Fill in this information to identify the case:					
Debtor 1 Fox Ortega Enterprises, Inc					
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the:Northern District of California					
Case number 16-40050					

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2016 FEB - 9 AM 10: 32	
U.S. BANKRUFTSY COLRU TOWNEL BEDIST, CF CA. CANLAND, CA.	

Official Form 410 Proof of Claim

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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.

. Who is the current creditor?	David B Davenport Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
. Has this claim been acquired from someone else?	Variable No					
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be ser David B Davenport	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)		
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 19608 Hollygrape Street		Name			
	Number Street	702	Number Street		ZIP Code	
	City State	ZIP Code	City	State		
	Contact phone 510-921-8699 Contact email dbd1950@gmail.com					
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):					
4. Does this claim amen one already filed?	d Image: A standard					
5. Do you know if anyor else has filed a proof of claim for this clain	Ves Who made the earlier filing?					

Official Form 410

Proof of Claim

page 1

Do you have any number you use to identify the debtor?	nber 🗹 No ne 🔲 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
How much is the claim?	 \$					
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. Wines purchased but never deliverd					
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: 18 bottles of wine 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: \$1,125.00 Amount of the claim that is secured: \$0.00 Amount of the claim that is unsecured: \$1,125.00 (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: \$1,125.00 Annual Interest Rate (when case was filed)0.00_% 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 right of setoff?	a 🚺 No					
Official Form 410	Proof of Claim page 2					

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	 ✓ No ❑ Yes. Check all that apply: 	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the 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	er 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

A person who files a

imprisoned for up to 5 years, or both.

fraudulent claim could be fined up to \$500,000,

18 U.S.C. §§ 152, 157, and

is.

3571.

5005(a)(2) authorizes courts to establish local rules specifying what a signature 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.

01/27/2016 Executed on date MM / DD VVVV Varpan Signature

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

Name	David Brian Davenport		ort		
Name	First name	Middle name		Last name	
Title					
Company					
	Identify the corporate servicer as the company if the authorized agent is a servicer.				
Address	19608 Hollygrape	Street			
	Number Street				
	Bend		OR	97702	
	City		State	ZIP Code	
Contact phone	510-921-8699		Email dbd1	1950@gmail.com	