

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, Dallas Division
Case number 21-30721-11

E-Filed on 05/13/2021
Claim # 84

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? PEOPLES GAS LIGHT & COKE COMPANY
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?
PEOPLES GAS LIGHT & COKE COMPANY
Name
200 EAST RANDOLPH STREET
Number Street
CHICAGO IL 60601
City State ZIP Code
Contact phone (844) 288-4496
Contact email gportillo@peoplesgasdelivery.com
Where should payments to the creditor be sent? (if different)
Name
Number Street
City State ZIP Code
Contact phone
Contact email
Uniform claim identifier for electronic payments in chapter 13 (if you use one):

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: 2 2 9 4

7. How much is the claim? \$ 16,411.53. 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.
Furnishing gas service

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 05/13/2021
MM / DD / YYYY

G Portillo
Signature

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

Name G Portillo
First name Middle name Last name

Title Agent

Company _____
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 - Conf of service - Old Country Buffet 00004.pdf

Description -

May 13, 2021

Old Country Buffet
6125 N. Lincoln Ave.
Chicago IL 60659-2313

RE:

Account number: [REDACTED] 5571-00004

Dear Old Country Buffet:

Please see below for the information confirming your Peoples Gas account:

Customer's Name: Old Country Buffet
Service Address: 6125 N. Lincoln Ave. Chicago IL 60659
Service Dates: 6/13/2012 to 4/03/2017
Account balance: \$1,076.34

Sincerely,

Peoples Gas
North Shore Gas

Attachment 2 - Conf of service - Old Country Buffet 00003.pdf

Description -

May 13, 2021

Old Country Buffet
701 N. Milwaukee Ave. #302
Vernon Hills IL 60061-1556

RE:

Account number: [REDACTED] 8899-00003

Dear Old Country Buffet:

Please see below for the information confirming your Peoples Gas account:

Customer's Name: Old Country Buffet
Service Address: 701 N. Milwaukee Ave. #302 Vernon Hills IL 60061
Service Dates: 6/13/2012 to 1/25/2013
Account balance: \$308.76

Sincerely,

Peoples Gas
North Shore Gas

Attachment 3 - Conf of service - Old Country Buffet 00002.pdf

Description -

May 13, 2021

Old Country Buffet
PO Box 21388
Eagan MN 55121-0388

RE:

Account number: [REDACTED] 4945-00001

Dear Old Country Buffet:

Please see below for the information confirming your Peoples Gas account:

Customer's Name: Old Country Buffet
Service Address: 701 N. Milwaukee Ave. #302 Vernon Hills IL 60061
Service Dates: 7/17/1992 to 6/13/2012
Account balance: \$999.76

Sincerely,

Peoples Gas
North Shore Gas

Attachment 4 - Old Country Buffet 5571-00003.pdf

Description -

Customer Service 866-556-6001
 24-Hour Gas Emergencies 866-556-6002
 En Espanol 866-556-6003
 TDD Line 866-556-6007

Bill Date	Account Number	Next Meter Read Date	Amount Due	Payment Due Date
04/27/2021	██████████5571-00003		\$14,026.67	05/11/2021

Customer Name OLD COUNTRY BUFFET
Service Address STE O
 6560 W FULLERTON AVE
 CHICAGO IL 60707-3435

Activity Since Last Bill

04/09/2021	Previous Balance	\$14,026.67
	Balance	\$14,026.67
	Total Current Charges	\$0.00
	Total Current Balance	\$14,026.67

Messages

This is your final bill. If you have other active accounts, this balance may be transferred to another account in your name.

View your bill online anytime in My Account. Visit our website to sign up.

Your account has a past-due balance. Please send full payment by the payment due date.

We continue to closely monitor the situation surrounding COVID-19. As an essential service provider, we are committed to the safety of our employees and customers while providing the energy you depend on. Visit peoplesgasdelivery.com to learn more.

Account Summary
 Bill Period: 08/19/2020 to 09/23/2020

	Sep 2020	Aug 2020
Billing Days	36	32
Avg Temp	10°F	77°F
Heating Deg Days	22	0
Cooling Deg Days	2	374
Therms Used	3154.3	2873.9
Avg Therms / Day	87.6	89.8
Utility Gas Cost	\$0.23	\$0.20

Graphs

Usage by Month

Month	Usage
Sep	0
Oct	0
Nov	0
Dec	0
Jan	0
Feb	4500
Mar	4200
Apr	3500
May	1000
Jun	4500
Jul	2800
Aug	3000
Sep	3500

■ Therms

Charges by Month

Month	Charge
Sep	0
Oct	0
Nov	0
Dec	0
Jan	0
Feb	1500
Mar	1400
Apr	1200
May	400
Jun	2200
Jul	1400
Aug	1500
Sep	1200

ACCOUNT NUMBER ██████████5571-00003 INVOICE: 3687662165 Page 1 of 1 WEC_PDF_Out 2046 (8)



Please return this stub with your payment.

ACCOUNT NUMBER ██████████5571-00003

Amount Due By 05/11/2021	\$14,026.67
A 1.5% late fee may be charged on any unpaid balance	
<i>Please write your account number on your check</i>	
Amount Enclosed	
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	

OLD COUNTRY BUFFET
 ATTN: OCB 0073 UTILITIES
 120 CHULA VIS
 SAN ANTONIO TX 78232-2234

I want to pledge \$1 per month to the Share the Warmth program, which helps pay energy expenses for those in need. I've added \$1 to my payment.

Peoples Gas
 PO Box 6050
 Carol Stream IL 60197-6050

██████████5571000038 8001402667