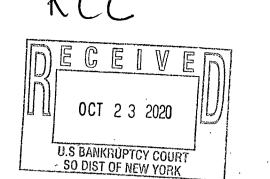
	Fill in this information to identify the case:
1	Debtor 1
	Debtor 2 (Spouse, if filing)
	United States Bankruptcy Court for the: District of
	Case number



Claim #15 Date Filed: 10/23/2020

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 Cl	aim	
Who is the current creditor?	CHARIENE T. MILLER Name of the current creditor (the person or entity to be paid for this cla Other names the creditor used with the debtor	nim)
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) RECEIVED OCT 2 6 2020 REZMAN CARSON CONSULTANTS	Where should notices to the creditor be sent? CHARLENE J MILLER Name 430 IRON WOOD Number Street CREEN RIVER WY 82935 City State ZIP Code Contact phone 307-875-4719 Contact email 57eve_Cleof262 @ ovTlock. Code Uniform claim identifier for electronic payments in chapter 13 (if you use	Where should payments to the creditor be sent? (if different) CHARLENC J. MILLER Name 430 TRONWOOD Number Street CREEN RIVER WY. 82935 City State ZIP Code Contact phone 307-815-4719 O'Contact email Steve_Cleo & art look.com
Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known)	Filed on
5. Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?	

Do you have any number you use to identify the debtor?				
. How much is the claim?	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).			
. What is the basis of the claim?	camples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. tach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). mit disclosing information that is entitled to privacy, such as health care information. 5TOCKS IN BANKRUPTCY			
. Is all or part of the claim secured?	Ses. 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: \$ (The sum of the secured and unsecured amounts should match the amount in line 7			
RECEIVED OCT 2 6 2020	Amount necessary to cure any default as of the date of the petition: \$			
KURTZMAN CARSON CONSUL	Annual Interest Rate (when case was filed)% 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.			
1. Is this claim subject to a right of setoff?	No Yes. Identify the property:			

12. Is all or part of the claim	☑ No			
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority		
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$		
	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).	\$		
	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).	\$		
	☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$		
	☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$		
	☐ 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	Check the appropriate box:			
this proof of claim must	I am the creditor.			
sign and date it. FRBP 9011(b).	I am the creditor's attorney or authorized agent.			
If you file this claim	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.			
electronically, FRBP	In Lam a guarentor, surety, endorser, or other codebtor, Bankruptcy Rule 3005.			
5005(a)(2) authorizes courts to establish local rules				
specifying what a signature	I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the			
is.	amount of the claim, the creditor gave the debtor credit for any payments received toward the d	edt.		
A person who files a fraudulent claim could be fined up to \$500,000,	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.			
imprisoned for up to 5 years, or both.	I declare under penalty of perjury that the foregoing is true and correct.			
18 U.S.C. §§ 152, 157, and 3571.	· · · · · · · · · · · · · · · · · · ·			
3371.	Executed on date 10/19/2020			
	Charlene Je miler			
	Signature			
	Print the name of the person who is completing and signing this claim:			
	Name CHARIENE O Mille To First name Last name	2		
RECEIVED	Title None			
OCT 2 6 2020	Company NONE			
001 2 0 2020	Identify the corporate servicer as the company if the authorized agent is a servicer.			
JRTZMAN CARSON CONSULTANTS	ITS			
S Son Sonocinals	Address 430 TROWWOOD Number Street			
	Number Street	35		
,	Contact phone Steel Steel Wy 829 City State ZIP Code $307-875-4719$ Email STeve	with		
	City State 21 6000	_Cleo 5262 A, Com		
	Contact phone 30/-8/3 /// Email 5/8/02			

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