Fill in this information to identify the case:

Debtor 1: Elizabeth Ann Naylor

Debtor 2 (Spouse, if filing):

United States Bankruptcy Court for the: District of Arizona

Case number: 25-07596

Official Form 410

Proof of Claim

04/25

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?**

Jefferson Capital Systems LLC
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor: Amazon Store Card

2. **Has this claim been acquired from someone else?**

☐ No
☑ Yes. From whom? Synchrony Bank

3. **Where should notices and payments to the creditor be sent?**
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent?** (if different)
Jefferson Capital Systems, LLC Name	Jefferson Capital Systems, LLC Name
PO Box 7999 Number Street	PO Box 772813 Number Street
St. Cloud MN 56302-9617 City State ZIP Code	Chicago IL 60677-2813 City State ZIP Code
Contact phone 800-928-7314	Contact phone 800-928-7314
Contact email Bankruptcy@JCAP.com	Contact email Bankruptcy@JCAP.com

Reference # for Payment: 4097802864

Uniform claim identifier (if you use one):

J C P B K R 2 5 0 7 5 9 6 A Z M 3 2 7 3 2 6 7 1

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: 2 6 7 1

7. **How much is the claim?** $ 1,216.15 **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.
   Credit Card

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 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.** $_____

11. **Is this claim subject to a right of setoff?**
    - ☑ No
    - ☐ Yes. Identify the property: _____

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

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☑ No

☐ Yes. *Check one:*

	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 $3,800* 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 $17,150*) 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 4/01/28 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)(3) 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 10/02/2025
MM / DD / YYYY

/s/ Rohit Mudras
Signature

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

Name: Rohit Mudras
First name | Middle name | Last name

Title: Bankruptcy Specialist

Company: Jefferson Capital Systems, LLC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 200 14th Avenue E
Number Street

Sartell | MN | 56377
City | State | ZIP Code

Contact phone: 800-928-7314 Email: Bankruptcy@JCAP.com

CONTACT INFORMATION

Jefferson Capital Systems, LLC
Phone: 800-928-7314
Email: Bankruptcy@JCAP.com

PROOF OF CLAIM - ACCOUNT STATEMENT SUMMARY CREATED 10/02/2025

ACCOUNT NUMBER: XXXX-XXXX-XXXX-2671 CASE: 25-07596

NAME: Elizabeth Ann Naylor

Bankruptcy Rule 3001(c)(2) Balance Statement

Principal Balance	$1,186.51
Interest Balance	$29.64
Fee Balance	$0.00
Total Balance as of Bankruptcy Filing	$1,216.15

Bankruptcy Rule 3001(c)(3)(A) Statement

Original Creditor	Amazon Store Card
Purchased From	Synchrony Bank
Last Transaction Date	08/03/2025
Last Payment Date	08/01/2025
Charge Off Date	08/19/2025
Open Date	12/19/2019

Last Payment Date: If no payment was made on the account, the last payment date may be not applicable or the account is considered a first-pay default. The last payment date may not be available for all accounts.

Charge Off Date: An account may charge off due to a bankruptcy filing or due to non-payment before the bankruptcy filing.

NOTE: Proof of claim balance is equal to the charge-off balance shown on the attached statement. If the current balance listed on the statement is zero, this is due to the offsetting charge-off transaction shown therein.

All information concerning this account is based on records or documentation provided to Jefferson Capital Systems, LLC. To request additional information or documentation with respect to the proof of claim to which it attaches, please contact a claim specialist at 800-928-7314 or at bankruptcy@JCAP.com. Some documents may no longer be available, may have been lost or destroyed, or otherwise unavailable.

v.20077

synchrony
965 Keller Rd
Altamonte Springs, FL 32714

BILL of SALE

Jefferson Capital (SKFLJBKS) – PLCC CH13 – September 2025

Transfer Date: 9/18/2025

For value received and in further consideration of the mutual covenants and conditions set forth in the Master Account Sale Agreement (the "Agreement"), dated as of this 10th day of July, 2023 by and between Synchrony Bank formerly known as GE Capital Retail Bank; RFS Holding, LLC, Synchrony Card Funding, LLC and Retail Finance Credit Services, LLC., ("Seller") and Jefferson Capital Systems, LLC ("Buyer"), Seller hereby transfers, sells, conveys, grants, and delivers to Buyer, its successors and assigns, without recourse except as set forth in the Agreement, to the extent of its ownership, the Accounts as set forth in the Notification Files (as defined in the Agreement and Account Sale Addendum dated 10/09/2024), delivered by Seller to Buyer on or about 18th of September, 2025, and as further described in the Agreement.

The aggregate Sale Balance of the accounts as of the Transfer Date was

Synchrony Bank
Signed by: Lynne Fisher 17C16DBC75C743B...
By: _____ 9/30/2025
Lynne Fisher
Title: SVP Recovery Operations

RFS Holding LLC
Signed by: Lynne Fisher 17C16DBC75C743B...
By: _____ 9/30/2025
Lynne Fisher
Title: Duly Authorized Signatory

Synchrony Card Funding, LLC
Signed by: Lynne Fisher 17C16DBC75C743B...
By: _____ 9/30/2025
Lynne Fisher
Title: Duly Authorized Signatory

Retail Finance Credit Services, LLC
Signed by: Lynne Fisher 17C16DBC75C743B...
By: _____ 9/30/2025
Lynne Fisher
Title: Vice President