



original claim submitted to the District of Nevada in 2014 because Rochelle wishes to seek only this portion of her money back that was invested in TelexFree.

4. Rochelle Parker was informed by the District of Massachusetts on Monday, July 20, 2002 that this case was not closed and a motion could be sent in by mail by her since an attorney is not involved.

Allowing this proof of claim will not unduly prejudice the Debtor nor substantially impact the proceedings.

WHEREFORE, Rochelle Parker requests that this Court enter an Order treating this proof of claim at timely filed.

Dated: July 20, 2020

By:   
\_\_\_\_\_  
Rochelle Parker, Creditor

Rochelle Parker, Creditor  
1317 NE Goshen Drive  
Lee's Summit, MO 64064  
P: 816-728-3344  
E: rochelle.parker@Ymail.com

**CERTIFICATE OF SERVICE**

I herby certified that I mailed the foregoing Motion to Allow Late Filed Claim to be Treated as Timely Filed Claim via U.S.P.S. Certified Mail on Monday, July 20, 2020.

Respectfully Submitted,

By:   
Rochelle Parker, Creditor

Rochelle Parker, Creditor  
1317 NE Goshen Drive  
Lee's Summit, MO 64064  
P: 816-728-3344  
E: rochelle.parker@Ymail.com

# Exhibit 1

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110 (Official Form 10) (04/13)

<b>UNITED STATES BANKRUPTCY COURT</b>		District of Nevada	<b>PROOF OF CLAIM</b>
Name of Debtor: <b>TELEXFREE, LLC</b> 4705 S. DURANGO DRIVE #100-J51 LAS VEGAS, NV 89147		Case Number <b>2 14-BK-12524</b>	
NOTI: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.			
Name of Creditor (the person or other entity to whom the debtor owes money or property) <b>ROCHELLE PARKER</b>			<b>COURT USE ONLY</b>
Name and address where notices should be sent: <b>ROCHELLE PARKER</b> 5708 NE HIDDEN MEADOW DRIVE LEE'S SUMMIT, MO 64084 Telephone number: (816) 728-3344 email: <b>ROCHELLE.PARKER@YMAIL.COM</b>			<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (if known) Filed on: _____
Name and address where payment should be sent (if different from above):  Telephone number: _____ email: _____			<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
1. Amount of Claim as of Date Case Filed: \$ <u>18,975.00</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.			
2. Basis for Claim: <b>MEMBERSHIP FEES AND SERVICES PERFORMED</b> (See instruction #2)			
3. Last four digits of any number by which creditor identifies debtor: _____	3a. Debtor may have scheduled account as: <u>TELEXFREE, INC.</u> (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff; attach required reduced documents, and provide the requested information.		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____	
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Value of Property: \$ _____ Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____	
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.			
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).	Amount entitled to priority: \$ _____
<input type="checkbox"/> Up to \$2,775* 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"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(____).	Amount entitled to priority: \$ _____
*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.			
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)			

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7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and the definition of "redacted".)

**DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.**

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box:

I am the creditor.     I am the creditor's authorized agent.     I am the trustee, or the debtor, or their authorized agent.     I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: ROCHELLE PARKER  
 Title: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address and telephone number (if different from notice address above): \_\_\_\_\_  
 Telephone number: \_\_\_\_\_ email: \_\_\_\_\_

