


Fill in this information to identify the case:

Debtor 1 AUTO MASTERS LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Middle District of Tennessee 

Case number 3:17-bk-07036

Official Form 410

Proof of Claim

04/16

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?	<u>SEI, INC.</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 type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
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? <u>ROBERTSON LAW GROUP</u> Name <u>1896 Gen. George Patton Dr. #600</u> Number Street <u>Franklin</u> <u>TN</u> <u>37069</u> City State ZIP Code Contact phone <u>615-656-1729</u> Contact email <u>Brittany@RobertsonLG.com</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (if different) _____ Name _____ Number Street _____ City State ZIP Code Contact phone _____ Contact email _____
4. Does this claim amend one already filed?	<input 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 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: _____

7. How much is the claim? \$ 38,203.02 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.

Services performed _____

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:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ Up to \$2,850* 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 \$12,850*) 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 4/01/19 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 12/20/2017
MM / DD / YYYY

Brittany M. Bartkowiak

Signature

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

Name	<u>Brittany</u>	<u>Michelle</u>	<u>Bartkowiak</u>
	First name	Middle name	Last name
Title	<u>Attorney of record</u>		
Company	<u>Robertson Law Group</u>		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	<u>1896 Gen. George Patton Dr. Suite 600</u>		
	Number	Street	
	<u>Franklin</u>	<u>TN</u>	<u>37067</u>
	City	State	ZIP Code
Contact phone	<u>615-656-1729</u>	Email	<u>Brittany@RobertsonLG.com</u>

EXHIBIT A

SUMMARY OF CLAIM

On or about May 14, 2014, Mark Janbakhsh entered into a Service Agreement with SEI, Inc. (the "Contract," a true and correct copy of which is attached to the Proof of Claim in part as **Exhibit B**). Pursuant to the Contract, SEI was to provide uniformed security officers and vehicles to various locations. SEI provided security services from approximately May 2014 through August 2017. SEI has not been paid for several invoices dating from December of 2016 through August 2017, after application of all payments and credits, in the principal amount of \$28,232.51. A copy of the accounting detailing the unpaid invoice amounts and copies of the invoices are also being filed herewith as **Exhibit C**. SEI further submits it is entitled to late fees and attorney's fees under the contract, in addition to statutory prejudgment interest. A late fee of 1.5 % is added per the contract in the amount of \$559.67, plus attorney's fees of \$9,410.84 for a total amount owed of **\$38,203.02**.

Nothing herein should be construed as a waiver or estoppel as to any rights, remedies or defenses which SEI may have, all of which are hereby expressly reserved. SEI further reserves the right to amend this proof of claim as may be necessary to fully and adequately support their claim against the debtor.



SERVICE AGREEMENT

SEI Corporate Offices

P. O. Box 10231
Birmingham, AL 35202
(205) 251-0566 Main Phone

District Office Nashville		Address 1645 Murfreesboro Rd, Suite B Nashville, TN 37217			Job Number		
SEI Contact for Account: Roger Redmond		Phone: 423-490-0022		Fax: 423-490-0019		Manager Roger Redmond	
Client Company Name: AutoMasters					Cell: 423-463-1054		
Client Billing Address 4601 Nolensville Road					PO#		
City Nashville		State TN	Zip Code 37211	Job Site Name			
Client Service Address 3955 Nolensville Pike		City Nashville	State TN	Zip Code 37211	County		
Client Contact Name: Mark Janbash		Title President/CEO	Phone 615-331-8899	Cell	E-Mail Address mark@AutoMastersTN.com		
Client Accounts Payable Contact: Sandra May		Phone 615-331-8899	Fax 615-331-8895	E-Mail Address Sandra@AutoMastersTN.com			
Begin Service		Type of Service:	<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Renewal <input type="checkbox"/> INFO CHANGE				
Date: 5-14-2014		Weapon:	<input checked="" type="checkbox"/> Unarmed <input type="checkbox"/> Armed <input type="checkbox"/> Both Armed & Unarmed Posts				
Time: 9p.m.		Uniform:	<input checked="" type="checkbox"/> Standard <input type="checkbox"/> Soft <input type="checkbox"/> Other:				
Special Instructions:	SEI Vehicle included in the billing price below. Fuel is billed as a direct pass through to the client. Gas receipts and Mileage Log will be provided to the Client.						
Rates (To Be Invoiced <input type="checkbox"/> Weekly, <input type="checkbox"/> Bi-Weekly, <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Pre-Payment)							
	HPW	Pay Per Hour	Regular Billing Per Hour	Premium Billing Per Hour	Billable Equipment / Benefits	Amt	Period
Security Officers	49	\$	\$16.88	\$19.57		\$	
Security Officers		\$	\$	\$		\$	
Supervisor		\$	\$	\$		\$	
Supervisor		\$	\$	\$		\$	
Other		\$	\$	\$		\$	
Total Billable HPW: 49							
Premium Rate will be billed for all hours worked on the following Holidays: New Year's Day, Memorial Day, Labor Day, Easter Sunday, Independence Day, Thanksgiving Day and Christmas Day. Other: _____							
Premium Rate may be charged for additional coverage requests with less than 48 hour notice.							
The above rates are inclusive of all costs, to include overtime. Premium Rate will only be charged if the Client requests a specific security officer to work more than forty (40) hours in one work week (Sun - Sat).							
Schedule of Services							
Monday: 2100-0400		Tuesday: 2100-0400		Wednesday: 2100-0400		Thursday: 2100-0400	
Friday: 2100-0400		Saturday: 2100-0400		Sunday: 2100-0400		Holidays: TBD	

