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

**FILED** 

U.S. Bankruptcy Court Northern District of California

5/23/2016

Edward J. Emmons, Clerk

Official Form 410
Proof of Claim

04/16

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?	Dale Okuno  Name of the current creditor (the person or entity to be paid for this claim)						
or outloan							
	Other names the creditor used with the debtorNONE-						
2.Has this claim been acquired from someone else?	✓ No ☐ Yes. From whom?						
3.Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)					
	Dale Okuno	, 					
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	Name					
	265 S. Oakland Ave Pasadena, CA 91101						
	Contact phone626–585–3500 x7220	Contact phone					
	Contact email <u>daleokuno@gmail.com</u>	Contact email					
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):						
4.Does this claim amend one already filed?	<ul><li>✓ No</li><li>☐ Yes. Claim number on court claims registry (if known)</li></ul>	Filed on					
5 Do you know if anyone	· ☑ No	MM / DD / YYYY					
5.Do you know if anyone else has filed a proof of claim for this claim?	Yes. Who made the earlier filing?						

s sold, money loane ard. Attach redacted 3001(c).	No Yes. Attach statem other charges requ ed, lease, services d copies of any do	ent itemizing i ired by Bankru	nterest, fees, expenses, or uptcy Rule 3001(c)(2)(A).		
s sold, money loane ard. Attach redacted 3001(c). nformation that is er	other charges requ ed, lease, services d copies of any do	ired by Bankru performed, pe	nterest, fees, expenses, or uptcy Rule 3001(c)(2)(A).		
ard. Attach redacted 3001(c).  Information that is er	d copies of any do	performed, pe			
wiile Oldel9	mples: Goods sold, money loaned, lease, services performed, personal injury or wrongful th, or credit card. Attach redacted copies of any documents supporting the claim required by kruptcy Rule 3001(c). it disclosing information that is entitled to privacy, such as healthcare information.  Undelivered wine orders				
	s secured by the de		al residence, file a <i>Mortgage</i> –A) with this <i>Proof of Claim</i> .		
erfection:  cted copies of docu example, a mortga nat shows the lien h	ige, lien, certificate	of title, financ	ce of perfection of a security ing statement, or other		
operty:	\$		_		
the claim that is	\$		_		
the claim that is :	\$		(The sum of the secured and unsecured amounts should match the amount in line 7.)		
cessary to cure an petition:	ny default as of tl	he \$			
erest Rate (when ca	ase was filed)		%		
le					
nt necessary to cu	ure any default as	s of the date of	of the petition.\$		
y the property:					
11	···	int necessary to cure any default as	int necessary to cure any default as of the date o		

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12.Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<b>V</b>	No Yes. Check all that	t apply:			Amount entitled to priority
A claim may be partly priority and partly		☐ Domestic support under 11 U.S.C. §	t obligations (includes 507(a)(1)(A) or (a	ding alimony an a)(1)(B).	d child support)	\$
nonpriority. For example in some categories, the lawl imits the amount entitled to priority.		Up to \$2,850* of oproperty or service U.S.C. § 507(a)(7	ces for personal, fa	rchase, lease, mily, or househ	or rental of old use. 11	\$
onuned to phony.		☐ Wages, salaries, 180 days before t	•	tion is filed or t	he debtor's	\$
		☐ Taxes or penaltie 507(a)(8).		-	. , . ,	\$
		☐ Contributions to a	an employee benef	it plan. 11 U.S.	C. § 507(a)(5).	\$
		☐ Other. Specify su	bsection of 11 U.S	.C. § 507(a)(_)	that applies	\$
		* Amounts are subject to of adjustment.	adjustment on 4/01/19	and every 3 years	s after that for case	es begun on or after the date
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.	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  5/23/2016  MM / DD / YYYYY  /s/ Dale Okuno  Signature					
	Nar	t the name of the pers ne	Dale Okuno			
	Title	)	First name customer	Middle name	Last name	
	Cor	npany				
	Ado	Iress	Identify the conservicer  265 S. Oak		is the company if th	ne authorized agent is a
			Number Stro Pasadena, C			
City State ZIP Code  Contact phone 626–585–3500 x7220 Email daleokuno@gmail.com					ail.com	

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