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

5/24/2016

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 Clair	n					
1.Who is the current creditor?	Alvin Smith					
	Name of the current creditor (the person or entity to be pa	id 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?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)				
	Alvin Smith					
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	Name				
	125 Stacia St. Los Gatos, CA 95030					
	Contact phone	Contact phone				
	Contact email	Contact email				
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):					
4.Does this claim amend one already filed?	 No Yes. Claim number on court claims registry (if known) 	wn) Filed on				
5. Do you know if anyone	☑ No	MM / DD / YYYY				
else has filed a proof of claim for this claim?	Yes. Who made the earlier filing?					
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6.Do you have any number you use to identify the debtor?		No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
7.How much is the claim?	\$		Does this amount incl ☑ No	ude interest or other charges?			
			Yes. Attach stateme other charges requir	ent itemizing interest, fees, expenses, or red by Bankruptcy Rule 3001(c)(2)(A).			
8.What is the basis of the claim?	dea Bar	nth, or credit card. Attach reda hkruptcy Rule 3001(c).	acted copies of any doc	performed, personal injury or wrongful suments supporting the claim required by uch as healthcare information.			
9. Is all or part of the claim secured?		Yes. The claim is secured by Nature of property: Real estate. If the clai	im is secured by the det	btor's principal residence, file a <i>Mortgage</i> cial Form 410–A) with this <i>Proof of Claim</i> .			
		Basis for perfection:					
		Attach redacted copies of c interest (for example, a mo document that shows the li	rtgage, lien, certificate o	show evidence of perfection of a security of title, financing statement, or other corded.)			
		Value of property:	\$				
		Amount of the claim that secured:	is <u></u> \$				
		Amount of the claim that unsecured:	is <u></u>	(The sum of the secured an unsecured amounts should match the amount in line 7.)			
		Amount necessary to cure any default as of the date of the petition:					
		Annual Interest Rate (whe	en case was filed)	%			
		☐ Fixed☐ Variable					
10.Is this claim based on a lease?		No Yes. Amount necessary t	o cure any default as a	of the date of the petition.\$			
11.Is this claim subject to a right of setoff?		No Yes. Identify the property:					
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12.Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?		No Yes. <i>Check all that</i>	apply:	Amount entitled to priority				
A claim may be partly priority and partly nonpriority. For example in some categories, the lawl imits the amount entitled to priority.		Domestic support obligations (including alimony and child suppor under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).) \$				
		Up to \$2,850* of c property or servic U.S.C. § 507(a)(7	deposits toward purchase, lease, or rental of es for personal, family, or household use. 11).	\$ 2850.00				
		□ Wages, salaries, o 180 days before t		\$				
				\$				
		Contributions to a	n employee benefit plan. 11 U.S.C. § 507(a)(5).	\$				
		Other. Specify sul	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 after that for cases	s begun on or after the date				
Part 3: Sign Below								
The person completing this proof of claim must	Che	ck the appropriate bo	x:					
sign and date it. FRBP 9011(b).		I am the creditor.						
	I am the creditor's attorney or authorized agent.							
If you file this claim electronically, FRBP		I am the trustee, or th	he debtor, or their authorized agent. Bankruptcy R	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 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.							
A person who files a fraudulent claim could be	I have examined the information in this Proof of Claim and have a reasonable belief that the information is true							
fined up to \$500,000, imprisoned for up to 5 years, or both.	and correct. I declare under penalty of perjury that the foregoing is true and correct.							
18 U.S.C. §§ 152, 157 and 3571.	Exe	cuted on date	5/24/2016					
		-	MM / DD / YYYY					
	/s/ 1	Donald H. Cram						
	Sign	ature						
	Prin	t the name of the pers	son who is completing and signing this claim:					
N T C		ne	Donald H. Cram	Donald H. Cram				
			First name Middle name Last name					
		;	Attorney for Creditor Alvin Smith	Attorney for Creditor Alvin Smith				
		npany	Severson & Werson	Severson & Werson				
			Identify the corporate servicer as the company if the servicer	he authorized agent is a				
		ress	One Embarcadero Center, Suite 2600					
			Number Street					
			San Francisco, CA 94111					
			City State ZIP Code					
	Cor	itact phone 415-3	198–3344 Email dhc@severson.co	om				

Official Form 410

Proof of Claim

	Unit Price	Qty	Shipped	Remain		Order Number (Status)	Date
2005 Vieux Chateau Certan, 250 ml	\$159.95	12		10		0.0	
201 JIENA CHRIERA CELTRUNE SAL	\$159.95	12	0	12	12	<u>\$Q:</u> 0000262999 (Open)	4/23/0
					a at		