

**Fill in this information to identify the case:**

Debtor 1	GGI Holdings, LLC
Debtor 2	
(Spouse, if filing)	
United States Bankruptcy Court	Northern District of Texas
Case number:	20-31318

FILED  
 U.S. Bankruptcy Court  
 Northern District of Texas  
 5/14/2020  
 RECEIVED Robert . Colwell, Clerk

MAY 15 2020

**Official Form 410  
 Proof of Claim**

BMC GROUP

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**

<b>1. Who is the current creditor?</b>	Brownsville Public Utilities Board	
	Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor	
<b>2. Has this claim been acquired from someone else?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
<b>3. Where should notices and payments to the creditor be sent?</b>  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>	<b>Where should payments to the creditor be sent? (if different)</b>
	Brownsville Public Utilities Board	
	Name	Name
	1425 Robinhood Dr Brownsville, TX 78521	
	Contact phone 9569836134	Contact phone _____
	Contact email CCAPETILLO@BROWNSVILLE-PUB.COM	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
<b>4. Does this claim amend one already filed?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ <span style="float: right;">MM / DD / YYYY</span>	
<b>5. Do you know if anyone else has filed a proof of claim for this claim?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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: 3146

7. How much is the claim? \$ 7721.78 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 healthcare information.  
UTILITIES

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. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff?  No  Yes. Identify the property: \_\_\_\_\_

<p><b>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</b></p> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply:</i>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</td> <td style="width: 20%; text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> 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).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> 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).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p style="font-size: small;">* Amounts are subject to adjustment on 4/1/22 and every 3 years after that for cases begun on or after the date of adjustment.</p>	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____	<input type="checkbox"/> 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).	\$ _____	<input type="checkbox"/> 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).	\$ _____	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies	\$ _____
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<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____													
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies	\$ _____													

**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 5/14/2020  
MM / DD / YYYY

/s/ Claudia Capetillo  
Signature

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

Name Claudia Capetillo

Title Customer Service Supervisor

Company Brownsville Public Utilities Board

Address 1425 Robinhood  
Identify the corporate servicer as the company if the authorized agent is a servicer  
Number Street  
Brownsville, TX 78521

Contact phone 9569836134 City State ZIP Code Brownsville TX 78521  
Email ccapetillo@brownsville-pub.com

### Gold's Gym #43032

Past Due Date: 5/28/20

C/O Ecova - Ms1890  
PO Box 2440  
Spokane WA, 99210-2440

Account Number	Previous Balance	Payments	Adjustments	Penalties	Current Charges	Amount Due
543146	\$7,960.08	\$0.00	\$0.00	\$0.00	\$4,841.70	\$12,801.78

### Billing Summary

Electric.....	\$4,214.18
Water.....	\$148.69
Wastewater.....	\$35.36
City Fees.....	\$443.47
<b>Total Charges.....</b>	<b>\$4,841.70</b>

Bill Date: May. 4, 20  
From: Apr. 15, 20  
To: May. 4, 20  
Bill Days: 20

\*Electric and Garbage are taxable services.

We appreciate your business. See page 3 for breakdown of bill.

For questions on your bill please call (956) 983-6121.

**If the previous balance has not been paid, this new bill does not prevent disconnection for past due amounts.**

05082020094540  
V04.03 1-1-1

Please see reverse side for your messages.

Keep top portion for your records:

Please write your account number 543146 on the check or money order and make it payable to Brownsville PUB.



BROWNSVILLE  
PUBLIC UTILITIES BOARD

(956) 983-6100

Share Contribution: \_\_\_\_\_  
Add your share contribution to  
Total Paid.

Account No:	543146
<b>Amount Due Upon Receipt:</b>	<b>\$12,801.78</b>
Past Due Date:	5/28/20
Late Charges will apply if paid after Due Date.	

