• fit	10 and	1	<u>[</u>	\cap

Fill in this information to identify the case:				
Debtor 1 FOX ORTEGA ENTERPRISES				
Debtor 2 (Spouse, if filing)				
United States Bankruptcy Court for the Northern District of CALIFORNIA				
Case number 16-400.50				

Å	2015 APR -4 AM 10: 49
	US ENGLISHING DI COURT NATURA DI COURT CARDA DE CAR

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 0	Claim	
1.	Who is the current creditor?	Toseph Alesspudicity of the person or entity to be paid for this cl Name of the durrent creditor (the person or entity to be paid for this cl Other names the creditor used with the debtor	
2.	Has this claim been acquired from someone else?	No Ves. 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? \overline{Joseph} $\overline{Alessmudriwi}$ Name 11521 $\overline{Hemingway}$ \overline{Ja} . Number Street \overline{Number} Street \overline{Number} \overline{Street} \overline{Ja} \overline{Ja} \overline{Ja} \overline{City} \overline{Street} \overline{Ja} \overline{Ja} \overline{Ja} \overline{Ja} \overline{Ja} \overline{City} \overline{Street} \overline{Ja}	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone
4.	Does this claim amend one already filed?	➢KNo ☐ Yes. Claim number on court claims registry (if known)	Filed on
5.	Do you know if anyone else has filed a proof of claim for this claim?	Yes. Who made the earlier filing?	

Official Form 410

Proof of Claim

Case 16-40050 Claim 1509 Filed 04/04/16 Desc Main Document

page 1

Page 1 of 3

 Do you have any numbe you use to identify the debtor? 	Pr 🔀 No
7. How much is the claim?	 5,000,00 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. PURCHASE OF PRE-ARRIVAL WINCS
Is all or part of the claim secured?	 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 <i>Mortgage Proof of Claim</i> Attachment (Official Form 410-A) with this <i>Proof of Claim</i>. Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for property).
	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 necessary to cure any default as of the date of the petition: \$\$ Annual Interest Rate (when case was filed)% Fixed Variable
lease?	Yes. Amount necessary to cure any default as of the date of the petition. \$
right of setoff?	Yes. Identify the property:
ficial Form 410	Proof of Claim page 2

12. Is all or part of the claim	□ No	
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount	 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). 	\$ 5000,00
entitled to priority.	 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.

Sign Below Part 3:

The person completing this proof of claim must sign and date it. FRBP 9011(b).

I am the creditor.

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.

□ I am the creditor's attorney or authorized agent. I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

Check the appropriate box:

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 3-30-2016

Signature

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

DSODI SSANDRIN Middle name

Email

Title

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Contact phone

Company

Street A estor State 707-8594 EACATS @ AOL.COM

Official Form 410

3