <u>Dallas</u> State <u>Texas</u> ZIP Code <u>75209</u></p> <p>Contact phone <u>760-333-3755</u></p> <p>Contact email <u>adecandean@aol.com</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Contact phone _____</p> <p>Contact email _____</p>
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Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
 No
 Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?
 No
 Yes. Who made the earlier filing? _____



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor? No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. How much is the claim? \$ 18,000.00 Does this amount include interest or other charges? No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.
1/2 Dependent on total Contract for window done and Labor

9. Is all or part of the claim secured? No Yes. The claim is secured by a lien on property.
Nature of property:
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
 Motor vehicle
 Other. Describe: _____
Basis for perfection: _____
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
Value of property: \$ _____
Amount of the claim that is secured: \$ _____
Amount of the claim that is unsecured: \$ 18,000.00 (The sum of the secured and unsecured amounts should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ 18,000.00
Annual Interest Rate (when case was filed) 0 %
 Fixed
 Variable

10. Is this claim based on a lease? No Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No ?

Yes. Check one:

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

- | | Amount entitled to priority |
|--|-----------------------------|
| <input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). | \$ _____ |
| <input type="checkbox"/> Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). | \$ _____ |
| <input type="checkbox"/> Wages, salaries, or commissions (up to \$13,650* earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). | \$ _____ |
| <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). | \$ _____ |
| <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). | \$ _____ |
| <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)() that applies. | \$ _____ |

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 10 14 2020
MM / DD / YYYY


Signature

Print the name of the person who is completing and signing this claim:

Name AUBREY DEAN JENKINS
First name Middle name Last name

Title owner

Company _____
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 3606 N. VERBILLO AVE
Number Street

Dallas, Tex Texas 75209
City State ZIP Code

Contact phone Texas Email adeandean@aol.com

November 2, 2020

The Honorable Stacey G. C.Jernigan
United States Bankruptcy Judge
United Bankruptcy Court
Dallas Division
Earle Cabell Federal Building
1100 Commerce St.
14th Floor, Courtroom No. 1
Dallas, Texas 75242-1496



You are hereby notified that I am owed \$18,000. By HIGHLAND CAPITAL MANAGEMENT, I.P.
Debtor in No. 19-34054-sgj1 1

as proof of this debt, I am inclosing A COPY of my check, both sides, #1189, dated 1-23-20
in the amount of \$18,000.00.

Respectfully submitted,

Aubrey Dean Jenkins
AUBREY DEAN JENKINS
3606 N. Versailles Ave.
Dallas, Texas 75209

Amount: \$18,000.00
 Account: 1128704924
 Bank Number: 12100035

Sequence Number: 4392732954
 Capture Date: 01/23/2020
 Check Number: 1189

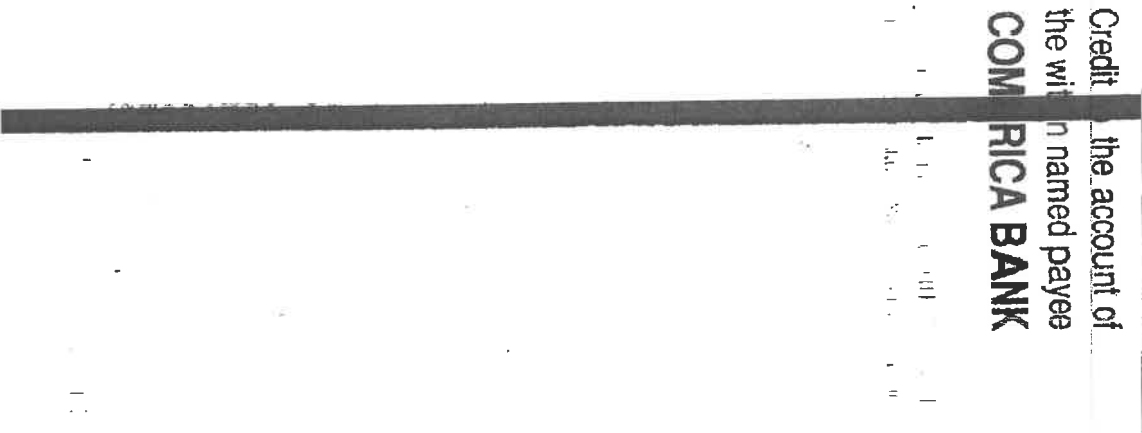
AUBREY DEAN JENKINS TRUST AUBREY DEAN JENKINS, TRUSTEE 3606 N VERSAILLES AVE DALLAS, TX 75209-6230		1189 11-25/1216 CA 3610
		1-23-20 Date
Pay to the Order of	Rhina Windsor	\$18,000.00
Eighteen Thousand & no/100		Dollars
Bank of America		
ACH R/T 121000350 18,000.00 dep. Balance 11,571.00		
FOR	Rhina Anderson Windsor	A. Dean Jenkins
⑆ 121000358⑆ 001128704924⑆ 1189		

Electronic Endorsements

Date	Sequence	Bank #	Endrs Type	TRN	RRC	Bank Name
01/23/2020	941400100010347	111000753	Rtn Loc/BOFD	Y		COMERICA BANK
01/23/2020	004392732954	121103886	Pay Bank	N		BANK OF AMERICA, NA
01/23/2020	430314791	72000096	Undetermined	N		COMERICA BANK

Amount: \$18,000.00
 Account: 1128704924
 Bank Number: 12100035

Sequence Number: 4392732954
 Capture Date: 01/23/2020
 Check Number: 1189



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01/23/2020	941400100010347	111000753	Rtn Loc/BOFD	Y		COMERICA BANK
01/23/2020	004392732954	121103886	Pay Bank	N		BANK OF AMERICA, NA
01/23/2020	430314791	72000096	Undetermined	N		COMERICA BANK

Aubrey Dean Jenkins
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Dallas, TX 75209