(Signature) \_\_\_\_\_ (Date) 04/20/2014

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

**INSTRUCTIONS FOR PROOF OF CLAIM FORM**

*The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.*

**Items to be completed in Proof of Claim form**

<p><b>Court, Name of Debtor, and Case Number:</b> Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.</p> <p><b>Creditor's Name and Address:</b> Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).</p> <p><b>1. Amount of Claim as of Date Case Filed:</b> State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.</p> <p><b>2. Basis for Claim:</b> State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.</p> <p><b>3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:</b> State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.</p> <p><b>3a. Debtor May Have Scheduled Account As:</b> Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.</p> <p><b>3b. Uniform Claim Identifier:</b> If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in Chapter 13 cases.</p> <p><b>4. Secured Claim:</b> <i>Check whether the claim is fully or partially secured. See this section if the</i></p>	<p>claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount paid due on the claim.</p> <p><b>5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a):</b> If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.</p> <p><b>6. Credits:</b> 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.</p> <p><b>7. Documents:</b> Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.</p> <p><b>8. Date and Signature:</b> The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.</p>
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DEFINITIONS		INFORMATION
<p><b>Debtor</b> A debtor is the person, corporation, or other entity that has filed a bankruptcy case.</p> <p><b>Creditor</b> A creditor is a person, corporation, or other entity to whom debtor owes a debt that was incurred before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).</p> <p><b>Claim</b> A claim is the creditor's right to receive payment for a debt owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.</p> <p><b>Proof of Claim</b> A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.</p> <p><b>Secured Claim Under 11 U.S.C. § 506 (a)</b> A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien.</p>	<p>A claim also may be secured if the creditor owes the debtor money (has a right to setoff).</p> <p><b>Unsecured Claim</b> An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.</p> <p><b>Claim Entitled to Priority Under 11 U.S.C. § 507 (a)</b> Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.</p> <p><b>Redacted</b> A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor must show only the last four digits of any social-security, individual's tax-identification, or financial-account number, only the initials of a minor's name, and only the year of any person's date of birth. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information.</p> <p><b>Evidence of Perfection</b> Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.</p>	<p><b>Acknowledgment of Filing of Claim</b> To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system (<a href="http://www.pacer.psc.uscourts.gov">www.pacer.psc.uscourts.gov</a>) for a small fee to view your filed proof of claim.</p> <p><b>Offers to Purchase a Claim</b> Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(c), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 <i>et seq.</i>), and any applicable orders of the bankruptcy court.</p>

# Exhibit 2

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Rochelle Parker

rochelle.parker@ymail.com

Physical Address: [Where you like to receive your mail]

Address, Suite Number 6708 NE HIDDEN MEADOW DRIVE

City, State, Zip Code OR  
City, Country, Mail code LEE'S SUMMIT, MO 64084

Telephone Number: 816-728-3344

Nickname (s) with TelexFree:

JISL, JISL1, JISL2, JISL3, JISL4, JISL5, JISL6, JISL7,  
JISL8, JISL9, JISL10

Account Number (s) with TelexFree:

JISL, JISL1, JISL2, JISL3, JISL4, JISL5, JISL6, JISL7,  
JISL8, JISL9, JISL10

Total Money Invested in TelexFree: \$18,975

Total Money Received from TelexFree: \$10,302.41

From October 15, 2013 Through April 13, 2014, How Much Money Did You Earn from TelexFree? \$10,302.41

Do You Have a Copy of the Last Invoice or Email Summary Received from TelexFree? NO

If Yes, Please send by e-mail to [Priscilla@schwartzlawyers.com](mailto:Priscilla@schwartzlawyers.com)

OR by mail to: The Schwartz Law Firm  
Attn: Priscilla Shaikh  
6623 S. Las Vegas Boulevard, Ste. 300  
Las Vegas, NV 89119

DocuSign Envelope ID: 7F3C32BA-1B77-49C9-8560-05E677EC965A



Samuel A. Schwartz, Esq.\*  
Bryan A. Lindsey, Esq.  
Emelia Allen, Esq.

\*Also licensed in Arizona, Florida and Illinois.

Matter

Rochelle Parker  
5708 NE HIDDEN MEADOW DRIVE  
LEE'S SUMMIT, MO 64064

Re: Legal Services

This Standard Engagement Letter describes the terms upon which the The Schwartz Law Firm, Inc. will provide legal services to you ("You"), and bill You for those services. The purpose of this letter is to set forth the scope of our proposed engagement as legal counsel to You, to confirm that we are in mutual agreement with respect to the same, to set forth the financial arrangements pursuant to our engagement and to verify Your approval of such financial arrangements, as follows:

1. **Professional Undertaking:** Our goal is to provide You with quality legal services, on schedule and at a reasonable cost. Using our professional judgment, we will endeavor to assign work on Your behalf to those attorneys and other personnel that we deem appropriate under the circumstances. Although we will do our best to serve You effectively, we cannot guarantee success. Any questions or concerns related to our services should be directed to us at once. Specifically, You requested our services in connection with the TelexFree, LLC bankruptcy, Case No. 14-12525, as follows:

■ **Proof of Claim Filing Service - \$99.00**

We will prepare, review and file a proof of claim in the bankruptcy case on Your behalf, for a one-time, single fee of \$99.00. In order to obtain this service at this price, Your documents must be signed and the fee must be paid prior to July 1, 2014. Your proof of claim will be based on the information you provide us, and as we request.