TERMS AND CONDITIONS ON BOTH PAGES OF THIS DOCUMENT ARE BINDING ON THE PARTIES OF THIS AGREEMENT

Client: AutoMasters
Signature: [Signature]
Print Name: Mark Janbash
Title: President/CEO
Date: 5/9/2014

SEI
Signature: [Signature]
Print Name: Roger Redmond
Title: District Manager
Date: 5/9/2014

Rev 2013_R2

SEI, Inc. (TN)

Customers Listed: 10200 To 10200

Aging Date: 12/19/17

Cut-Off Date: 12/19/17

Invoice Aging - Days after Invoice

Date Range: 01/01/16 To 10/01/17

12/19/1711:26:55 AM

Page 1 of 1

Customer #		Customer Name					Original	Credit Limit				Terms			
Status	Date	Ref	PO #	Job #	Invoice #	Days Out	Amount	Current	1 - 30	31 - 45	46 - 60	61 Plus	Balance Due		
10200	Auto Masters						(615) 331-8899	Last Payment:	09/25/17		\$5,635.51	DUE ON RECEIPT			
CPR	12/31/16	Inv		10200-0001 Auto Masters	31470	323	3,795.15					1,897.57	1,897.57		
C	04/30/17	Inv		10200 Auto Masters	32242	203	6,937.22					6,937.22	6,937.22		
CPR	04/30/17	Inv		10200-0001 Auto Masters	32243	203	3,541.30					1,941.07	1,941.07		
C	05/31/17	Inv		10200 Auto Masters	32504	172	6,869.64					6,869.64	6,869.64		
CPR	05/31/17	Inv		10200-0001 Auto Masters	32505	172	3,705.42					1,852.71	1,852.71		
C	06/30/17	Inv		10200 Auto Masters	32676	142	5,006.25					5,006.25	5,006.25		
CPR	06/30/17	Inv		10200-0001 Auto Masters	32677	142	3,685.67					1,842.83	1,842.83		
CPR	07/31/17	Inv		10200-0001 Auto Masters	32867	111	3,770.44					1,885.22	1,885.22		
					Sub Total:		37,311.09	0.00				28,232.51	28,232.51		
												Percent	Balance Due		
												Current	0.00%	\$0.00	
												1 - 30	0.00%	\$0.00	
												31 - 45	0.00%	\$0.00	
												46 - 60	0.00%	\$0.00	
												61 Plus	100.00%	\$28,232.51	
													100.00%	\$28,232.51	
												Total Unapplied Cash		\$0.00	
												Original Amount	\$37,311.09	Grand Total	\$28,232.51

Company Totals

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	31470
DATE	12/31/16

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters - Thompson Lane
609 Thompson Ln
Nashville, TN 37204-3607

