Fill in this information to identify the case:

OCB Restaurant Company, LLC Debtor 1 Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Northern District of Texas, Dallas Division

Case number 21-30726-11

Official Form 410

Proof of Claim

E-Filed on 05/11/2021 Claim # 58

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?	Tennessee Department of Revenue 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?	Vo Ves. From whom?						
3.	Where should notices and payments to the	Where should notices to the creditor be sent?			Where should payments to the creditor be sent? (if different)			
	creditor be sent?	TDOR c/o Attorne	v General					
	Federal Rule of Bankruptcy Procedure	TDOR c/o Attorney General Name			Name			
	(FRBP) 2002(g)	PO Box 20207						
		Number Street			Number Stre	eet		
		Nashville	TN	37202				
		City	State	ZIP Code	City	State	ZIP Code	
		Contact phone			Contact phone			
		Contact email			Contact email		_	
		Uniform claim identifier for	r electronic paymen 	ıts in chapter 13 (if you u 	se one): 			
4.	Does this claim amend one already filed?	☑ No☑ Yes. Claim number	er on court claims	s registry (if known)		Filed on	/ YYYY	
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Ves. Who made the	ne earlier filing?					

Official Form 410

δ.	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: <u>9</u> <u>5</u> <u>2</u> <u>4</u>
	How much is the claim?	 \$
	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.
	Is all or part of the claim	
	secured?	 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
0.	. Is this claim based on a	No No
	lease?	☐ Yes. Amount necessary to cure any default as of the date of the petition. \$\$
1.	Is this claim subject to a	No No
	right of setoff?	Yes. Identify the property:

