

Fill in this information to identify the case:

Debtor 1 GGI Holdings, LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Texas, Dallas Division

Case number 20-31318-hdh11

E-Filed on 08/28/2020
Claim # 258

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?** Peak Methods, Inc.
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor Peak UpTime

2. **Has this claim been acquired from someone else?** No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent? <small>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</small>	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
	<u>Jennifer McCuistian</u> Name <u>PO Box 4674</u> Number Street <u>Tulsa</u> <u>OK</u> <u>74159</u> City State ZIP Code Contact phone <u>(918) 591-2217</u> Contact email <u>jennifer.mccuistian@peakuptime.com</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? \$ 37,200.14. 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.
Services Performed

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 08/28/2020
MM / DD / YYYY

Jennifer McCuistian

Signature

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

Name Jennifer McCuistian
First name Middle name Last name

Title Director, Purchasing & Administration

Company Peak Methods, Inc. dba Peak UpTime
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 - 55210.pdf

Description -



PO Box 4674
Tulsa, OK 74159-0674

Invoice

Date	Invoice #
1/9/2020	55210

Bill To

Gold's Gym
4001 Maple Ave Ste 200
Dallas, TX 75219-3241

Contact Information
918-585-8488 Office 918-585-5615 Fax 800-797-8388 Toll Free

P.O. No.	Terms	Rep
R211124	Net 30	CS

Item	Description	Qty	Rate	Amount
	Project: 2841-SO#12160: Gym Reprogramming - Gold's Gym		31,938.00	31,938.00T
	SubTotal			31,938.00
	City, County, State		8.25%	2,634.89

Total		\$34,572.89
Payments/Credits		\$0.00
Balance Due		\$34,572.89

Past due invoices are subject to an interest penalty of 1 1/2% per month

Attachment 2 - 56326.pdf

Description -



PO Box 4674
Tulsa, OK 74159-0674

Invoice

Date	Invoice #
1/24/2020	56326

Bill To

accountspayable@goldsgym.com
Gold's Gym
4001 Maple Ave Ste 200
Dallas TX 75219-3241

Contact Information
918-585-8488 Office 918-585-5615 Fax 800-797-8388 Toll Free

P.O. No.	Terms	Rep
8017553	Net 30	CS

Item	Description	Qty	Rate	Amount
10381	HWT-Handset for IP Phone IP655, IP 400 series phones and Dock City, County, State	4	38.00	152.00T 12.54

Please remit to the above address!	Total	\$164.54
	Payments/Credits	\$0.00
	Balance Due	\$164.54

Past due invoices are subject to an interest penalty of 1 1/2% per month

Attachment 3 - 56526.pdf

Description -

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Attachment 4 - 56879.pdf

Description -



Remit To:
 P.O. Box 4674
 Tulsa, OK 74159-0674
 (918) 585-8488

Bill To:
Gold's Gym (RSG Group USA, Inc.) Attn: Accounts Payable 5440 LBJ Freeway, Suite 200 Dallas, TX 75240 United States

Date	Invoice
04/14/2020	56879

Terms	Due Date	PO Number
Net 30 days	05/14/2020	

	Work Type	Hours	Rate	Amount
Agreement Billable Time: Mitel Standard Partner Support-NP				
	Telephony - Excluded from Agreement	1.00	175.00	\$175.00
Total :				\$175.00
Make checks payable to Peak UpTime		Invoice Subtotal:		\$175.00
		Sales Tax:		\$14.44
		Invoice Total:		\$189.44

It's all about your solutions!

Invoice Time Detail

Invoice Number: 56879
Company: Gold's Gym (RSG Group USA, Inc.)

