B10 (Official Form 10) (04/13)		40°a	<u> </u>	
UNITED STATES BANKRUPT	CCY COURT Northern Distri	ct of Califor	nia	PROOF OF CLAIM
Name of Debtor:		Case Number:		FEB 2 9 2016 OAKLAND, CALIFORNIA
Fox Ortega Enterprises, Inc. db	oa Premier Cru	16-40050 \	NJL 7	FER
				BANK 9 2010
				OAKLANDTON
	claim for an administrative expense that arise ment of an administrative expense according t			"VU, CALIFORT"
···	tity to whom the debtor owes money or prope		J	OMNIA
David Halligan		• .		COURT USE ONLY
Name and address where notices should	be sent:			Check this box if this claim amends a
David Halligan 2043 Berryman Street			p	reviously filed claim.
Berkeley, CA 94709			(	Court Claim Number:
Telephone number: (510) 610-4187	email: hallidave@yahoo.com			(If known)
				iled on:
Name and address where payment should	I be sent (if different from above):		a	Check this box if you are aware that nyone else has filed a proof of claim
				elating to this claim. Attach copy of tatement giving particulars.
Telephone number:	email:			
1. Amount of Claim as of Date Case Fi	iled: \$ 1	877.80		
If all or part of the claim is secured, comp	plete item 4.			
If all or part of the claim is entitled to price				
•	•			
Check this box if the claim includes int	terest or other charges in addition to the princi	pal amount of the	claim. Attach a state	ement that itemizes interest or charges.
2. Basis for Claim: Goods sold bu (See instruction #2)	t never delivered			
3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account a	s: 3b. Unifor	m Claim Identifier (	optional):
	(See instruction #3a)	(See instru	ction #3b)	
4. Secured Claim (See instruction #4)			'arrearage and othe secured claim, if ar	r charges, as of the time case was filed,
Check the appropriate box if the claim is				
setoff, attach required redacted documents	s, and provide the requested information.			\$
Nature of property or right of setoff: C Describe:	Real Estate	Basis for p	erfection:	
Value of Property: \$		Amount of	Secured Claim:	\$
Annual Interest Rate% ☐Fixed (when case was filed)	d or □Variable	Amount U	nsecured:	\$
5. Amount of Claim Entitled to Priority the priority and state the amount.	y under 11 U.S.C. § 507 (a). If any part of t	he claim falls in	to one of the following	ng categories, check the box specifying
☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	☐ Wages, salaries, or commissions (up earned within 180 days before the case w debtor's business ceased, whichever is ea 11 U.S.C. § 507 (a)(4).	as filed or the	☐ Contributions to employee benefit p 11 U.S.C. § 507 (a	olan —
☐ Up to \$2,775* of deposits toward	☐ Taxes or penalties owed to governmen	ntal units —	☐ Other – Specify	\$
purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507 (a)(7).	11 U.S.C. § 507 (a)(8).	u.113 —	applicable paragraj	ph of

\*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

B10 (Official Form 10) (04/13) 7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and the definition of "redacted".) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain: 8. Signature: (See instruction #8) Check the appropriate box. I am the creditor. ☐ I am the creditor's authorized agent. ☐ I am the trustee, or the debtor, ☐ I am a guarantor, surety, indorser, or other codebtor. or their authorized agent. (See Bankruptcy Rule 3005.) (See Bankruptcy Rule 3004.) I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief. Print Name: David Halligan Title: Company: Address and telephone number (if different from notice address above):

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

### INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

#### Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

email:

### Creditor's Name and Address:

Telephone number:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

## 1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

#### 2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor: State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

#### 3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

#### 3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

#### 4. Secured Claim:

claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

## 5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

#### 6. Credits:

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.

### 7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

### 8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

My Account HI DAVID Log Out Shopping Cart

MY ACCO				EDIT PROFILE	ADDRESS BOOK	K BILLI	BILLING INFORMATION	
ORDER HISTORY	All Time	<b>∨</b> 8	Sort By O	rder No	GO GO			
Order Number (Status)		Amount	Qty	Shipped	Remain	Avail	Date	
SO-0000491745 (Open)		\$191.94	6	0	6	0	10/6/15	
SO-0000434918 (Open)		\$155.98	3	0	3	0	1/19/14	
SO-0000419629 (Open)		\$99.99	1	0	1	0	7/28/13	
SO-0000417523 (Open)		\$319.96	4	0	4	0	7/7/13	
SO-0000403395 (Open)		\$679.96	4	0	4	0	1/25/13	
SO-0000371417 (Open)		\$209.97	3	0	3	0	1/8/12	
SO-0000370045 (Open)		\$220.00	4	0	4	0	12/21/11	
Total = \$ 1,877.80 (see also attached indidual sales orders for ead)								

В	ro	wse	·W	mes

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## **Store Hours**

Berkeley, CA 94710 Click here for directions Tuesday-Friday: 10am-6pm Saturday: 10am-5pm Sunday: Closed

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1011 University Avenue Berkeley, CA 94710

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

# Sales Order

Page: 1

Order Number: 0000491745 Order Date: 10/6/2015 Web Order No: 186585

Salesperson: KR Customer: dhalli

Customer PO:

Sold To Ship To

David Halligan 2043 Berryman St Berkeley, CA 94709 USA

David Halligan 2043 Berryman St Berkeley, CA 94709 USA

Contact: David Wayne Halligan Phone: (510) 528-3360 Ok for Paul Menkes or Simone Hoelck to pick up. This order has been paid by Visa - Thank You!

