

Fill in this information to identify the case:

Debtor 1 Hometown Buffet, Inc.

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Western District of Texas, Austin Division

Case number 5:16-bk-50557

E-Filed on 05/04/2021
Claim # 40

Official Form 410

Proof of Claim

04/19

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?** City of Santa Maria
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 and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
	<u>Ricky Hawblitzel</u> Name <u>110 E COOK ST RM 6</u> Number Street <u>SANTA MARIA CA 93454</u> City State ZIP Code Contact phone <u>(805) 925-0951 x2368</u> Contact email <u>rhawblitzel@cityofsantamaria.org</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): -----	_____ Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email

4. **Does this claim amend one already filed?** No
 Yes. Claim number on court claims registry (if known) _____ Filed on _____
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? _____

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: _____

7. How much is the claim? \$ 22,786.63. Does this amount include interest or other charges?
 No
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. 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

9. Is all or part of the claim secured? No
 Yes. The claim is secured by a lien on property.
Nature of property:
 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 lease? No
 Yes. Amount necessary to cure any default as of the date of the petition. \$ 0.00

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. Check one:

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

Wages, salaries, or commissions (up to \$13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

Amount entitled to priority

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

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.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

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 05/04/2021
MM / DD / YYYY

Ricky Hawblitzel

Signature

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

Name Ricky Hawblitzel
First name Middle name Last name

Title Utility Billing Manager

Company City of Santa Maria
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____
Number Street

City State ZIP Code

Contact phone _____ Email _____

Attachment 1 - accounthisotry.pdf

Description - Account Detail

Customer #: 00078760	Customer Status:	On Account: 0.00
Customer Type:	Setup Date: 3/8/2012	Balance Due: 17,211.21
Name: HOMETOWN BUFFET #785,	Cash Only: N	Document Delivery Method: None selected
Spouse: N/A	Home Phone: (210) 403-3725	Drivers License #:
Care Of:	Work Phone:	State:
Address: 120 CHULA VIS HOLLYWOOD PARK, TX 78232	Cellular Phone:	
Email:	Fax:	
	Web Site:	

Customer Autopay Information

Use Autopay: Yes	Bank Account #: 9361133927	Prenote Date: 9/2/2016
Account Type: C	Bank ABA #: 122106015	Autopay Limit: None

Account Balance Information

<u>Account #</u>	<u>Status</u>	<u>Service Type</u>	<u>Cycle</u>	<u>Previous Balance</u>	<u>Current Balance</u>	<u>Balance Due</u>
20-95-2980-2	closed	Misc	Books 95 - 97	6,082.53		6,082.53
		Refuse		2,937.19	211.50	3,148.69
		Sewer A		1,815.25	108.65	1,923.90
		Water		5,675.97	380.12	6,056.09
Totals :				16,510.94	700.27	17,211.21

Fee Information

<u>Account # / Service Location</u>	<u>Service Type</u>	<u>Fee Code</u>	<u>Fee Description</u>	<u>Units</u>	<u>Start Date</u>	<u>End Date</u>	<u>Balance</u>
20-95-2980-2							
1431 S BRADLEY RD	Misc	nsf	Non Sufficient Funds	1.00	5/17/2020	5/17/2020	3,107.69
		nsf	Non Sufficient Funds	1.00	5/24/2020	5/24/2020	2,924.84
		rc fee	Returned Check Fee	1.00	5/17/2020	5/17/2020	25.00
		rc fee	Returned Check Fee	1.00	5/24/2020	5/24/2020	25.00
	Refuse	306	6 Cubic Yard-City Owned	1.00	5/2/2015	3/23/2020	483.79
		306	6 Cubic Yard-City Owned	1.00	3/24/2020	1/29/2021	2,664.90
	Sewer A	013	Restaurant with Pretreatment Device - C	1.00			1,923.90
	Sewer B	000	No Sewer Service	0.00			0.00
	Water	005	2" Water Meter	1.00			6,056.09