**Total Paid:** \_\_\_\_\_

|||||  
GOLD'S GYM #43032  
C/O ECOVA - MS1890  
PO BOX 2440  
SPOKANE WA, 99210-2440

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## Messages

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MAILING ADDRESS CORRECTION

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**BROWNSVILLE PUBLIC UTILITIES BOARD**  
**PO BOX 660566**  
**DALLAS, TX 75266-0566**

Gold's Gym #43032  
800 Sunrise Blvd A  
Brownsville TX, 78526-4136  
Acct. No: 543146

Page 3 of 4  
Past Due Date: 5/28/20



**Breakdown of Your Utility Bill**

**Elect - General Service Demand - 69426256**

Customer Service Charge		\$34.00
General Service Demand Charge	25 KW @ 5.54000	138.50
	75 KW @ 5.53000	414.75
	85 KW @ 4.03000	342.55
General Service Demand Energy Charge	9,250 KWH @ 0.06731	622.62
	18,500 KWH @ 0.06123	1,132.76
	4,890 KWH @ 0.04996	244.30
Fuel and Purchased Energy Charge	32,640 KWH @ 0.02952	963.53
City Sales Tax		77.86
State Sales Tax		243.31
		<hr/>
		\$4,214.18

**Water - Commercial Service Inside City - 11660766**

Customer Service Charge		\$59.50
		<hr/>
		\$59.50

**Water - Irrigation Comm Inside City - 11660770**

Customer Service Charge		\$59.50
		<hr/>
		\$59.50

**Water - Fire Support Service Inside City - 11767153**

Fire Support Service		\$29.69
		<hr/>
		\$29.69

**Wastewater - Irrigation Comm Inside City**

Customer Service Charge		\$35.36
		<hr/>
		\$35.36

Gold's Gym #43032  
800 Sunrise Blvd A  
Brownsville TX, 78526-4136  
Acct. No: 543146

Page 4 of 4  
Past Due Date: 5/28/20

**City of Brownsville Fees**

**Garbage Dumpsters (GMS)**

Garbage Dumpsters (GMS)	\$391.20
Garbage City Sales Tax	7.82
Garbage State Sales Tax	24.45
	\$423.47

**Comm City Maintenance and FUECM Fees**

City Maintenance Fee	\$10.00
Fed Unfunded Env Compliance Mandate Fee	10.00
	\$20.00

**Total Charges**

**\$4,841.70**

*For questions on your Commercial City Fees, please call:  
City of Brownsville Fees (956) 546-HELP (4357)  
GMS Garbage (956) 544-2100*

**Meter Details**

Meter Register	Size Type	Service	Previous Read	Current Read	Estimated	Multiplier	Read Consumption	Billed Consumption
69426256	THREE	Electric						
1	KWH		92,549.00	92,957.00	No	80	32,640.00	32,640.00
2	KW		2.23	2.23	No	80	178.40	185.00
3	KVAR		1.20	1.20	No	80	96.00	
11660766	2	Water						
1	M		13,191.00	13,191.00	No	1	0.00	0.00
11660770	2	Irrigation Meter (Sprinkler)						
1	M		5.00	5.00	No	1	0.00	0.00
11767153	3/4	Fire Protection (Detector Check Valve)						
1	M		6.00	6.00	No	1	0.00	0.00

An \* appearing next to the consumption indicates the consumption for this month was calculated.

A ^ appearing next to the Meter Register indicates the Meter is a Read ONLY Meter.

# Northern District of Texas Claims Register

20-31318-hdh11 GGI Holdings, LLC

**Judge:** Harlin DeWayne Hale      **Chapter:** 11  
**Office:** Dallas      **Last Date to file claims:** 09/09/2020  
**Trustee:**      **Last Date to file (Govt):** 12/08/2020

<i>Creditor:</i> (18988585)	<b>Claim No:</b> 3	<i>Status:</i>
Brownsville Public Utilities Board	<i>Original Filed</i>	<i>Filed by:</i> CR
1425 Robinhood Dr	<i>Date:</i> 05/14/2020	<i>Entered by:</i> Admin
Brownsville, TX 78521	<i>Original Entered</i>	<i>Modified:</i>
	<i>Date:</i> 05/14/2020	

Amount claimed: \$7721.78

*History:*

Details    3-1    05/14/2020 Claim #3 filed by Brownsville Public Utilities Board, Amount claimed: \$7721.78 (Admin)

*Description:*

*Remarks:* (3-1) Account Number (last 4 digits):3146

## Claims Register Summary

**Case Name:** GGI Holdings, LLC  
**Case Number:** 20-31318-hdh11  
**Chapter:** 11  
**Date Filed:** 05/04/2020  
**Total Number Of Claims:** 1

<b>Total Amount Claimed*</b>	\$7721.78
<b>Total Amount Allowed*</b>	

\*Includes general unsecured claims

**The values are reflective of the data entered. Always refer to claim documents for actual amounts.**

	Claimed	Allowed
<b>Secured</b>		
<b>Priority</b>		
<b>Administrative</b>		