11 U.S.C. § 507(a)7 Amount entitlet to priority Amount entitlet to priority A claim may be party propriority, Prosentiple, in some categories, in- law limits the amount entitled to priority. Domestic support obligations (including alimony and oblid support) under 11 U.S.C. § 507(a)(1,10) or (a)(1)(8). s 0.00 W the State manual entitled to priority. W to \$3.025° of depolate toward purchase, lease, or rental of property or services for the submission persons (f. Smithy) or household user 11 U.S.C. § 507(a)(0). s 0.00 W tages, status, or commissions (up to \$1.550°) comed within 180 days before the bankrupper persons (f. Smithy), or household user, 11 U.S.C. § 507(a)(0). s 28.28.294.15 Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(0). s 0.00 Others: Specify subsection of 11 U.S.C. § 507(a)(0). s 0.00 The person completing the parsen completing submission field of the adjustment on 401/22 and every 3 years after that for cases begun on or after the date of adjustment. I am the creditor. If and the creditor. I am the creditor. I am the creditor. I am the creditor. If and the creditor is attorney or authorized agent. I am dura creditor. I am the creditor. If and the creditor is attorney or authorized agent. I am dura creditor. I am the creditor. If and the creditor is attorney or authorized agent. I	12. Is all or part of the claim	D No					
priority and party incorports, Provempte, in some categories, the law limits the nonunt control to priority. 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$	entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:			Amount entitled to priority		
in action categories, the amount entitled to provide. □ Up to \$30,25° of deposite toward purchase, lease, or remain of property or services for sentities of the amount entitled to provide. \$ 0.00 is within the amount entitled to provide. □ Up to \$30,25° of deposite toward purchase, lease, or remain of property or services for sentities or personal, flawl, or household use, 11 U.S. C \$507(k)(2). \$ 0.00 is within the amount entities or the debtor's business ends, whichever is earlier. \$ 0.00 if Taxes or penalties owed to governmental units. 11 U.S. C \$507(k)(2). \$ 28.294.15 is contributions to an employee benefit plan. 11 U.S. C \$507(k)(2). \$ 28.294.15 is contributions to an employee benefit plan. 11 U.S. C \$507(k)(2). \$ 0.00 is contributions to an employee benefit plan. 11 U.S. C \$507(k)(2). \$ 0.00 is contributions to an employee benefit plan. 11 U.S. C \$507(k)(2). \$ 0.00 is contributions to an employee benefit plan. 11 U.S. C \$507(k)(2). \$ 0.00 is contributions to an employee benefit plan. 11 U.S. C \$507(k)(2). \$ 0.00 is contributions to an employee benefit plan. 11 U.S. C \$507(k)(2). \$ 0.00 is contributions to an employee benefit plan. 10.00 \$ 0.00 is	priority and partly					\$(0.00
□ Wages, salaries, or commissions (up to \$13,660) earned within 180 days before the barringtop values ins (if and the debta's business ands, whichever is earlier. 11 U.S.C. § 507(a)(4). \$	in some categories, the law limits the amount			of property or	r services for	\$(0.00
Part 3: Sign Below The person completing and date it. FREP 901(b). I am the creditor: I am the creditor. I am		bankrup	otcy petition is filed or the debtor's business ends, wh	ithin 180 day iichever is ea	s before the Irlier.	\$(0.00
Control of the second of		Taxes of	or penalties owed to governmental units. 11 U.S.C. §	507(a)(8).		\$28,294	4.15
Amounts are subject to adjustment on 401/22 and every 3 years after that for cases begin on or after the date of adjustment. Amounts are subject to adjustment on 401/22 and every 3 years after that for cases begin on or after the date of adjustment. Sign and date it. ReP 9011(b). I am the creditor's attorney or authorized agent. I am the creditor's attorney or authorized agent. I am the trustee, or the debtor, or their authorized agent. I am the trustee, or the debtor, or their authorized agent. I am the trustee, or the debtor, or their authorized agent. I am the trustee, or the debtor, or their authorized agent. I am the trustee, or the debtor, or their authorized agent. I am a quartantor, surely, endorser, or other codebtor. Bankruptcy Rule 3004. I am a quartantor, surely, endorser, or other codebtor. Bankruptcy Rule 3005. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor oredit for any payments received toward the debt. I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true amount of the claim. I declare under penalty of perjury that the foregoing is true and correct. Signature Mat / DD / VYYY Jordan Hollis Signature Mat / DD / VYYY Jordan Hollis Signature The Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the comparts excive a server. Address <u>Store Street Number Street Numb</u>		Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a	a)(5).		\$0	0.00
Part 3 Sign Below The person completing this proof of claim must sign and date it. FRB 9011(b).		D Other. S	Specify subsection of 11 U.S.C. § 507(a)() that app	olies.		\$0	0.00
The person who files a fraudulent claim could be information in 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true amount of the claim. The credit of gave the debtor credit for any payments received toward the debt. A person who files a fraudulent claim could be information in this Proof of Claim and have a reasonable belief that the information is true and correct. I are supervalued be information in this Proof of Claim and bays are reasonable belief that the information is true and correct. I are supervalued be i		* Amounts a	are subject to adjustment on 4/01/22 and every 3 years after	that for cases	begun on or afte	er the date of adjustment.	
The person who files a fraudulent claim could be information in 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true 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 information in this Proof of Claim and have a reasonable belief that the information is true amount of the claim. The credit of gave the debtor credit for any payments received toward the debt. A person who files a fraudulent claim could be information in this Proof of Claim and have a reasonable belief that the information is true and correct. I are supervalued be information in this Proof of Claim and bays are reasonable belief that the information is true and correct. I are supervalued be i							
this proof of claim must sign and date it. I am the creditor. If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is. I am the creditor is attorney or authorized agent. Bankruptcy Rule 3004. I am the creditor is authorized signature on this proof of Claim serves as an acknowledgment that when calculating the amount of the daim, the creditor gave the debtor credit for any payments received toward the debt. I am the creditor is the creditor any payments received toward the debt. A person who files a fractulent claim could be finded up to \$50,000, imprisoned for up to \$50,000,000, imprisoned for up to \$50,000, imprisone	Part 3: Sign Below						
sign and date it. FRBP 9011(b). FRBP 9011(b). I am the creditor. I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the daim, the creditor gave the debtor credit for any payments received toward the debt. I an creditor or possible belief that the information is true and correct. I declare under penalty of perjury that the foregoing is true and correct. Executed on date <u>05/11/2021</u> MM / DD / YYYY Jordan Hollis Signature Print the name of the person who is completing and signing this claim: Name		Check the appro	ppriate box:				
