

Fill in this information to identify the case:

Debtor 1 FRESH ACQUISITIONS, LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: **Northern District of Texas**

Case number 21-30721-HDH

1ST AMENDED

Official Form 410

Proof of Claim

04/16

Part 1: Identify the Claim

1. Who is the current creditor?	CITY OF GARLAND 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. 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? LINDA D. REECE Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>1919 S. SHILOH ROAD, SUITE 640, LB 40</u> Number Street GARLAND TX 75042 City State ZIP Code Contact phone <u>(972) 278-8282</u> Contact email <u>LReece@pbfc.com</u>	Where should payments to the creditor be sent? (if different) CITY OF GARLAND Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>1919 S. SHILOH ROAD, SUITE 640, LB 40</u> Number Street Garland TX 75042 City State ZIP Code Contact phone _____ Contact email _____ Uniform claim identifier for electronic payments in chapter 13 (if you use one): None -----
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>3</u> Filed on <u>4/23/2021</u> MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

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:
Please see attached statement.

7. How much is the claim? \$3,279.54 . Does this amount include interest or other charges?
☐ No
☒ Yes. Tax statements on which this claim is founded are attached.

8. What is the basis of the claim?

Ad Valorem Property Taxes

9. Is all or part of the claim secured? ☒ No
☐ Yes.

Nature of property:

☐ Real estate.

☐ Motor vehicle

☐ Other. Describe: _____

Basis for perfection: _____

Value of property: Fully Secured

Amount of the claim that is secured: \$0.0

Amount of the claim that is unsecured: \$3,279.54 (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) 12 %

☒ Fixed Pursuant to 11 U.S.C. § 511, the rate determined under applicable nonbankruptcy law is set out in Texas Property Tax Code § 33.01
☐ Variable

10. Is this claim based on a lease? ☒ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☒ No
☐ Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☐ No
☒ Yes.

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).
to the extent of any shortfall in collateral value, and for personal liability.

\$3,279.54

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.

Check the appropriate box:

☒ I am the creditor's attorney or authorized agent.

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 12/6/2021
MM / DD / YYYY



Signature

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

Name	LINDA D. REECE		
	First name	Middle name	Last name
Title	Attorney for Claimant		
Company	Perdue, Brandon, Fielder, Collins & Mott, L.L.P.		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	1919 S. SHILOH ROAD, SUITE 640, LB 40		
	Number	Street	
	GARLAND		
	City	State	ZIP Code
	(972) 278-8282	TX	75042
Contact phone		Email	LReece@pbfc.com

Tax Statement

CITY OF GARLAND

P. O. BOX 462010
GARLAND, TX 75046-2010

FRESH ACQUISITIONS LLC
ATTN LEGAL REAL ESTATE DEPT
2338 N LOOP 1604 W, SUITE 350
SAN ANTONIO, TX 78248-4521

Taxpayer ID: 45013

IF YOU ARE 65 YEARS OF AGE OR OLDER OR ARE DISABLED AND YOU OCCUPY THE PROPERTY DESCRIBED IN THIS DOCUMENT AS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE APPRAISAL DISTRICT REGARDING ANY ENTITLEMENT YOU MAY HAVE TO A POSTPONEMENT IN THE PAYMENT OF THESE TAXES.

	Tax Year	Tax Due	P and I	Total Due
CITY OF GARLAND				
Legal: PERSONAL PROPERTY FURRS #148				
GEO Code: 99000000061730000				
Client Property Code: 0000248034				
	2020	\$1,416.29	\$470.21	\$1,886.50
	2021	\$1,393.04	\$0.00	\$1,393.04
CITY OF GARLAND TOTAL -->				\$3,279.54
Total If Paid By 4/30/2021				\$3,279.54

Northern District of Texas Claims Register

[21-30721-sgj11 Fresh Acquisitions, LLC](#)

Judge: Stacey G. Jernigan

Chapter: 11

Office: Dallas

Last Date to file claims: 08/30/2021

Trustee:

Last Date to file (Govt): 11/29/2021

Creditor: (19402158)

Claim No: 3

Status:

City of Garland

Original Filed

Filed by: CR

c/o Perdue Brandon Fielder et al

Date: 04/23/2021

Entered by: Linda D. Reece

1919 S. Shiloh Road, Suite 310,

Original Entered

Modified:

LB 40

Date: 04/23/2021

Garland, TX 75042

Last Amendment

Filed: 12/06/2021

Last Amendment

Entered: 12/06/2021

Amount claimed: \$3279.54

Priority claimed: \$3279.54

History:

[Details](#) [3-1](#) 04/23/2021 Claim #3 filed by City of Garland, Amount claimed: \$3444.42 (Reece, Linda)

