


Fill in this information to identify the case:

Debtor 1 Gold's Gym International, Inc.
Debtor 2 _____
(Spouse, if filing)
United States Bankruptcy Court for the: Northern District of Texas 
Case number 20-31318

RECEIVED
JUN 08 2020
BMC GROUP

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? Adolph Kiefer & Associates LLC
Name of the current creditor (the person or entity to be paid for this claim)
Other names the creditor used with the debtor Kiefer Aquatics, The Lifeguard Store, All American Swim, Swim S

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?
Kiefer Aquatics
Name
903 Morrissey Drive
Number Street
Bloomington IL 61701
City State ZIP Code
Contact phone 309-451-5858
Contact email krussow@kiefer.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? _____

GGI HOLDINGS POC



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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: 4 1 7 2

7. How much is the claim? \$ 973.00. 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.
aquatics goods

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: _____

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

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* 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 06/03/2020
MM / DD / YYYY

Signature

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

Name Kate Russow
First name Middle name Last name

Title Staff Accountant

Company Adolph Kiefer & Associates LLC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 903 Morrissey Drive
Number Street

Bloomington IL 61701
City State ZIP Code

Contact phone 309-451-5858 Email krussow@kiefer.com



Kiefer Aquatics
The Lifeguard Store
All American Swim Supply
Swim Shops of the Southwest
 903 Morrissey Drive
 Bloomington, IL 61701
 P (309) 451-5858
 F (309) 451-5959

Invoice

DATE	INVOICE #
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02/19/2020

INV959999



BILL TO

Gold's Gym International-MAIN ACCT
 Accounts Payable
 4001 Maple Ave Ste 200
 Dallas, TX 75219-3249

SHIP TO

Gold's Gym International-MAIN ACCT
 Golds Gym Brassfield
 3711 Battleground Avenue
 Greensboro, NC 27410

Account Number: KC1004172

P.O. NUMBER	TERMS	REP	SHIP	VIA	Order Number
8016628	NET 30	001	02/12/2020	UPS GROUND	ORD802996.2

QUANTITY	ITEM CODE	DESCRIPTION	PRICE EACH	AMOUNT
10	650614	KIEFER DELUXE FOAM WATER DUMBBELLS - MEDIUM - PAIR	\$16.00	\$160.00

Page 1 of 1

UPS Tracking Number:
 390361377094

Subtotal	\$160.00
Discount Amount	\$0.00
Shipping, Packaging & Handling	\$0.00
Tax	\$11.60
TOTAL	\$171.60

All Balances must be paid within thirty (30) days of invoice date. A 1.5% monthly finance charge will be applied to all over due balances.

Balance Due


\$171.60



Kiefer Aquatics
The Lifeguard Store
All American Swim Supply
Swim Shops of the Southwest
 903 Morrissey Drive
 Bloomington, IL 61701
 P (309) 451-5858
 F (309) 451-5959

Invoice

DATE	INVOICE #
02/18/2020	INV959177



BILL TO

Gold's Gym International-MAIN ACCT
 Accounts Payable
 4001 Maple Ave Ste 200
 Dallas, TX 75219-3249

SHIP TO

Gold's Gym International-MAIN ACCT
 Manchester Meadows
 13867 Manchester Road
 Ballwin, MO 63011

Account Number: KC1004172

P.O. NUMBER	TERMS	REP	SHIP	VIA	Order Number
8018631	NET 30	001	02/18/2020	FEDEX_GROUND	ORD819286

QUANTITY	ITEM CODE	DESCRIPTION	PRICE EACH	AMOUNT
12	650613	KIEFER DELUXE FOAM WATER DUMBBELLS - MINI - PAIR	\$15.00	\$180.00

Page 1 of 1

UPS Tracking Number:
 390461565798

Subtotal	\$180.00
Discount Amount	\$0.00
Shipping, Packaging & Handling	\$15.00
Tax	\$0.00
TOTAL	\$195.00

All Balances must be paid within thirty (30) days of invoice date. A 1.5% monthly finance charge will be applied to all over due balances.