If you file this claim electronically, FRBP 5005(a)(2) authorizes could to establish local rules specifying what a signature is. 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 am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. 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. I understand that an authorized signature on this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct. Jordan Hollis Signature I are examined the person who is completing and signing this claim: Name Jordan Hollis First name Name Jordan Hollis First name Title Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number	sign and date it.	I am the cre	editor.				
electronically, FRBP 5005(3)(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. Jordan Hollis Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis First name Title Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Singet Different Diff		I am the cre	editor's attorney or authorized agent.				
5005(a)(2) authorizes courts to establish local rules specifying what a signature is. T am a guarantor, surrety, endorser, or other codebtor. Bahkruptcy Rule 3005. I destablish 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 \$ years, or both. I ave examined the information in this <i>Proof of Claim</i> 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. I declare under penalty of perjury that the foregoing is true and correct. Executed on date <u>05/11/2021</u> <u>MM / DD / YYYY</u> I declare under penalty of perjury that the foregoing is true and correct. Executed on date <u>05/11/2021</u> <u>MM / DD / YYYY</u> Jordan Hollis Signature First name Middle name Last name Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Name City State 			stee, or the debtor, or their authorized agent. Bankru	ptcy Rule 30	04.		
specifying what a signature is. A person who files a fradulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. Understand that an authorized signature on this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct. I have examined the information in this <i>Proof of Claim</i> 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 <u>05/11/2021</u> MM / DD / YYYY - Jordan Hollis Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis Title Revenue Collection Specialist 2 Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address <u>500 Deaderick Street</u> Number Street Nashville <u>TN</u> <u>37242</u> City <u>State</u> ZIP Code		□ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
is. Indefinition of the claim, the creditor gave the debtor credit for any payments received toward the debt. A person who files a fraudulent claim culd be finded up to \$500,000, imprisoned for up to \$ years, or both. 18 U.S.C. §§ 152, 157, and 3571. Jordan Hollis Executed on date 05/11/2021 MM / DD / YYYY Jordan Hollis Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis First name Title Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Namber Street Nam							
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. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lideclare under penalty of perjury that the foregoing is true and correct. Lide							е
find up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571. indextraction of monitation in this root of claim child for or educated or indextraction of the information is indextraction. IB U.S.C. §§ 152, 157, and 3571. ideclare under penalty of perjury that the foregoing is true and correct. Is U.S.C. §§ 152, 157, and 3571. ideclare under penalty of perjury that the foregoing is true and correct. Is U.S.C. §§ 152, 157, and 3571. ideclare under penalty of perjury that the foregoing is true and correct. Is used to inform the information in this root of claim correct. ideclare under penalty of perjury that the foregoing is true and correct. Is used to inform the information in this root of claim correct. ideclare under penalty of perjury that the foregoing is true and correct. Is used to inform the information in this root of claim correct. ideclare under penalty of perjury that the foregoing is true and correct. Is used to inform the information in this root of claim correct. ideclare under penalty of perjury that the foregoing is true and correct. Name Is used to inform the information in this root of claim correct. ideclare under penalty of perjury that the foregoing is true and correct. Name Is under the person who is completing and signing this claim: Title Is under the person who is completing and signing this claim is a servicer. Address Is under the corporate servicer as the company if the authorized agent is a service							
years, or both. 1 declare under penalty of perjury that the foregoing is true and correct. 18 U.S.C. §§ 152, 157, and 3571. 1 declare under penalty of perjury that the foregoing is true and correct. Executed on date 05/11/2021 MM / DD / YYYY Jordan Hollis Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis First name Title Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Number Street Nashville TN 37242 City State ZIP Code	fined up to \$500,000,						
13 0.3.0. gg 132, 137, 1310 Executed on date <u>05/11/2021</u> <u>MM / DD / YYYY</u> Jordan Hollis Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis First name Middle name Last name Title Revenue Collection Specialist 2	years, or both.						
MM / DD / YYYY Jordan Hollis Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis First name Middle name Last name Name Jordan Hollis First name Middle name Last name Title Revenue Collection Specialist 2 Tennessee Department of Revenue Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Image: Street Number Street TN 37242 City State ZIP Code							
Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis Name Jordan Hollis First name Middle name Last name Title Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Mashville TN 37242 City State ZIP Code		Executed on dat					
Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis Name Jordan Hollis First name Middle name Last name Title Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Mashville TN 37242 City State ZIP Code							
Signature Print the name of the person who is completing and signing this claim: Name Jordan Hollis Name Jordan Hollis First name Middle name Last name Title Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Mashville TN 37242 City State ZIP Code		Jordan H	ollis				
Name Jordan Hollis First name Middle name Last name Title Revenue Collection Specialist 2 Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Namber TN 37242 City State					-		
First nameMiddle nameLast nameTitleRevenue Collection Specialist 2CompanyTennessee Department of RevenueIdentify the corporate servicer as the company if the authorized agent is a servicer.Address500 Deaderick StreetNumberStreetNumberStreetNashvilleTN37242CityStateZIP Code		Print the name	of the person who is completing and signing this	s claim:			
First nameMiddle nameLast nameTitleRevenue Collection Specialist 2CompanyTennessee Department of RevenueIdentify the corporate servicer as the company if the authorized agent is a servicer.Address500 Deaderick StreetNumberStreetNumberStreetIdentifyTN37242CityStateZIP Code		Name	Jordan Hollis				
Company Tennessee Department of Revenue Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Nashville TN 37242 City State ZIP Code			First name Middle name		Last name		
Identify the corporate servicer as the company if the authorized agent is a servicer. Address 500 Deaderick Street Number Street Nashville TN 37242 City State ZIP Code		Title	Revenue Collection Specialist 2				
NumberStreetNashvilleTNGityStateZIP Code		Company		orized agent is	a servicer.		
NumberStreetNashvilleTNGityStateZIP Code		Address	500 Deaderick Street				
City State ZIP Code		AUU1622					
City State ZIP Code			Nashville	ΤN	37242		
Contact phone Email							
		Contact phone		Email			