Meter Information

<u>Service Location</u>	<u>Meter Serial #</u>	<u>Brand</u>	<u>Usage Type</u>	<u>Meter Size</u>	<u>Meter Information</u>
1431 S BRADLEY RD	01000117	METRON	water	2.00	i01

Name: HOMETOWN BUFFET #785,

Customer #: 00078760

(continued)

Transaction History Information

<u>Account #</u>	<u>Transaction Date</u>	<u>Transaction Type</u>	<u>Document #</u>	<u>Amount</u>	<u>Running Balance</u>
20-95-2980-2	01/29/2021	Closing Bill	07018708	700.27	17,211.21
	01/20/2021	Bill	07017636	751.83	16,510.94
	12/23/2020	Bill	06994860	471.78	15,759.11
	11/25/2020	Bill	06972081	479.20	15,287.33
	10/21/2020	Bill	06949204	1,038.03	14,808.13
	09/23/2020	Bill	06926268	1,109.58	13,770.10
	08/26/2020	Bill	06903513	1,101.63	12,660.52
	07/22/2020	Bill	06880684	1,133.43	11,558.89
	06/24/2020	Bill	06857636	1,157.28	10,425.46
	05/27/2020	Bill	06835774	2,949.84	9,268.18
	05/20/2020	Bill	06834809	1,189.08	6,318.34
	05/19/2020	Bill	06829888	3,132.69	5,129.26
	04/22/2020	Bill	06812025	1,996.57	1,996.57
	04/17/2020	Receipt	06807823	2,924.84	0.00
	03/25/2020	Bill	06789265	2,924.84	2,924.84
	03/21/2020	Receipt	06787394	3,107.69	0.00
	02/26/2020	Bill	06766468	3,107.69	3,107.69
	02/14/2020	Receipt	06761171	3,277.27	0.00
	01/22/2020	Bill	06743342	3,277.27	3,277.27
	01/17/2020	Receipt	06738875	3,173.41	0.00
	12/23/2019	Bill	06720024	3,173.41	3,173.41
	12/13/2019	Receipt	06712829	3,194.19	0.00
	11/20/2019	Bill	06696732	3,194.19	3,194.19
	11/15/2019	Receipt	06690388	3,152.64	0.00
	10/23/2019	Bill	06673417	3,152.64	3,152.64
	10/18/2019	Receipt	06666182	3,183.80	0.00
	09/26/2019	Bill	06650240	3,183.80	3,183.80
	09/13/2019	Receipt	06638823	3,256.50	0.00
	08/22/2019	Bill	06626710	3,256.50	3,256.50
	08/16/2019	Receipt	06616328	3,225.34	0.00
	07/25/2019	Bill	06603253	3,225.34	3,225.34
	07/19/2019	Receipt	06592271	3,339.59	0.00
	06/27/2019	Bill	06580155	3,339.59	3,339.59
	06/14/2019	Receipt	06565744	3,318.82	0.00
	05/22/2019	Bill	06556700	3,318.82	3,318.82
	05/17/2019	Receipt	06543734	3,235.73	0.00

Name: HOMETOWN BUFFET #785,

Customer #: 00078760

(continued)

On-Account Transactions

No transaction data

Customer #: 00078761	Customer Status:	On Account: 0.00
Customer Type:	Setup Date: 3/8/2012	Balance Due: 5,575.42
Name: HOMETOWN BUFFET #785-LS,	Cash Only: N	Document Delivery Method: None selected
Spouse: N/A	Home Phone: (210) 403-3725	Drivers License #:
Care Of:	Work Phone:	State:
Address: 120 CHULA VIS HOLLYWOOD PARK, TX 78232	Cellular Phone:	
Email:	Fax:	
	Web Site:	

Customer Autopay Information

Use Autopay: Yes	Bank Account #: 9361133927	Prenote Date: 9/2/2016
Account Type: C	Bank ABA #: 122106015	Autopay Limit: None

Account Balance Information

<u>Account #</u>	<u>Status</u>	<u>Service Type</u>	<u>Cycle</u>	<u>Previous Balance</u>	<u>Current Balance</u>	<u>Balance Due</u>
20-95-2981-2	closed	Misc	Books 95 - 97	999.10		999.10
		Water		4,470.75	105.57	4,576.32
Totals :				5,469.85	105.57	5,575.42

