Fill in this	information to identify the case:
Debtor 1	Fox Ortega Enterprises, Inc. dbd Premier Cru
Debtor 2 (Spouse, if filin	g)
United States	Bankruptcy Court for the: Northern District of California
Case numbe	16-40050 WJL 7

BANKRUPTCY COURT OAKLAND, CALIFORNIA

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	Claim							
 Who is the current creditor? 	Louis F Ray, III							
	Name of the current credi	Name of the current creditor (the person or entity to be paid for this claim)						
	Other names the creditor	used with the deb	tor					
 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	s to the credito	or be sent?	Where should pa different)	Where should payments to the creditor be sent? (if different)			
Federal Rule of	Louis F Ray, III							
Bankruptcy Procedure	Name			Name				
(FRBP) 2002(g)	4451 North Mozar	t Street						
	Number Street			Number Stree	t			
	Chicago	<u> </u>	60625					
	City	State	ZIP Code	City	State	ZIP Code		
	Contact phone (312) 3	39-1217		Contact phone				
	Contact email Iray445	1@gmail.co	<u>m</u>	Contact email		<u> </u>		
	Uniform claim identifier for		nts in chapter 13 (if you us	•				
Does this claim amend one already filed?	☑ No ☐ Yes. Claim numbe	r on court claim	s registry (if known)		Filed on MM / DD) / YYYY		
 Do you know if anyone else has filed a proof of claim for this claim? 	Yes Who made th	e earlier filing?						

Case 16-40050 Claim 2241
Official Form 410

Proof of Claim

Filed 06/17/16 Desc Main Document

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Do you have any number ☐ No you use to identify the Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 6 9 4 4 debtor? $90\underline{0.00}$. Does this amount include interest or other charges? 7. How much is the claim? ☑ No Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A). What is the basis of the Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. claim? 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. Goods Sold ☑ No Is all or part of the claim secured? Yes. The claim is secured by a lien on property. Nature of property: oxdot Real estate. If the claim is secured by the debtor's principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim. ■ Motor vehicle Other. Describe: Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for 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 of the claim that is secured: Amount of the claim that is unsecured: \$____ (The sum of the secured and 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 (when case was filed)_____ ☐ Fixed ☐ Variable 10. Is this claim based on a ☑ No lease? Yes. Amount necessary to cure any default as of the date of the petition. 11. Is this claim subject to a ☑ No right of setoff? ☐ Yes. Identify the property: _ Case 16-40050 Claim 2241 Filed 06/17/16 Desc Main Document Page 2 of 4

Give Information About the Claim as of the Date the Case Was Filed

Part 2:

12. Is all or part of the claim entitled to priority under	☑ No ☐ Yes Chec	k all that apply:			Amount entitled to priorit			
11 U.S.C. § 507(a)? A claim may be partly	Domes 11 U.S	\$						
priority and partly nonpriority. For example, in some categories, the law limits the amount	☐ Up to \$	vices for \$						
entitled to priority.	☐ Wages bankru 11 U.S	fore the :						
			o governmental units. 11 t	J.S.C. § 507(a)(8).	\$			
	☐ Contrib	utions to an employ	yee benefit plan. 11 U.S.C	c. § 507(a)(5).	\$			
	_		of 11 U.S.C. § 507(a)()		\$			
		,			un on or after the date of adjustment.			
Part 3: Sign Below								
The person completing this proof of claim must	Check the appr	opriate box:						
sign and date it.	I am the cr							
FRBP 9011(b).		editor's attorney or	=					
If you file this claim electronically, FRBP			, or their authorized agent					
5005(a)(2) authorizes courts	am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.							
to establish local rules specifying what a signature								
is.	I understand the	at an authorized sig	nature on this <i>Proof of Cl</i> a ave the debtor credit for a	aim serves as an acknow	ledgment that when calculating the ward the debt.			
A person who files a								
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examine and correct.	d the information in	this <i>Proof of Claim</i> and ha	ave a reasonable belief th	nat the information is true			
years, or both. 18 U.S.C. §§ 152, 157, and	l declare under	penalty of perjury th	hat the foregoing is true a	nd correct.				
3571.	Executed on da	te 03/21/2016						
	Executed an da	``-			e e estados e e e e e e e e e e e e e e e e e e e			
	Signature							
	Print the name of the person who is completing and signing this claim:							
		Louis	F.	ľ	Ray, III			
	Name	First name	Middle nan		ast name			
	Title							
	Company	Linutify the course	ate servicer as the company	if the authorized agent is a s	ondoor			
		identity the corpor	ate servicer as the company	Tithe authorized agent is a si	ervicer.			
	Address	4451 North N	Mozart Street					
	Address		Street					
		Chicago		IL	60625			
		City		State Z	IP Code			
	Contact phone	(312) 339-12	217	Email Irav44	51@gmail.com			
	2011100 PITOTIO	· - / / / -	-					

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PREMIER CRU

1011 University Avenue Berkeley, CA 94710

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

Sales Order

Page:

Order Number: 0000459360 Order Date: 10/27/2014 Web Order No: 161101

Salesperson: MR Customer: 46944

Customer PO:

Sold To Ship To

Louis Ray 4451 North Mozart St Chicago, IL 60625 USA

Louis Ray 4451 North Mozart St Chicago, IL 60625 USA

Contact: Louis F Ray Phone: (312) 339-1217

This order has been paid by Visa - Thank You!

Item		Ordered	Quantity Shipped		Unit Price	Amount
51008	2010 Grange Hermitage, Penfolds	2.00	0.00		450.00	900.00

Payments:	900.00			Net Order:	900.00
10/27/2014	VQEAB55D31D6			Freight: Sales Tax:	0.00
	- Caea 16 400E0	Claim 2241	Filed 06/17/1	S Dosc Main Document USD go 4 of 4	900.00