	Item	Ordered	Quantity Shipped	Unit Price	Amount
52881	2014 Kreuznacher Krötenpfuhl Riesling Kabinett, Donnhoff	3.00	0.00	19.99	59.97
52888	2014 Oberhäuser Brücke Riesling Spätlese, Donnhoff	3.00		43.99	131.97

Payments:	210.17			Net Order:	191.94
10/6/2015	AR0AC930572F	********7689	210.17	Freight: Sales Tax:	0.00
				USD	210.17

1011 University Avenue Berkeley, CA 94710

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

# Sales Order

Page: 1

Order Number: 0000434918 Order Date: 1/19/2014 Web Order No: 142800 Salesperson: MR

Customer: dhalli Customer PO:

Sold To Ship To

David Halligan 2043 Berryman St Berkeley, CA 94709 USA David Halligan 2043 Berryman St Berkeley, CA 94709 USA

Contact: David Wayne Halligan

Phone: (510) 528-3360

This order has been paid by Visa - Thank You!

Item		Ordered	Quantity Shipped	Unit Price	Amount
49277	2012 Chablis Bougros Cote de Bouguerots, Fevre	3.00	0.00	51.99	155.98

Payments: 170.02

Freight: 0.00

1/20/2014 VXYEB6933DBC \*\*\*\*\*\*\*\*\*\*\*7689 170.02

USD 170.02

1011 University Avenue Berkeley, CA 94710

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

Sales Order

Page: 1

Order Number: 0000419629 Order Date: 7/28/2013 Web Order No: 130965 Salesperson: MC

Customer: dhalli Customer PO:

Sold To Ship To

David Halligan 2043 Berryman St Berkeley, CA 94709 USA David Halligan 2043 Berryman St Berkeley, CA 94709 USA

Contact: David Wayne Halligan Phone: (510) 528-3360

	Item	Ordered	Quantity Shipped	Unit Price	Amount
48077	04 Dom Perignon	1.00	0.00	99.99	99.99 🗸

Darm antai	100.00			Net Order:	99.99 🗸
Payments: 7/29/2013	108.99 VLEE9D6FFFD7	*******7689	108.99	Freight: Sales Tax:	0.00 9.00
				USD	108.99

Subject: Premier Cru Order Acknowledgement

From:

Premier Cru (shipping@premiercru.net)

To:

HALLIDAVE@YAHOO.COM;

Date:

Sunday, July 7, 2013 8:21 PM

Thank you for your order!

We have received your order request SO-0000417523-129462.

qty	item	Wine	price	ext	status	/
4	47898	2012 Leoville las Cases		79.99	319.96 pre-arrival	<b>V</b>
n	1 4					

Bottles: 4

Subtotal: 319.96 Shipping: 0.00 Tax: 28.80 Total: 348.76

Ok for Paul Menkes or Simone Hoelck to pick up.

Please note:

We do not ship automatically upon order.

If you wish to arrange shipping, please contact us after receiving your order confirmation and we will schedule it.

We do not charge for shipping until your bottles ship out.

If you have any questions, please email us at info@premiercru.net or call us at 510-644-9463.

Premier Cru 1011 University Avenue Berkeley, CA 94710 (510) 644-9463

1011 University Avenue Berkeley, CA 94710

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

# Sales Order

Page: 1

Order Number: 0000403395 Order Date: 1/25/2013 Web Order No: 119206 Salesperson: JG Customer: dhalli

Customer PO:

Sold To Ship To

David Halligan 2043 Berryman St Berkeley, CA 94709 USA David Halligan 2043 Berryman St Berkeley, CA 94709 USA

Contact: David Wayne Halligan

Phone: (510) 528-3360

Ok for Paul Menkes to pick up.

This order has been paid by Visa - Thank You!

****	Item	Ordered	Quantity Shipped	Unit Price	Amount
44110	2010 Leoville las Cases	4.00	0.00	169.99	679.96

Fore (CAI!

				Net Order:	679.96
Payments: 1/25/2013	741.16 VXYEA534A1CC	***********0965	741.16	Freight: Sales Tax:	0.00 61.20
				USD	741.16

1011 University Avenue Berkeley, CA 94710

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# Sales Order

Page: 1

Order Number: 0000371417 Order Date: 1/8/2012 Web Order No: 90032 Salesperson: MC

Customer: dhalli Customer PO:

Sold To Ship To

David Halligan 2043 Berryman St Berkeley, CA 94709 USA David Halligan 2043 Berryman St Berkeley, CA 94709 USA

Contact: David Wayne Halligan

Phone: (510) 528-3360

	Item	Ordered	Quantity Shipped	Unit Price	Amount
45138	2010 Chablis les Clos, Fevre	3.00	0.00	69.99	209.97

Payments:	228.34 VKVE3CC940D2			Net Order:	209.97
1/9/2012		*******7689	228.34	Freight: Sales Tax:	0.00 18.37
				USD	228.34

1011 University Avenue Berkeley, CA 94710

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# Sales Order

Page: 1

Order Number: 0000370045 Order Date: 12/21/2011 Web Order No: 89190

Salesperson: PB Customer: dhalli Customer PO:

Sold To Ship To

David Halligan 2043 Berryman St Berkeley, CA 94709 USA David Halligan 2043 Berryman St Berkeley, CA 94709 USA

Contact: David Wayne Halligan

Phone: (510) 528-3360

Ok for Paul Menkes to pick up

This order has been paid by Visa - Thank You!

Item		Ordered		Quantity Shipped		Unit Price	Amount	
43895	2010 Croix de Labrie	4.00		0.00		55.00	220.00	

Payments:	239.25			Net Order:	220.00
12/21/2011	VXYE8B92064C	*********7689	239.25	Freight: Sales Tax:	0.00 19.25
				USD	239.25