Charge To: Gold's Gym (RSG Group USA, Inc.) / DMV Franchise Gyms - Request for Change effective 4/13 a.m.
Location: Main

Date	Staff	Notes	Hours	Rate	Ext Amt
04/09/2020	Land, David	Service Ticket: 349421 Summary: DMV Franchise Gyms - Request for Change effective 4/13 a.m. Created Schedule. Tested prompt for playback. Added schedule and prompt to DC,MD,VA gyms. Email from LT to change schedule. Changes completed.	1.00	175.00	\$175.00

Subtotal: \$175.00

Attachment 5 - 56866.pdf

Description -



Remit To:
 P.O. Box 4674
 Tulsa, OK 74159-0674
 (918) 585-8488

Bill To:
Gold's Gym (RSG Group USA, Inc.) Attn: Accounts Payable 5440 LBJ Freeway, Suite 200 Dallas, TX 75240 United States

Date	Invoice
03/31/2020	56866

Terms	Due Date	PO Number
Net 30 days	04/30/2020	

	Work Type	Hours	Rate	Amount
Agreement Billable Time: Mitel Standard Partner Support-NP				
	Telephony - Excluded from Agreement	11.50	175.00	\$2,012.50
			Total :	\$2,012.50
Make checks payable to Peak UpTime		Invoice Subtotal:		\$2,012.50
		Sales Tax:		\$166.04
		Invoice Total:		\$2,178.54

It's all about your solutions!

Invoice Time Detail

Invoice Number: 56866
Company: Gold's Gym (RSG Group USA, Inc.)

Charge To: Gold's Gym (RSG Group USA, Inc.) / Change Gym AA prompt Location: Main

Date	Staff	Notes	Hours	Rate	Ext Amt
03/27/2020	Land, David	Service Ticket: 348348 Summary: Change Gym AA prompt Changed out "holiday" prompt for one supplied by LT.	1.25	175.00	\$218.75
03/27/2020	Sleighter, Sharon	Service Ticket: 348348 Summary: Change Gym AA prompt Changed out "holiday" prompt for one supplied by LT.	1.25	175.00	\$218.75

Subtotal: \$437.50**Charge To: Gold's Gym (RSG Group USA, Inc.) / Gym Closure Location: Main**

Date	Staff	Notes	Hours	Rate	Ext Amt
03/16/2020	Land, David	Service Ticket: 347462 Summary: Gym Closure Converted 2 files to proper format. Uploaded to server. Created 2 schedules, on indefinite one and one through the 31st. Uploaded prompt for 31st to the Venice "holiday" prompt. Activated the schedule through the 31st for Venice. Sent email to LT letting her know it has been done. Waiting on further instructions.	0.50	175.00	\$87.50
03/17/2020	Land, David	Service Ticket: 347462 Summary: Gym Closure Converted all Gyms not in VA to their local 930 to 530 schedule. Added new "closed until further notice" message to the after hours AA and set to replay if timed out. Waiting on VA to close to complete the rest.	4.50	175.00	\$787.50

Subtotal: \$875.00**Charge To: Gold's Gym (RSG Group USA, Inc.) / New Holiday Recording Location: Main**

Date	Staff	Notes	Hours	Rate	Ext Amt
03/24/2020	Land, David	Service Ticket: 347919 Summary: New Holiday Recording Looked into system to refresh call flow for Customer service. Created new holiday schedule. Checked 800 numbers to see where they actually come in. Modified prompt to be correct format. Uploaded to server. Added holiday schedule and prompt to 800 number found. 1 800 number was not coming into the system.	1.00	175.00	\$175.00
03/24/2020	Land, David	Service Ticket: 347919 Summary: New Holiday Recording Updated all Gyms with new schedule and holiday prompt except DC, Maryland, and VA. Those are still on 9 to 5 schedule per LT.	2.50	175.00	\$437.50

Subtotal: \$612.50

Charge To: Gold's Gym (RSG Group USA, Inc.) / VA Gyms are Now Closed (Work can be done Friday) Location: Main

Date	Staff	Notes	Hours	Rate	Ext Amt
03/26/2020	Land, David	Service Ticket: 347712 Summary: VA Gyms are Now Closed (Work can be done Friday) Added prompts and schedule to VA gyms. All gyms are now complete.	0.50	175.00	\$87.50

Subtotal: \$87.50