


**Fill in this information to identify the case:**

Debtor 1 Henry Ford Village

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: Eastern District of Michigan 

Case number 20-51066-mar

**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**

1. Who is the current creditor? Anita Imbrescia  
Name of the current creditor (the person or entity to be paid for this claim)  
Other names the creditor used with the debtor \_\_\_\_\_

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><b>Where should notices to the creditor be sent?</b></p> <p><u>Anita Imbrescia</u> Name <u>234 Hutchinson Road</u> Number Street <u>West Newton PA 15089</u> City State ZIP Code Contact phone <u>724-872-5047</u> Contact email <u>imbrescia@hotmail.com</u></p>	<p><b>Where should payments to the creditor be sent? (if different)</b></p> <p>_____ Name _____ Number Street _____ City State ZIP Code Contact phone _____ Contact email _____</p>
--	---

**RECEIVED**  
**DEC 01 2020**

**KURTZMAN CARSON CONSULTANTS** 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? \$ 84,802.96 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.  
entrance deposit

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: money

**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.)

**Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_

**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. \$ 84,802.96

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

**RECEIVED**  
**DEC 01 2020**  
**KURTZMAN CARSON CONSULTANTS**

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

No

Yes. Check one:

- 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.

Amount entitled to priority

\$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_  
 \$ \_\_\_\_\_

\* 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 11 25 / 2020  
 MM / DD / YYYY

Anita Imbrescia  
 Signature

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

Name Ms. Anita Imbrescia  
 First name Anita Last name Imbrescia  
 234 Hutchinson Rd.  
 West Newton, PA 15089

Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_  
 Number \_\_\_\_\_ Street \_\_\_\_\_

City 724 872 5047 State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
 Contact phone \_\_\_\_\_ Email Imbrescia@hotmail.com

RECEIVED  
 DEC 01 2020

KURTZMAN CARSON CONSULTANTS

HENRY FORD VILLAGE  
REFUND OF ENTRANCE DEPOSIT FORM

Name of Resident(s): Artemio & fernanda DiMarco  
Living Unit: BE506  
Date of Receipt by  
HENRY FORD VILLAGE: 8/16/11

**Preliminary Statements and Directions**

1. Pursuant to the Residence and Care Agreement (the "Care Agreement") with HENRY FORD VILLAGE, Resident is entitled to a refund of the Entrance Deposit paid to HENRY FORD VILLAGE under certain specified conditions during Resident's lifetime or upon Resident's death based upon termination of the applicable Care Agreement. The conditions for the refund of the Entrance Deposit are set forth in the Care Agreement. Resident and Resident's beneficiaries are subject to all terms and conditions for the refund of the Entrance Deposit and should review the same carefully. For the purpose of these Refund Forms, the term "Resident" includes the plural.

2. Resident understands that the purpose and effect of this Refund Form is to designate the beneficiary(ies) of the right to a refund of the Entrance Deposit. By signing this Refund Form, Resident is hereby revoking any previously executed Refund Forms.

3. If the Entrance Deposit is being / has been paid on behalf of two (or more) Joint Residents, both Joint Residents must sign one Refund of Deposit form together. Both Joint Residents understand that the Entrance Deposit will be /is treated as though it has been paid by the survivor, to be used for the survivor's care if necessary, and that the refund will eventually be paid to the survivor or the survivor's beneficiary(ies).

4. **Resident understands that it is Resident's responsibility to review the terms of this Refund Form to make sure that its terms are coordinated with Resident's current will or other trusts and estate plan. HENRY FORD VILLAGE strongly recommends that Resident review this Refund Form with an attorney or other estate planning professional prior to execution to ensure such coordination and to review potential tax liability in making these designations or in the eventual payment of the refund.** Resident may submit his/her own beneficiary designation form but HENRY FORD VILLAGE reserves the right to review and approve the forms so that the right to the refund is clearly delineated for HENRY FORD VILLAGE's staff.

5. HENRY FORD VILLAGE will make a refund of the Entrance Deposit only as specified in the most recent duly executed and approved Refund Form. Resident may revise the right to the refund by duly executing a new Refund of Deposit form.

6. Please sign one of the following forms designating the right to refund of the Entrance Deposit. Be sure to read all of the forms before making a selection. If you do not understand the forms, please consult with your estate planning professional. If you do not understand the directions, please consult with the Sales and Admissions Staff. **You may select and sign only one form.**

7. If Resident is designating the refund to more than 1 beneficiary, percentages must add up to 100%. Please do not fill in cash amounts. HENRY FORD VILLAGE can only refund based upon percentages of the Entrance Deposit, due to the possibility of spend-down of the Entrance Deposit.

8. It is the responsibility of Resident or Resident's representative, if applicable, to give HENRY FORD VILLAGE the most recent addresses for all listed beneficiaries.

9. If Resident desires to assist HENRY FORD VILLAGE to support other residents who have exhausted their financial resources, Resident may choose to designate the HENRY FORD VILLAGE Benevolent Care Fund as a beneficiary by using Refund Form # 3. Such a designation is **completely optional** on Resident's part. HENRY FORD VILLAGE is a 501(c)(3) not-for-profit corporation.