Fee Information

<u>Account # / Service Location</u>	<u>Service Type</u>	<u>Fee Code</u>	<u>Fee Description</u>	<u>Units</u>	<u>Start Date</u>	<u>End Date</u>	<u>Balance</u>
20-95-2981-2							
1431 S BRADLEY RD	Misc	nsf	Non Sufficient Funds	1.00	5/17/2020	5/17/2020	490.45
		nsf	Non Sufficient Funds	1.00	5/24/2020	5/24/2020	458.65
		rc fee	Returned Check Fee	1.00	5/17/2020	5/17/2020	25.00
		rc fee	Returned Check Fee	1.00	5/24/2020	5/24/2020	25.00
	Refuse	000	No Refuse Service	0.00			0.00
	Sewer A	000	No Sewer Service	1.00			0.00
	Sewer B	000	No Sewer Service	0.00			0.00
	Water	004	1 1/2" Water Meter	1.00			4,576.32

Meter Information

<u>Service Location</u>	<u>Meter Serial #</u>	<u>Brand</u>	<u>Usage Type</u>	<u>Meter Size</u>	<u>Meter Information</u>
1431 S BRADLEY RD	90299640	OMNI	water	1.50	i01

Name: HOMETOWN BUFFET #785-LS,

Customer #: 00078761

(continued)

Transaction History Information

<u>Account #</u>	<u>Transaction Date</u>	<u>Transaction Type</u>	<u>Document #</u>	<u>Amount</u>	<u>Running Balance</u>
20-95-2981-2	01/29/2021	Closing Bill	07018709	105.57	5,575.42
	01/20/2021	Bill	07017637	130.90	5,469.85
	12/23/2020	Bill	06994861	251.95	5,338.95
	11/25/2020	Bill	06972082	532.85	5,087.00
	10/21/2020	Bill	06949205	538.15	4,554.15
	09/23/2020	Bill	06926269	554.05	4,016.00
	08/26/2020	Bill	06903514	543.45	3,461.95
	07/22/2020	Bill	06880685	532.85	2,918.50
	06/24/2020	Bill	06857637	527.55	2,385.65
	05/27/2020	Bill	06835775	483.65	1,858.10
	05/20/2020	Bill	06834810	463.95	1,374.45
	05/19/2020	Bill	06829886	515.45	910.50
	04/22/2020	Bill	06812026	395.05	395.05
	04/17/2020	Receipt	06807824	458.65	0.00
	03/25/2020	Bill	06789266	458.65	458.65
	03/21/2020	Receipt	06787395	490.45	0.00
	02/26/2020	Bill	06766469	490.45	490.45
	02/14/2020	Receipt	06761172	368.89	0.00
	01/22/2020	Bill	06743343	368.89	368.89
	01/17/2020	Receipt	06738876	434.62	0.00
	12/23/2019	Bill	06720025	434.62	434.62
	12/13/2019	Receipt	06712830	530.24	0.00
	11/20/2019	Bill	06696733	530.24	530.24
	11/15/2019	Receipt	06690389	524.26	0.00
	10/23/2019	Bill	06673418	524.26	524.26
	10/18/2019	Receipt	06666183	536.21	0.00
	09/26/2019	Bill	06650241	536.21	536.21
	09/13/2019	Receipt	06638824	476.45	0.00
	08/22/2019	Bill	06626711	476.45	476.45
	08/16/2019	Receipt	06616329	398.77	0.00
	07/25/2019	Bill	06603254	398.77	398.77
	07/19/2019	Receipt	06592272	255.34	0.00
	06/27/2019	Bill	06580156	255.34	255.34
	06/14/2019	Receipt	06565745	177.65	0.00
	05/22/2019	Bill	06556701	177.65	177.65
	05/17/2019	Receipt	06543735	171.68	0.00

Name: HOMETOWN BUFFET #785-LS,

Customer #: 00078761

(continued)

On-Account Transactions

No transaction data