

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 03-37114

George E. and Evelyn M. Zitterow,

**NOTICE AND OBJECTION
TO CLAIM(S)**

Debtor(s).

PLEASE TAKE NOTICE that the Court will hold a hearing on this objection on September 8, 2004, at 10:30 am. in Courtroom 228A, 228 Federal Bldg., 316 North Robert Street, St. Paul, Minnesota, or as soon thereafter as counsel can be heard. Responses to this objection shall be filed and delivered no later than August 27, 2004, at 10:30 a.m., which is seven (7) days before the hearing, or mailed no later than August 24, 2004, which is ten (10) days before the hearing. **IF NO RESPONSE TO THIS MOTION IS TIMELY FILED THE COURT MAY GRANT THE MOTION WITHOUT A HEARING.**

John A. Hedback, trustee, hereby objects to the claim(s) described below, and supports the objection(s) as follows:

1. John A. Hedback is the trustee in the above-referenced bankruptcy case. This case is pending before this Court.
2. This Court has jurisdiction over this matter under 28 U.S.C. Section 157 and 1334. This objection is brought pursuant to 11 U.S.C. ' 503, Bankruptcy Rule 3007 and Local Rule 505. This matter is a core proceeding.
3. This objection relates to the following claims:
 - a. Claim No. 4, in the amount of \$10,964.61, filed by Citibank USA on April 16, 2004.
 - b. Claim No. 5, in the amount of \$7,226.65, filed by Universal Bank on April 16, 2004.
4. Both claimants filed claims on the same date. Both claims reference account number 4784608000070957. Trustee has requested clarification of from the parties as to who holds the claim and what the proper amount is. Neither creditor has responded. Trustee requests that both claims be disallowed.

WHEREFORE, the trustee requests an order as follows:

- (A) Disallowing the above claims in their entirety; and
- (B) Granting any other relief the Court deems just and proper.

Dated: August 6, 2004

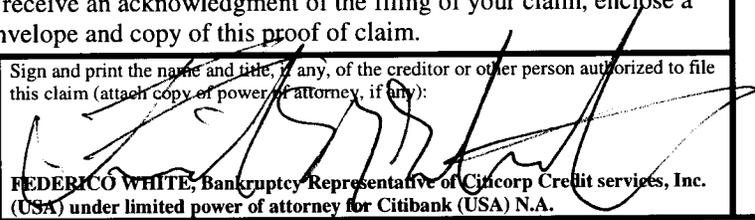
_____/e/ John A. Hedback_____
John A. Hedback, #142438
2855 Anthony Lane South, Suite 201
St. Anthony, MN 55418
(612) 789-1331

VERIFICATION

The undersigned being the duly appointed and acting trustee hereby verifies declare under penalty of perjury that the foregoing information is true and correct to the best of his knowledge, information and belief.

Dated: August 6, 2004

_____/e/ John A. Hedback_____
John A. Hedback, Trustee

UNITED STATES BANKRUPTCY COURT		STATE OF MN _____	PROOF OF CLAIM
Name of Debtor GEORGE ZITTEROW		Social Security No. 5563	Case Number Chapter 07 03-37114 Court Code MNST
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.			
Name of Creditor (The person or other entity to whom the debtor owes money or property): Citibank USA		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input checked="" type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Name and address where notices should be sent Citibank USA P.O. Box 8034 South Hackensack, NJ 07606-8034		 THIS SPACE IS FOR COURT USE ONLY	
Telephone number: 800 846 8444 x5-6795			
Account or other number by which creditor identifies debtor: 4784608000070957		Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____	
1. Basis for Claim: <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input checked="" type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____		<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your SS#: _____ Unpaid compensation for services performed from _____ (date) to _____ (date)	
2. Date debt was incurred: 10/18/03		3. If court judgment, date obtained:	
4. Total Amount of Claim at Time Case Filed: \$10964.61 If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.			
5. Secured Claim. <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral: \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____		7. Unsecured Priority Claim. <input type="checkbox"/> Check this box if you have an unsecured priority claim. Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,300),* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier-11 U.S.C. § 507(a)(3). <input type="checkbox"/> Contributions to an employee benefit plan-11 U.S.C. § 507(a)(4). <input type="checkbox"/> Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use-11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child-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)(____). <i>*Amounts are subject to adjustment on 4/1/01 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</i>	
6. Unsecured Claim. <input checked="" type="checkbox"/> Check this box if you have an unsecured claim.		THIS SPACE IS FOR COURT USE ONLY	
8. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.			
9. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.			
10. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.			
Date 04/07/2004	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):  FEDERICO WHITE, Bankruptcy Representative of Cincorp Credit services, Inc. (USA) under limited power of attorney for Citibank (USA) N.A.		
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.			

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In re:

BKY 03-37114

George E. and Evelyn M. Zitterow,

**UNSWORN DECLARATION FOR
PROOF OF SERVICE**

Debtor(s).

The undersigned, being an employee of Hedback, Arendt & Carlson, PLLC, attorneys licensed to practice law in this Court, with an office address of Suite 201 Anthony Place, 2855 Anthony Lane South, St. Anthony, MN 55113, declares that on the date below, I served the following:

1. Notice and Objection to Claim(s), together with a copy of the proofs of claims attached to the objection;
2. Proposed Order; and
3. Unsworn Declaration for Proof of Service (except as to the individual claimants, they received only a copy of their particular claim, and not a copy of all claims)

upon each of the entities named below by mailing to each of them a copy thereof by enclosing same in an envelope with first class mail postage prepaid and depositing same in the post office at St. Anthony, MN addressed to each of them as follows:

Universal Bank NA
Exception Payment Processing
Attn: Federico White
P.O. Box 6305
The Lakes, NV 88901 6305

Citibank USA
Attn: Federico White
P.O. Box 8034
South Hackensack, NJ 07606-8034

Office of United States Trustee
1015 US Courthouse
300 South Fourth Street
Minneapolis, MN 55415

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

Dated: August 6, 2004

_____/e/ John A. Hedback_____

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MINNESOTA

In re:

BKY 03-37114

George E. and Evelyn M. Zitterow,

**ORDER REGARDING
CLAIM(S)**

Debtor(s).

This case came before the Court on the Trustee's objection(s) to claim(s). Appearances were noted on the record. Based on the file, record and proceedings herein,

IT IS HEREBY ORDERED:

- a. Claim No. 4, in the amount of \$10,964.61, filed by Citibank USA on April 16, 2004 is disallowed in its entirety.
- .
- b. Claim No. 5, in the amount of \$7,226.65, filed by Universal Bank on April 16, 2004 is disallowed in its entirety.
- .

BY THE COURT

Dated: _____

U.S. Bankruptcy Judge