10. Resident hereby acknowledges that he or she has read the following preliminary statements and instructions, reviewed the attached options for a refund of the Entrance Deposit, and understands the purpose and consequences of this Refund Form.

8-16-2011  
Date

Artemio Di Marco  
Resident

8/16/11  
Date

Fernando Di Marco  
Resident

If signed by a representative, indicate name of representative and nature of authority (i.e. power of attorney, guardian, etc.):

\_\_\_\_\_

Received by HENRY FORD VILLAGE:  
By: [Signature]  
HENRY FORD VILLAGE Representative

8/16/11  
Date

**REFUND FORM 3**

1. Refund during Lifetime - In the event that a Refund becomes payable during Resident's lifetime under the terms of the Care Agreement, Resident hereby designates that the Entrance Deposit be refunded to: **(please check one option)**

Resident  \_\_\_\_\_ Beneficiaries as designated below \_\_\_\_\_

2. Refund Upon Death - In the event that a refund becomes payable upon Resident's death under the terms of the Care Agreement, Resident hereby designates that the Entrance Deposit be refunded directly for convenience to the beneficiaries listed below, *per stirpes*, in the percentages indicated.

Percentage Interest, Name & Address of Beneficiary

- |  |                                    |
|--|------------------------------------|
| 1. <u>100%</u> <u>Anita Imbrescia</u><br><u>234 Hutchinson Rd</u><br><u>West Newton Pa</u> | 2. _____ % _____<br>_____<br>_____ |
| 3. _____ % _____<br>_____<br>_____   | 4. _____ % _____<br>_____<br>_____ |
| 5. _____ % _____<br>_____<br>_____   | 6. _____ % _____<br>_____<br>_____ |

Artemio dei Marco  
Resident  
Fermeide dei Marco  
Resident

8-16-2011  
Date  
8/16/11  
Date

If signed by a representative, indicate name of representative and nature of authority (i.e. power of attorney, guardian, etc.): \_\_\_\_\_

This Refund of Entrance Deposit Form was signed by the above-named Resident(s) in our presence and in the presence of each other and the above-named Resident(s) has acknowledged this Refund of Entrance Deposit Form as Resident's own act.

Shannon Michich-Parnelle

Witness

15101 Ford Rd  
Dearborn, MI 48126

Address

Phillip Allen

Witness

15101 Ford Rd  
Dearborn MI 48126

Address

Received by HENRY FORD VILLAGE:

By: Janice McClellan  
HENRY FORD VILLAGE Representative

8/16/11

Date

Note 1 - Per stirpes generally means that if a named person is not living at the time the Refund is to be distributed, his or her children will share that person's share of the Refund equally. A pattern of children substituting for and sharing equally in their deceased parent's share continues through succeeding generations existing as of the date of the Resident's passing or, in the case of Joint Residents, the last Resident's passing.



## Henry Ford Village

phone: 313 846-7272

email: [Karen E. Cipolla](mailto:Karen.E.Cipolla@hfvillage.com)

web: [henryfordvillage.com](http://henryfordvillage.com)

15101 Ford Road, Dearborn, MI 48126 | 888.257.6458 |



Managed by  
Lido Care Services®

Like Henry Ford Village? [Find us on Facebook.](#)

CONFIDENTIALITY NOTICE: This electronic mail transmission and any documents accompanying this electronic mail transmission are intended by Henry Ford Village for the use of the named addressee(s) to which it is directed and may contain information that is privileged, or otherwise confidential. It is not intended for transmission to, or receipt by, anyone other than the named addressee(s) (or a person authorized to deliver it to the named addressee(s)). It should not be copied or forwarded to any unauthorized persons. If you have received this electronic mail transmission in error, please delete it from your system without copying or forwarding it, and notify the sender of the error by reply e-mail or by calling Henry Ford Village at 313-584-1000, so our address record can be corrected.

**From:** Anita Imbrescia [mailto:imbrescia@hotmail.com]

**Sent:** Wednesday, July 01, 2020 10:34 AM

**To:** Karen Cipolla

**Subject:** Re: Art DiMarco estate

Hi Karen,

It's a little over a year since we corresponded. Is there any more activity on BG506 apt? It's been 2 1/2 years since we vacated. Thanks,

*Anita Imbrescia*  
*234 Hutchinson Road*  
*West Newton, PA 15089-3064*

**From:** Karen Cipolla <CipollaKaren@hfvillage.com>

**Sent:** Wednesday, January 9, 2019 3:25 PM

**To:** Anita Imbrescia <imbrescia@hotmail.com>

**Subject:** RE: Art DiMarco estate

Anita,

No, the Declining Balance Option is not a rent payment – the resident pays less for the apartment – but pays more each month for their monthly payment

The apartment is listed at full price or the declining balance price – again – whichever way the apartment is purchased does not change the amount of your refund

The initial entrance deposit refund was \$87,000 – less \$2,197 = \$84,802.96

We have several different contracts including a lease option which does not require a large sum as a the initial entrance deposit

KAREN CIPOLLA

Executive Assistant / Sales Inventory Coordinator