Fill in this information to identify the case:					
Debtor 1 FOX ORTEGA ENTERPRISES					
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: NONTHEAT District of CALIFORING  Case number					



## 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 II Identity the Claim						
1.	Who is the current creditor?	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?  DAVID SHAFILM  Name  STB AVAWAM DF  Number Street	Where should payments to the creditor be sent? (if different)  Name  Number Street				
		City State ZIP Code  Contact phone 859 582 1702  Contact email dishafran 1 @ g m al. com  Uniform claim identifier for electronic payments in chapter 13 (if you u	City State ZIP Code  Contact phone  Contact email  se one):				
4.	Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known) ✓	16 - 40050 Filed on 1 18 2016				
5.	Do you know if anyone else has filed a proof of claim for this claim?	□ No □ Yes. Who made the earlier filing?					

6.	Do you have any number you use to identify the debtor?	No Mark Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 44 366 03 41		
7.	How much is the claim?	\$		
8.	What is the basis of the claim?	ixamples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Itach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Imit disclosing information that is entitled to privacy, such as health care information.		
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: Winterest (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:  Amount of the claim that is unsecured:  Amount necessary to cure any default as of the date of the petition:  Annual Interest Rate (when case was filed) 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.	ls this claim subject to a right of setoff?	No  Yes. Identify the property:		

Part 2: Give Information About the Claim as of the Date the Case Was Filed

Official Form 410

**Proof of Claim** 

page 2

	<u> </u>			
12. Is all or part of the claim	☑ No			
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	all that apply:	Amount entitled to priority	
A claim may be partly priority and partly		ic support obligations (including alimony and child support) under C. § 507(a)(1)(A) or (a)(1)(B).	\$	
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2 persona	\$		
	bankrup	☐ 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 o	r 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 a	are subject to adjustment on 4/01/16 and every 3 years after that for cases begun on or aft	er the date of adjustment.	
Part 3: Sign Below				
Parto. Sign below				
The person completing this proof of claim must	Check the appro	priate box:		
sign and date it. FRBP 9011(b).	I am the creditor.			
` '		ditor's attorney or authorized agent.		
If you file this claim electronically, FRBP	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.			
5005(a)(2) authorizes courts to establish local rules	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.			
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calc amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.			
A person who files a	amount of the claim, the creditor gave the deptor credit for any payments received toward the dept.			
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.			
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.			
3571. Executed on date 01 20 2016		e 01 20 2016 MM / DD / YYYY		
MINI 1 DD 7 1111				
	,	L/ATMA		
Signature				
	/			
	Print the name	of the person who is completing and signing this claim:		
	Name	DAVID JOËL SHAFRA	N	
		First name Middle name Last name		
	Title			
Company				
		Identify the corporate servicer as the company if the authorized agent is a servicer.		
	Address	576 AVAWAM DC Number Street		
			<	
		City State ZIP Code		
	Contact phone	859 582 1702 Email disha	frant agmailecon	

## PREMIER CRU

1011 University Avenue Berkeley, CA 94710

(510) 644-9463 FAX (510) 647-3833

## Sales Order

Page: 1

Order Number: 0000449669 Order Date: 7/15/2014

Salesperson: JG Customer: 45245

Customer PO:

Sold To Ship To

David Shafran 576 Avawam Dr Richmond, KY 40475 USA Mark Puzey 9439 N. 680 East Road Fairmount, IL 61841 USA

Contact: David Shafran Phone: (859) 582-1702

This order has been paid by Visa - Thank You!

Item		Ordered	Quantity Shipped	Unit Price Amount	
49571	2010 Barolo Mosconi, Conterno-Fantino	12.00	0.00	69.99	839.88

Purchased on Line