

Fill in this information to identify the case:

Debtor GGI HOLDINGS, LLC
 United States Bankruptcy Court for the: NORTHERN District of TEXAS
 Case number 20-31318

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 BMC GROUP

Official Form 410

Proof of Claim

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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?	The County of Comal, Texas, collecting property taxes for itself and for The City of New Braunfels, Texas and Comal Independent School District	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> yes. From whom?	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Tara LeDay McCreary, Veselka, Bragg & Allen, P.C. P.O. Box 1269 Round Rock, Texas 78680-1269 512-323-3200 tleday@mvalaw.com	Where should payments to the creditor be sent? (if different) The County of Comal, Texas P.O. Box 311445 New Braunfels, Texas 78131-1445
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7. How much is the claim?	\$6,199.31 Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> yes.
8. What is the basis of the claim?	Property Taxes
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input checked="" type="checkbox"/> yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a (Official Form 410-A) with this <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: Basis for perfection: Texas Tax Code, Section 32.01 Value of property: > \$6,199.31 Amount of the claim that is secured: \$6,199.31 Amount of the claim that is unsecured: \$0 Amount necessary to cure any default as of the date of the petition: \$ Annual Interest Rate (when case was filed) 12% <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> yes. Amount necessary to cure any default as of the date of the petition. \$
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> yes. Identify the property:

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

<input checked="" type="checkbox"/> No	
<input type="checkbox"/>	Amount entitled to priority
<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 \$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).	\$
<input type="checkbox"/> 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).	\$
<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.	\$

* Amounts are subject to adjustment on 410116 and every 3 years after that for cases begun on or after the date of

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.

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: May 19, 2020

/s/ Tara LeDay
Signature

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

Tara LeDay
Attorney for The County of Comal, Texas
McCreary, Veselka, Bragg & Allen, P.C
P.O. Box 1269
Round Rock, Texas 78680-1269
512-323-3200
tleday@mvalaw.com

SCHEDULE OF AD VALOREM TAX CLAIMS
 THE COUNTY OF COMAL, TEXAS

Account Number: 397772
Assessed Name: GOLDS TEXAS HOLDING GROUP INC
Legal Description: BUSINESS PERSONAL PROPERTY
Situs Address: 651 N Business IH 35 #900, New Braunfels, Texas

Year		Base Tax	Penalty & Interest	Additional Penalty	Attorney Fees	Total Due
2020*	Comal County	914.28	0.00			914.28
	New Braunfels, City of	1,384.46	0.00			1,384.46
	Comal I. S. D.	3,743.18	0.00			3,743.18
	Farm Road	157.39	0.00			157.39
Year Total		\$6,199.31	\$0.00	\$0.00	\$0.00	\$6,199.31
Total Due		\$6,199.31	\$0.00	\$0.00	\$0.00	\$6,199.31

* Estimated Tax Amount

Total Amount of Claim		\$6,199.31	\$0.00	\$0.00	\$0.00	\$6,199.31
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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

Creditor: (19000086)
Comal County
c/o Tara LeDay
P.O. Box 1269
Round Rock, TX 78680

Claim No: 9
Original Filed
Date: 05/19/2020
Original Entered
Date: 05/19/2020

Status:
Filed by: CR
Entered by: Tara LeDay
Modified:

Amount claimed: \$6199.31

Secured claimed: \$6199.31

History:

Details 9-1 05/19/2020 Claim #9 filed by Comal County, Amount claimed: \$6199.31 (LeDay, Tara)

Description:

Remarks:

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

Total Amount Claimed*	\$6199.31
Total Amount Allowed*	

*Includes general unsecured claims

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

	Claimed	Allowed
Secured	\$6199.31	
Priority		
Administrative		