

United States Bankruptcy Court for the District of Delaware

Indicate Debtor against which you assert a claim by checking the appropriate box below. (Check only one Debtor per claim form.)

☒ AeroCentury Corp. (Case No. 21-10636) ☐ JetFleet Holdings Corp. (Case No. 21-10637) ☐ JetFleet Management Corp. (Case No. 21-10638)

SS#2795

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. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or 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.

Part 1: Identify the Claim

| | | | |
|--|--|---|--|
| 1. Who is the current creditor? | <u>Helen M. Mercer</u> 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? | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____ | | |
| 3. Where should notices and payments to the creditor be sent? | Where should notices to the creditor be sent? | Where should payments to the creditor be sent? (if different) | |
| Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) | Name | Name | |
| | <u>Helen M. Mercer</u> | _____ | |
| | Number Street | Number Street | |
| | <u>402 S. Martinson, Apt 303</u> | _____ | |
| | City State ZIP Code | City State ZIP Code | |
| | <u>Wichita Ks 67213-3980</u> | _____ | |
| Country | Country | Country | |
| <u>USA</u> | <u>316-461-8162</u> | Contact phone _____ | |
| Contact phone | Contact email | Contact email | |
| <u>HMMDOM325@gmail.com</u> | _____ | _____ | |
| KURTZMAN CARSON CONSULTANTS Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____ | | | |
| 4. Does this claim amend one already filed? | <input checked="" type="checkbox"/> No <input type="checkbox"/> 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? | <input checked="" type="checkbox"/> No <input type="checkbox"/> 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:

3974

7. How much is the claim?

\$ 2,285.47

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.

Equity holder

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: \$ _____ (The sum of the secured and unsecured amount 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.

\$ _____

11. Is this claim subject to a right of setoff?

☒ No

☐ Yes. Identify the property: _____

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

☒ No

☐ Yes. Check all that apply:

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.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?

☒ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ _____

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 acknowledgement 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 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 05 19 2021
MM / DD / YYYY

Helen M. Mercer
Signature

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

Name Helen M Mercer
First name Middle name Last name

Title _____

Company _____

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

KURTZMAN CARSON CONSULTANTS Address

402 S. Martenson St Apt 303
Number Street

Wichita KS 67213 USA
City State ZIP Code Country

Contact phone 316-461-8162

Email hmmdom325@gmail

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SS# 2795



ACCOUNT STATEMENT

JUNE 1, 2017 - JUNE 30, 2017

 Account number:
 709-00846
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 HELEN M MERCER TTEE
 HELEN M MERCER REVOCABLE TRUST

ASSET DETAIL

The Estimated Annualized Income ("EAI") for certain securities could include a return of principal or capital gains, in which case EAI depicted on this account statement would be overstated. EAI is only an estimate of income generated by the investment and the actual income may be higher or lower. In the event the investment matures, is sold or called, the full EAI may not be realized.

* The Unrealized Gain/Loss may not reflect your investments' total return. Specifically, the net cost may include dividend and capital gains distributions which have been reinvested. Additionally, the information that appears in these columns may be based on information provided by you or at your direction. RBC has not verified such data. Please see "About Your Statement" on page 2 for further information.

Your Financial Advisor has elected to display Asset Detail with the following options: asset purchases (tax lots) consolidated.

CASH AND MONEY MARKET

| DESCRIPTION | SYMBOL/CUSIP | QUANTITY | MARKET PRICE | CURRENT MARKET VALUE | PREVIOUS STATEMENT MARKET VALUE | YTD INCOME |
|------------------------------------|--------------|----------|--------------|----------------------|---------------------------------|------------|
| CASH | | | | -\$5,087.23 | | |
| TOTAL CASH AND MONEY MARKET | | | | -\$5,087.23 | | |

US EQUITIES

| DESCRIPTION | SYMBOL/CUSIP | QUANTITY | MARKET PRICE | MARKET VALUE | NET COST * | UNREALIZED GAIN/LOSS * | ESTIMATED ANNUALIZED INCOME |
|--------------------------|--------------|----------|--------------|--------------------|---------------|------------------------|-----------------------------|
| AEROCENTURY CORP | ACY | 182.000 | \$12.558 | \$2,285.47 | N/A | N/A | |
| WAL-MART STORES INC | WMT | 200.000 | \$75.680 | \$15,136.00 | N/A | N/A | \$408.00 |
| TOTAL US EQUITIES | | | | \$17,421.47 | \$0.00 | \$0.00 | \$408.00 |

TAXABLE FIXED INCOME

| DESCRIPTION | SYMBOL/CUSIP | QUANTITY | MARKET PRICE | MARKET VALUE/ ACCRUED INTEREST | NET COST * | UNREALIZED GAIN/LOSS * | ESTIMATED ANNUALIZED INCOME |
|--|-----------------|-------------------|--------------|-----------------------------------|--------------------|------------------------|-----------------------------|
| WICHITA KANS HEALTH CARE FACS | 967249MY6 | 15,000.000 | \$100.891 | \$15,133.65 | \$15,000.00 | \$133.65 | \$975.00 |
| PRESBYTERIAN MANORS INC | CPN: 6.500% | | | \$121.88 | | | |
| REV 2013 IV-B | DUE 05/15/2025 | | | | | | |
| ORIGINAL ISSUE DISCOUNT | DTD: 07/30/2013 | | | | | | |
| CALLABLE 05/15/18 AT 100.000 | BOOK ENTRY ONLY | | | | | | |
| MOODY N/A S&P N/A | | | | | | | |
| TOTAL TAXABLE FIXED INCOME | | 15,000.000 | | \$15,133.65 | \$15,000.00 | \$133.65 | \$975.00 |
| ESTIMATED ACCRUED BOND INTEREST | | | | \$121.88 | | | |