[Details](#) [3-2](#) 12/06/2021 Amended Claim #3 filed by City of Garland, Amount claimed: \$3279.54 (Reece, Linda)

[Details](#) [3-3](#) 12/06/2021 Amended Claim #3 filed by City of Garland, Amount claimed: \$3279.54 (Reece, Linda)

Description: (3-2) 1ST AMENDED PROOF OF CLAIM

(3-3) 2ND AMENDED PROOF OF CLAIM

Remarks:

Claims Register Summary

Case Name: Fresh Acquisitions, LLC

Case Number: 21-30721-sgj11

Chapter: 11

Date Filed: 04/20/2021

Total Number Of Claims: 1

Total Amount Claimed*	\$3279.54
Total Amount Allowed*	

*Includes general unsecured claims

The values are reflective of the data entered. Always refer to claim documents for actual amounts.

	Claimed	Allowed
Secured		
Priority	\$3279.54	
Administrative		

Fill in this information to identify the case:

Debtor 1 FRESH ACQUISITIONS, LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the **Northern District of Texas**

Case number 20-30721-HDH

RECEIVED

APR 27 2021

BMC GROUP

Official Form 410

Proof of Claim

04/16

Part 1: Identify the Claim

1. Who is the current creditor?	CITY OF GARLAND 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. 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? LINDA D. REECE Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>1919 S. SHILOH ROAD, SUITE 310, LB 40</u> Number Street GARLAND TX 75042 City State ZIP Code Contact phone <u>(972) 278-8282</u> Contact email <u>LReece@pbfc.com</u>	Where should payments to the creditor be sent? (if different) CITY OF GARLAND Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>1919 S. SHILOH ROAD, SUITE 310, LB 40</u> Number Street Garland TX 75042 City State ZIP Code Contact phone _____ Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (if you use one): None -----		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on MM / DD / YYYY	
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FRESH POC



00015

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:	Please see attached statement.
7. How much is the claim?	\$3,444.42	Does this amount include interest or other charges? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Tax statements on which this claim is founded are attached.
8. What is the basis of the claim?	Ad Valorem Property Taxes	
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim secured by statutory tax lien provided by Sections 32.01 and 32.05 of the Texas Property Tax Code and Art. 8, Section 15 of the Texas Constitution.	
	Nature of property: <input type="checkbox"/> Real estate. <input type="checkbox"/> Motor vehicle <input checked="" type="checkbox"/> Other. Describe: <u>Personal Property</u>	
	Basis for perfection: <u>The debt is incurred January 1st of each year pursuant to Sections 32.01, 32.05, and 32.07 of the Texas Property Tax Code and is automatically perfected as a matter of law.</u>	
	Value of property: <u>Fully Secured</u> Amount of the claim that is secured: <u>\$3,444.42</u> 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) <u>12%</u> <input checked="" type="checkbox"/> Fixed Pursuant to 11 U.S.C. § 511, the rate determined under applicable <input type="checkbox"/> Variable nonbankruptcy law is set out in Texas Property Tax Code § 33.01	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____	
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☐ Yes.

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\$0.00

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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 4/23/2021

MM / DD / YYYY



Signature

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

Name LINDA D. REECE

First name

Middle name

Last name

Title

Attorney for Claimant

Company

Perdue, Brandon, Fielder, Collins & Mott, L.L.P.

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

Address

1919 S. SHILOH ROAD, SUITE 310, LB 40

Number

Street

GARLAND

TX

75042

City

State

ZIP Code

Contact phone

(972) 278-8282

Email

LReece@pbfc.com

Tax Statement

CITY OF GARLAND

P. O. BOX 462010
GARLAND, TX 75046-2010

FRESH ACQUISITIONS LLC
ATTN LEGAL REAL ESTATE DEPT
2338 N LOOP 1604 W, SUITE 350
SAN ANTONIO, TX 78248-4521

Taxpayer ID: 45013

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GEO Code: 990000000061730000				
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2021	\$1,557.92	\$0.00	\$1,557.92	
CITY OF GARLAND TOTAL -->				\$3,444.42
Total If Paid By 4/30/2021				\$3,444.42

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Office: Dallas

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Last Date to file (Govt): 11/29/2021

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1919 S. Shiloh Road, Suite 310,

Original Entered

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LB 40

Date: 04/23/2021

Garland, TX 75042

Amount claimed: \$3444.42

Secured claimed: \$3444.42

History:

Details 3-1 04/23/2021 Claim #3 filed by City of Garland, Amount claimed: \$3444.42 (Reece, Linda)

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Total Amount Allowed*	

*Includes general unsecured claims

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Administrative		