Attachment 1 - OCB RESTAURANT COMPANY, LLC.pdf Description -

Fill in this information to identify the case:						
Debtor 1 OCB RESTAURANT COMPANY, LLC						
Debtor 2 (Spouse, if filling)						
Untied States Bankruptcy Court for Dallas District of TX						
Case number 21-30726	(State)					

Official Form 410

Proof of Claim

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 t	ne Claim					
^{1.} Who is the current creditor?	Tennessee Department of Revenue Name of the creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor X No. Yes. From whom?					
^{2.} Has this claim been acquired from someone else?						
^{3.} Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? TDOR c/o Attorney General	Where should payments to the creditor be sent? (if different)				
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name PO Box 20207 Number Street	Name Number Street				
	Nashville TN 37202-0207 City State ZIP Code Contact phone					
	Contact email Uniform claim identifier for electronic payments in ch	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?	X No. Yes. Who made the earlier filing?					
Official Form 410	Proof of Claim	page 1				

Part 2: Give Info	rmation About the Claim as of the Date the Case Was Filed
^{6.} Do you have any number you use the	□ No.
identify the debtor?	X Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>**-***9524</u>
^{7.} How much is the claim?	\$_34,730.25 . Does this amount include interest or other charges? □ No.
	X 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 document supporting the claim required by Bankruptcy Rule 3001(c).
	Limit disclosed information that is entitled to privacy, such as healthcare information.
	Taxes
^{9.} Is all of part of the claim secured?	X 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 <i>Mortgage Proof</i> Af Claim Attachment (Official Form 410.4) with this <i>Broof of Claim</i>
	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?	X No.
	Yes. Amount necessary to cure any default as of the date of petition. \$
11. Is this claim subject	X No.
to a right of setoff?	Yes. Identify the property:

12. Is all of part of the	No.	
claim entitled to priority under 11	X Yes. Check all that apply:	Amount entitled to priority
U.S.C § 507(a)? A claim may be	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$_0.00
partly priority and partly nonpriority. For example, in some categories, the	Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ <u>0.00</u>
law limits the amount entitled to priority.	Wages, salaries, or commissions (up to \$12,475*) 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).	\$ <u>0.00</u>
	X Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$_28,294.15
	\Box Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$_ 0.00
	\Box Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$ <u>0.00</u>
	* Amounts are subject to adjustment on 4/1/16 and every 3 years after that for cases begun on or a	after the date of adjustment.
Part 3: Sign Belo	W	
The person	Check the appropriate box:	

completing this proof of claim must sign and date it. FRBP 9011(b).	 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. 					
If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish		I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
local rules specifying what a signature is.	I have examined and correct.	d the information in this <i>Proo</i>	<i>f of Claim</i> and have a	reasonable belief that the information is true		
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or	I declare under Executed on da	te <u>11-May-2021</u> MM / DD / YYYY	regoing is true and cor	rect.		
both. 18 U.S.C. §§ 152, 157 and 3571.	x <u>/s/Jordan Hollis</u> Signature					
	Print the name	of the person who is com	pleting and signing t	nis claim:		
	Name	Jordan First Name	Middle Name	Hollis Last Name		
	Title	Revenue Collection Spe	ecialist 2			
	Company	Tennessee Department	t of Revenue	agent is a servicer.		
	Address	500 Deaderick St Number Street				
		Nashville	TN	37242		
		City	State	ZIP Code		
	Contact phone	(615) 532-6322		jordan.hollis@tn.gov		



STATE OF TENNESSEE DEPARTMENT OF REVENUE

Legal Claims Summary Sheet

May 11, 2021

Letter ID:

L1471124096

Taxpayer Name: OCB RESTAURANT COMPANY, LLC

OCB RESTAURANT COMPANY, LLC	21-30726		
TAXPAYER'S NAME	CASE NUMBER		
OCB RESTAURANT COMPANY, LLC	Chapter 11		
BUSINESS NAME	CHAPTER #		
April 20, 2021	April 20, 2021		
DATE PENALTY & INTEREST THROUGH	DATE PETITION FILED		
November 30, 2020			
BUSINESS CLOSURE DATE	1st CREDITORS MEETING		

ΤΑΧ ΤΥΡΕ	ACCT NUMBER	PERIOD END	RTN OR EST	ТАХ	PENALTY	INTEREST	BALANCE
Business Tax	1001045164-BUS	31-Dec-2020	Return	\$607.00	\$30.35	\$0.48	\$637.83
Sales and Use Tax	1000288831-SLC	29-Feb-2020	Return	\$12,439.00	\$3,109.75	\$1,053.44	\$16,602.19
Sales and Use Tax	1000288831-SLC	31-Mar-2020	Return	\$13,184.00	\$3,296.00	\$1,010.23	\$17,490.23
				\$26,230.00	\$6,436.10	\$2,064.15	\$34,730.25