

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 08/18/2021
Claim # 298

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?** Public Service Company of North Carolina Incorpora
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor PSNC, Dominion Energy North Carolina

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>Janet Reyes</u> Name <u>220 Operation Way Mail Code C222</u> Number Street <u>Cayce SC 29033</u> City State ZIP Code Contact phone _____ Contact email <u>janet.reyes@dominionenergy.com</u>	_____ 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: 7 8 9 5

7. How much is the claim? \$ 3,111.41. 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 08/18/2021
MM / DD / YYYY

Janet C Reyes

Signature

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

Name Janet C Reyes
First name Middle name Last name

Title Paralegal

Company Dominion Energy
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 - Ryans Family Steakhouse 7895 DENC_Redacted.pdf

Description -

SERVICE FOR
RYANS FAMILY STEAK HOUSE RYAN'S FAMILY STEAK
1000 BREVARD RD
ASHEVILLE NC 28806-2249

[REDACTED] 6573

DATE DUE	TOTAL AMOUNT DUE
Dec 3 2020	\$3,111.41

BUSINESS CUSTOMER SERVICE
1-877-776-2427
7am - 6pm, Monday - Friday

EMERGENCY SERVICE 1-877-776-2427
24 HOURS A DAY
To report gas emergencies

NOVEMBER STATEMENT GENERATED ON:
Nov 18 2020

Dominion Energy North Carolina

DominionEnergyNC.com

FINAL BILL

ACCOUNT SUMMARY

Previous Bill Amount	\$ 6,218.62
Adjustments	-3,107.21
Payment Received No payments received	-0.00
Current Charges	0.00

Total Amount Due \$3,111.41

A late payment charge of 1% may be added to any balance remaining 25 days after billing.

Gas Charges

RATE PLAN
125 - Small General Service

METER NO.	BILLING PERIOD	DAYS	CURRENT	PREVIOUS	CONSTANT	USAGE (CCF)	BTU FACTOR	THERMS
000075975	11/10/20 - 11/10/20	0	99200	99200	1	0	0.0000 =	0

Total Gas Charges \$0.00

ADJUSTMENTS

Deposit and Interest Credit -3,107.21

Posting Summary	SERVICE FOR	1000 BREVARD RD		
	ACCOUNT NUMBER	STATEMENT DATE	AMOUNT DUE	DATE DUE
	[REDACTED] 6573	11/18/20	\$3,111.41	12/3/20

PLEASE KEEP THIS PORTION FOR YOUR RECORDS.

PLEASE PRESENT THIS PORTION OF YOUR BILL WITH YOUR PAYMENT.

**Dominion Energy
North Carolina**

0000000000000 08 FB 323012812 EP

RYANS FAMILY STEAK HOUSE RYAN'S FAMILY STEAK
2338 N LOOP 1604 W STE 350
SAN ANTONIO TX 78248-4544

ACCOUNT NUMBER

[REDACTED] 6573

TOTAL AMOUNT DUE

\$3,111.41

DATE DUE

Dec 3 2020

Please enter amount paid.

\$

NO PERSONAL CHECKS



00000101

Payment Options

By Mail: Pay by check or money order in the enclosed envelope. Please do not mail cash.

Online: Visit DominionEnergyNC.com to pay directly from your bank account or credit card.

By Phone: Call 1-800-450-9159, 24 hours a day, to pay using your credit card, debit card or directly from your bank account. There is a fee of \$3.50 per transaction that BillMatrix receives for providing this service. Additional limitations may apply.

Authorized Payment Agencies: Visit an authorized payment location near you to pay in person. There is no fee associated with service at an authorized payment location.

WAL-MART STORES, INC #01317, 125 BLEACHERY BLVD, ASHEVILLE NC 28805

ALL NC AND SC WALMARTS

Unauthorized Payment Agencies: Additional payment centers may exist in your area that are not Dominion Energy authorized payment locations. While these unauthorized locations may accept your Dominion Energy payment, they will charge a fee for doing so, and your payment will be delayed in reaching us.

Total Adjustments -\$3,107.21

Thank you for being our customer. This is your final bill with us. Please contact us if we can help in meeting any of your future energy needs.

Electronic check conversion. When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.