BmC

Fill in this information to identify the case:

Debtor 1 Aerospace Holdings, Inc.

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: District of Delaware

Case number 17-10635

FILED
2017 MAY -1 AM 8:37
US BANKRUPTCY COURT
DISTRICT OF DELAWARE

Official Form 410

Proof of Claim

12/15

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?**

   W.W. Grainger, Inc.
   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?**

   ☑ No
   ☐ 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?	**Where should payments to the creditor be sent?** (if different)
W.W. Grainger, Inc. (Name)	Name
7300 North Melvina Ave.MWX22825060098 (Number Street)	Number Street
Niles IL 60714 (City State ZIP Code)	City State ZIP Code
Contact phone 847-647-5653	Contact phone
Contact email aida.trevino@grainger.com	Contact email

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

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?

Aerospace Holdings POC
00043

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: 0 0 9 8

7. How much is the claim?

$ 3,855.21. **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.

Goods Sold

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)?**	☑ No	
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	☐ Yes. *Check all that apply:*	**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 $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).	$_____
	☐ Wages, salaries, or commissions (up to $12,475*) 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 4/01/16 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 04/25/2017
MM / DD / YYYY

Aida Trevino
Signature

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

Name: Aida Trevino
First name | Middle name | Last name

Title: Special Collection Associate

Company: W.W. Grainger
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 7300 North Melvina Ave
Number Street

Niles | IL | 60714
City | State | ZIP Code

Contact phone: 847-647-5653 Email: aida.trevino@graiger.com

GRAINGER
FOR THE ONES WHO GET IT DONE

7300 North Melvina Ave
Niles, IL 60714-3998

STATEMENT

Statement Date 03/24/2017

N C DYNAMICS
6925 DOWNEY AVE
LONG BEACH CA 90805-1823

Document Number	Purchase Order	Doc Type	Document Date	Net Due Date	Amount
9325897347	73977	01	01/10/2017	02/09/2017	1,021.34
9330556938	74168	01	01/13/2017	02/12/2017	61.12
9333687003	74216	01	01/18/2017	02/17/2017	118.87
9335443900	74264	01	01/19/2017	02/18/2017	471.01
9338812770	74303	01	01/23/2017	02/22/2017	53.85
9348447450	74488	01	02/01/2017	03/03/2017	151.15
9353477434	74572	01	02/07/2017	03/09/2017	168.53
9367188852	74819	01	02/21/2017	03/23/2017	461.13
9368024627	74829	01	02/22/2017	03/24/2017	90.00
9376980109	74968	01	03/03/2017	04/02/2017	84.55
9377424636	74968	01	03/03/2017	04/02/2017	55.85
9377603312	74973	01	03/03/2017	04/02/2017	449.02
9383143154	75046	01	03/09/2017	04/08/2017	172.88
9389961039	75165	01	03/17/2017	04/16/2017	34.78
9397300394	75259	01	03/24/2017	04/23/2017	461.13

Document Type: 01=Invoice; 04=Corporate Debit; 06=Residual Item;
11=Credit Memo; 14=Corporate Credit; 15=Incoming Payment; 16=Residual Item

TOTAL 3,855.21

GRAINGER

W.W. Grainger, Inc.
7300 N. Melvina Avenue
Niles, IL 60714-3998
Tel: 847-647-7200
Fax: 847-647-9345

2017 MAY -1 AM 8:37
DISTRICT OF DELAWARE

Date: 4/25/17
Re: Case Number: 17-10635

Clerk's Office, U S Bankruptcy Court
824 Market Street, 3rd Floor
Wilmington, DE 19801

Aerospace Holdings, Inc.
366 Madison Avenue 9th Floor
New York, NY 10017

Dear Sir or Madam:

Please find enclosed our proof of claim and itemized statement in subject bankruptcy reflecting the balance due of $3,855.21.

Kindly enter our claim and send acknowledgement back in the enclosed prepaid envelope. Thank you.

Sincerely,

Aida Trevino

Special Collections Division