Balance Due \$195.00



Kiefer Aquatics
The Lifeguard Store
All American Swim Supply
Swim Shops of the Southwest
 903 Morrissey Drive
 Bloomington, IL 61701
 P (309) 451-5858
 F (309) 451-5959

Invoice

DATE INVOICE #

02/13/2020

INV958011



BILL TO

Gold's Gym International-MAIN ACCT
 Accounts Payable
 4001 Maple Ave Ste 200
 Dallas, TX 75219-3249

SHIP TO

Gold's Gym International-MAIN ACCT
 Attn: Aquatics
 3245 N Pleasantburg Drive
 Greenville, SC 29609

Account Number: KC1004172

P.O. NUMBER	TERMS	REP	SHIP	VIA	Order Number
8018523	NET 30	001	02/13/2020	FEDEX_GROUND	ORD818159
QUANTITY	ITEM CODE	DESCRIPTION		PRICE EACH	AMOUNT
1	01960	12.5" Outdoor Wall Clock		\$17.00	\$17.00

Page 1 of 1

UPS Tracking Number:
 390375139500

Subtotal	\$17.00
Discount Amount	\$0.00
Shipping, Packaging & Handling	\$7.50
Tax	\$1.02
TOTAL	\$25.52

All Balances must be paid within thirty (30) days of invoice date. A 1.5% monthly finance charge will be applied to all over due balances.

Balance Due

\$25.52



Kiefer Aquatics
The Lifeguard Store
All American Swim Supply
Swim Shops of the Southwest
 903 Morrissey Drive
 Bloomington, IL 61701
 P (309) 451-5858
 F (309) 451-5959

Invoice

DATE	INVOICE #
02/06/2020	INV955588

BILL TO

Gold's Gym International-MAIN ACCT
 Accounts Payable
 4001 Maple Ave Ste 200
 Dallas, TX 75219-3249

SHIP TO

Gold's Gym International-MAIN ACCT
 Gold's Gym - Brassfield
 3711 Battleground Avenue
 Greensboro, NC 27410

Account Number: KC1004172

P.O. NUMBER	TERMS	REP	SHIP	VIA	Order Number
8016628	NET 30	001	01/10/2020	FEDEX_GROUND	ORD808130.1
QUANTITY	ITEM CODE	DESCRIPTION		PRICE EACH	AMOUNT
10	650613	KIEFER DELUXE FOAM WATER DUMBBELLS - MINI - PAIR		\$15.00	\$150.00

Page 1 of 1

UPS Tracking Number:
 779576860720

Subtotal	\$150.00
Discount Amount	\$0.00
Shipping, Packaging & Handling	\$20.00
Tax	\$10.88
TOTAL	\$180.88

All Balances must be paid within thirty (30) days of invoice date. A 1.5% monthly finance charge will be applied to all over due balances.

Balance Due \$180.88



Kiefer Aquatics
The Lifeguard Store
All American Swim Supply
Swim Shops of the Southwest
 903 Morrissey Drive
 Bloomington, IL 61701
 P (309) 451-5858
 F (309) 451-5959

Invoice

DATE	INVOICE #
01/10/2020	INV947360

BILL TO
 Gold's Gym International-MAIN ACCT
 Accounts Payable
 4001 Maple Ave Ste 200
 Dallas, TX 75219-3249

SHIP TO
 Gold's Gym International-MAIN ACCT
 Gold's Gym - Hwy K
 2601 Highway K
 O' Fallon, MO 63368

Account Number: KC1004172

P.O. NUMBER	TERMS	REP	SHIP	VIA	Order Number
8015419	NET 30	001	01/10/2020	FEDEX_GROUND	ORD808127

QUANTITY	ITEM CODE	DESCRIPTION	PRICE EACH	AMOUNT
1	210603W-BLU	Kiefer 36" Battery Wall Mounted Pace Clock Color: Blue	\$355.00	\$355.00

Page 1 of 1

UPS Tracking Number:
 779583944772

	Subtotal	\$355.00
	Discount Amount	\$0.00
	Shipping, Packaging & Handling	\$45.00
	Tax	\$0.00
	TOTAL	\$400.00

All Balances must be paid within thirty (30) days of invoice date. A 1.5% monthly finance charge will be applied to all over due balances.

Balance Due \$400.00