2. **Hourly Fees:** Generally, our fees for services are calculated based upon the applicable hourly rates for the attorneys and legal assistants who do the work. In Your case, however, we are providing our services on a fixed, non-refundable rate. Therefore, you will not be billed hourly by our attorneys. Our services will begin once the \$99.00 flat fee is received.
3. **Costs:** Due to the nature of our representation in your case, the costs will be included in the amounts paid above.

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6623 Las Vegas Blvd. South, Suite 300, Las Vegas Nevada 89119  
Telephone: 702.385.5544 Facsimile: 702.385.2741

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4. **Billing Statements:** Generally, our statements are prepared and mailed on a monthly basis, however, in this case you are paying a fixed, non-refundable fee, so no billing statements will be sent.
5. **Termination:** You have the right to terminate our representation at any time. We have the same right, subject to an obligation to give You reasonable notice to arrange alternative representation. In either event, fees and costs incurred on or before the date of termination must be paid, if at all, as described in this letter. With respect to the proof of claim service alone, our representation of You will terminate after we file Your claim and send You verification of the filing.
6. **Special Arrangements:** Special arrangements, if any, governing the basis on which we will provide and bill legal services to You and varying from or expanding upon the general arrangements set forth in this Engagement Letter will be governed in a separate agreement. Specifically, if You are individually the target of any litigation during the bankruptcy case, a separate contract will have to be executed between You and the firm.

If this letter correctly sets forth Your understanding of the scope of the services to be rendered by The Schwartz Law Firm, Inc., and if the terms of the engagement are satisfactory, please execute and return a copy of this letter. We look forward to working with You, and thank You once again for the opportunity to be of service.

Very truly yours,  
THE SCHWARTZ LAW FIRM

Samuel A. Schwartz, Esq.

Rochelle Parker

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Telephone: 702.385.5544 Facsimile: 702.385.2741

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Samuel A. Schwartz, Esq.\*  
Bryan A. Lindsey, Esq.  
Emelia Allen, Esq.

\*Also licensed in Arizona, Florida and Illinois.

Rochelle Parker  
6708 NE HIDDEN MEADOW DRIVE  
LEE'S SUMMIT, MO 64064

**Re: Representation of the Other Parties in the TelexFree Bankruptcy Case**

You are retaining us to represent you in the TelexFree, LLC bankruptcy case. Other individuals and entities also asked our firm to represent them in connection with the bankruptcy case, including filing proofs of claim on their behalf, and representing their interests during the bankruptcy (collectively, the "Other Parties"). At this time, we do not believe any conflicts exist between our firm, you and the Other Parties.

**WAIVER OF THE SCHWARTZ LAW FIRM'S  
REPRESENTATION OF THE OTHER PARTIES**

In the event that any of the Other Parties or any of their affiliates take a position adverse to you in the bankruptcy cases, you hereby expressly waive any such conflict or potential conflict of interest. The Schwartz Law Firm reserves the right to cease its representation of any party upon providing reasonable notice at the time the conflict is determined. You further expressly consent to, and waive your right to object to The Schwartz Law Firm's continued representation of the Other Parties in the TelexFree bankruptcy cases, even if The Schwartz Law Firm ceases to represent you. Further, you agree you will not, and expressly waive your right to seek to disqualify The Schwartz Law Firm, on any basis, from representing the Other Parties in connection with the TelexFree bankruptcy case.

**CONSENT TO WAIVER OF CONFLICT**

Rochelle Parker

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6623 Las Vegas Boulevard South, Suite 300, Las Vegas, Nevada 89119  
Telephone: 702.385.5544 Facsimile: 702.385.2741