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 paid 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	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)				
and payments to the creditor be sent?	Alvin Smith	·				
Federal Rule of	Name	Name				
Bankruptcy Procedure (FRBP) 2002(g)	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?						
5 Da		MM / DD / YYYY				
5.Do you know if anyone else has filed a proof of claim for this claim?	 ✓ No ☐ Yes. Who made the earlier filing? 					
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Part 2: Give Information	Abou	It the Claim as of the Date	the Case Was Filed				
6.Do you have any number you use to identify the debtor?	Y	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?	\$	4938.18 Does this amount include interest or other charges?					
			other charges require	nt itemizing interest, fees, expenses, or ed by Bankruptcy Rule 3001(c)(2)(A).			
8.What is the basis of the claim?	deat Ban	th, or credit card. Attach reda kruptcy Rule 3001(c).	acted copies of any docu	erformed, personal injury or wrongful uments supporting the claim required by ch as healthcare information.			
		Purchases of wine					
9. Is all or part of the claim secured?		Yes. The claim is secured by Nature of property: □ Real estate. If the clai	m is secured by the deb	tor's principal residence, file a <i>Mortgage</i> al 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 c	how evidence of perfection of a security f title, financing statement, or other orded.)			
		Value of property:	\$				
		Amount of the claim that secured:	is _{\$}				
		Amount of the claim that unsecured:	is <u></u> \$	(The sum of the secured and unsecured amounts should match the amount in line 7.)			
		Amount necessary to cure any default as of the s					
		Annual Interest Rate (whe	en case was filed)	%			
		☐ Fixed☐ Variable					
10.Is this claim based on a lease?		No Yes. Amount necessary t e	o cure any default as o	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)?	□ ▼					
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 support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).		\$		
		Up to \$2,850* of deposits property or services for p U.S.C. § 507(a)(7).	\$ 2850.00			
		□ Wages, salaries, or comr 180 days before the bank	nissions (up to \$12,850*) earned within kruptcy petition is filed or the debtor's er is earlier. 11 U.S.C. § 507(a)(4).	\$		
		Taxes or penalties owed 507(a)(8).	to governmental units. 11 U.S.C. §	\$		
		Contributions to an emplo	\$			
	□ Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies					
		* Amounts are subject to adjustme of adjustment.	ent on 4/01/19 and every 3 years after that for case	es begun on or after the date		
Part 3: Sign Below						
The person completing this proof of claim must	Che	ck the appropriate box:				
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 the debtor, or their authorized agent. Bankruptcy 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 fined up to \$500,000, imprisoned for up to 5 years, or both.	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.					
18 U.S.C. §§ 152, 157 and 3571.	Executed on date 5/24/2016					
	2/10	5/24/201				
	MM / DD / YYYY					
	/s/ I	Donald H. Cram				
	Sign	ature				
	Print	t the name of the person who	is completing and signing this claim:			
	Name		Donald H. Cram			
			First name Middle name Last name			
	Title		Attorney for Creditor Alvin Smith			
Company		Severson & Werson				
			Identify the corporate servicer as the company if servicer	the authorized agent is a		
	Address		One Embarcadero Center, Suite 2600			
			Number Street			
			San Francisco, CA 94111			
			City State ZIP Code			
	Con	tact phone 415-398-334	– "	com		

Official Form 410

Proof of Claim

Item	Unit Price	Qty	Shipped	Remain	Avail	Order Number (Status)	Date
2005 Ermitage Payllion, Chapoutier, 750 ml	\$179.95	12	0	12	12	<u>SO-</u> 0000247993 (Open)	12/22/06