TERMS: DUE ON RECEIPT		CUSTOMER NO. 10200	JOB NO. 10200-0001	P.O. NO.	
Description		Quantity	Unit of Measure	Price	Amount
Security Services for December 2016					
Security Officer		206.00	Hours	16.77	3,454.62
Security Officer Holiday Worked		11.00	Hours	19.57	215.27
Fuel Charge		1.00	Each	125.26	125.26
Please remit payment to: SEI, INC Dept # 5572 P.O. Box 11407 Birmingham, AL 35246-5572					
				Sub-Total	3,795.15
				Sales Tax	
				TOTAL	\$3,795.15

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	32242
DATE	04/30/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters
3955 Nolensville Pike
Nashville, TN 37211-4202

TERMS: DUE ON RECEIPT	CUSTOMER NO. 10200		P.O. NO.	
Description	Quantity	Unit of Measure	Price	Amount
Security Services for 4/1/2017 to 4/30/2017				
Security Officer	406.00	Hours	15.19	6,167.14
Security Officer Holiday Worked	14.00	Hours	19.57	273.98
Fuel Charge	0.00	Monthly	1.00	0.00
Fuel Charge	1.00	Period	496.10	496.10
			Sub-Total	6,937.22
			Sales Tax	
			TOTAL	\$6,937.22

▼ TO ENSURE PROPER CREDIT, PLEASE DETACH AND MAIL BOTTOM PORTION WITH YOUR PAYMENT ▼

ATTENTION:

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

PLEASE SEND REMITTANCE TO:

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

Customer No.	10200
Job No.	10200
Invoice No.	32242
Invoice Date	04/30/17
Amount Due	\$6,937.22
Amount Remitted	

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	32243
DATE	04/30/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters - Thompson Lane
609 Thompson Ln
Nashville, TN 37204-3607

TERMS: DUE ON RECEIPT	CUSTOMER NO. 10200		P.O. NO.	
Description	Quantity	Unit of Measure	Price	Amount
Security Services for 4/1/2017 to 4/30/2017				
Security Officer	203.00	Hours	16.77	3,404.31
Security Officer Holiday Worked	7.00	Hours	19.57	136.99
Fuel Charge	1.00	Each	0.00	0.00
			Sub-Total	3,541.30
			Sales Tax	
			TOTAL	\$3,541.30

▼ TO ENSURE PROPER CREDIT, PLEASE DETACH AND MAIL BOTTOM PORTION WITH YOUR PAYMENT ▼

ATTENTION:

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

PLEASE SEND REMITTANCE TO:

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

Customer No.	10200
Job No.	10200-0001
Invoice No.	32243
Invoice Date	04/30/17
Amount Due	\$3,541.30
Amount Remitted	

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	32504
DATE	05/31/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters
3955 Nolensville Pike
Nashville, TN 37211-4202

TERMS: DUE ON RECEIPT	CUSTOMER NO. 10200	JOB NO. 10200	P.O. NO.	
Description	Quantity	Unit of Measure	Price	Amount
Security Services for 5/1-31/2017				
Security Officer	414.00	Hours	15.19	6,288.66
Security Officer Holiday Worked	14.00	Hours	19.57	273.98
Fuel Charge	1.00	Monthly	307.00	307.00
Please remit payment to: SEI, INC Dept # 5572 P.O. Box 11407 Birmingham, AL 35246-5572				
			Sub-Total	6,869.64
			Sales Tax	
			TOTAL	\$6,869.64

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	32505
DATE	05/31/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters - Thompson Lane
609 Thompson Ln
Nashville, TN 37204-3607

TERMS: DUE ON RECEIPT		CUSTOMER NO. 10200	JOB NO. 10200-0001	P.O. NO.	
Description		Quantity	Unit of Measure	Price	Amount
Security Services for 5/1-31/2017		206.00	Hours	16.77	3,454.62
Security Officer		7.00	Hours	19.57	136.99
Security Officer Holiday Worked		1.00	Each	113.81	113.81
Fuel Charge					
Please remit payment to: SEI, INC Dept # 5572 P.O. Box 11407 Birmingham, AL 35246-5572					
				Sub-Total	3,705.42
				Sales Tax	
				TOTAL	\$3,705.42

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	32676
DATE	06/30/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters
3955 Nolensville Pike
Nashville, TN 37211-4202

TERMS: DUE ON RECEIPT	CUSTOMER NO. 10200	JOB NO. 10200	P.O. NO.	
Description	Quantity	Unit of Measure	Price	Amount
Security Services for 6/1/17 to 6/30/17				
Security Officer	300.00	Hours	15.19	4,557.00
Fuel Charge	1.00	Monthly	449.25	449.25
Please remit payment to: SEI, INC Dept # 5572 P.O. Box 11407 Birmingham, AL 35246-5572				
			Sub-Total	5,006.25
			Sales Tax	
			TOTAL	\$5,006.25

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	32677
DATE	06/30/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters - Thompson Lane
609 Thompson Ln
Nashville, TN 37204-3607

TERMS: DUE ON RECEIPT		CUSTOMER NO. 10200	JOB NO. 10200-0001	P.O. NO.	
Description		Quantity	Unit of Measure	Price	Amount
Security Services for 6/1/17 to 6/30/17					
Security Officer		209.50	Hours	16.77	3,513.32
Fuel Charge		1.00	Each	172.35	172.35
Please remit payment to: SEI, INC Dept # 5572 P.O. Box 11407 Birmingham, AL 35246-5572					
				Sub-Total	3,685.67
				Sales Tax	
				TOTAL	\$3,685.67

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	32867
DATE	07/31/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters - Thompson Lane
609 Thompson Ln
Nashville, TN 37204-3607

TERMS: DUE ON RECEIPT		CUSTOMER NO. 10200	JOB NO. 10200-0001	P.O. NO.	
Description		Quantity	Unit of Measure	Price	Amount
Security Services for July 2017					
Security Officer		210.00	Hours	16.77	3,521.70
Security Officer Holiday Worked		7.00	Hours	19.57	136.99
Fuel Charge		1.00	Each	111.75	111.75
Please remit payment to: SEI, INC Dept # 5572 P.O. Box 11407 Birmingham, AL 35246-5572					
				Sub-Total	3,770.44
				Sales Tax	
				TOTAL	\$3,770.44

SEI, INC
Dept # 5572
P.O. Box 11407
Birmingham, AL 35246-5572

INVOICE NO.	33007
DATE	08/31/17

CUSTOMER

Sandra May
Auto Masters
4601 Nolensville Road
Nashville, TN 37211

SERVICE LOCATION

Auto Masters - Thompson Lane
609 Thompson Ln
Nashville, TN 37204-3607

TERMS: DUE ON RECEIPT		CUSTOMER NO. 10200	JOB NO. 10200-0001	P.O. NO.	
Description		Quantity	Unit of Measure	Price	Amount
Security Services For August 2017		88.00	Hours	16.77	1,475.76
Security Officer		1.00	Each	0.00	0.00
Fuel Charge					
Please remit payment to: SEI, INC Dept # 5572 P.O. Box 11407 Birmingham, AL 35246-5572					
				Sub-Total	1,475.76
				Sales Tax	
				TOTAL	\$1,475.76

MIDDLE DISTRICT OF TENNESSEE

Claims Register

[3:17-bk-07036 Auto Masters, LLC](#)

Judge: Charles M Walker

Chapter: 11

Office: Nashville

Last Date to file claims: 02/15/2018

Trustee:

Last Date to file (Govt):

Creditor: (6532762)
SEI, Inc.
P.O. Box 11407
Birmingham, AL 35246-
5572

Claim No: 9
Original Filed
Date: 12/20/2017
Original Entered
Date: 12/20/2017

Status:
Filed by: CR
Entered by: BRITTANY
MICHELLE BARTKOWIAK
Modified:

Amount claimed: \$38203.02

History:

[Details](#) [9-1](#) 12/20/2017 Claim #9 filed by SEI, Inc., Amount claimed: \$38203.02 (BARTKOWIAK, BRITTANY)

Description:

Remarks:

Claims Register Summary

Case Name: Auto Masters, LLC

Case Number: 3:17-bk-07036

Chapter: 11

Date Filed: 10/17/2017

Total Number Of Claims: 1

Total Amount Claimed*	\$38203.02
Total Amount Allowed*	

*Includes general unsecured claims

The values are reflective of the data entered. Always refer to claim documents for actual amounts.

	Claimed	Allowed
Secured		
Priority		