

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 08/20/2020
Claim # 239

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

Other names the creditor used with the debtor KNVA

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

	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>C/O Nexstar Broadcasting, Inc.</u> Name	_____ Name
	<u>545 E. John Carpenter Freeway Suite 700</u> Number Street	_____ Number Street
	<u>Irving TX 75062</u> City State ZIP Code	_____ City State ZIP Code
	Contact phone <u>(972) 373-8800</u>	Contact phone _____
	Contact email <u>dparry@nexstar.tv</u>	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. How much is the claim? \$ _____ 641.75. 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 08/20/2020
MM / DD / YYYY

Diane Pardy
Signature

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

Name Diane Pardy
First name Middle name Last name

Title Legal Administrator

Company Nexstar Broadcasting, Inc.
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 - POC Spreadsheet-Invoices - 54 Broadcasting, Inc..pdf

Description -

GGI Holdings, LLC (Gold's Gym) - 54 Broadcasting, Inc. Invoices

TV STATION/LOCATION	INVOICE NUMBER	INVOICE DATE	INVOICE BALANCE
Austin, TX - KNVA	26751468-2	1/26/2020	\$382.50
	26751468-1	12/29/2019	\$259.25
		Total	\$641.75



Remit Address:

KNVA
PO Box 844304
Dallas, TX 75284
Main: (512) 476-3636
Billing: (317) 296-3099

Billing Address:

Mindstream Media Group - Dallas
Attention: Southwest Media Group Email
1717 Main Street
40th Floor
Dallas, TX 75201

INVOICE

Advertiser	Gold's Gym	Invoice #	26751468-1
Order Brand		Invoice Date	12/29/19
Product	AUS -AUSTIN	Invoice Month	December 2019
Estimate Number	0002	Invoice Period	11/25/19 - 12/29/19

Property	KNVA	Order #	26751468
Account Executive	Katz Dallas	Alt Order #	26751468
Sales Office	Katz/Dallas	Deal #	
Sales Region	National	Order Flight	12/23/19 - 01/12/20

Billing Calendar	Broadcast	Agency Code	9912469
Billing Type	Cash	Advertiser Code	GOLD
Special Handling		Product 1/2	AUS

Agency Ref	IN5981/AU298/AL283/MC
Advertiser Ref	

Line	Channel	Description	Time	Day	Date	Length	Air Time	Ad-ID	Rate	Reconciliation	Ref #
3	KNVA	Sign-On/Sign-Off	5a-12a								
					12/23/19 to 12/29/19	1x	--- TFSS				
	KNVA			Th	12/26/19	:30	8:41 AM	GOLD12062019	\$0.00		1
4	KNVA	LN M-F	9p-946p								
					12/23/19 to 12/29/19	2x	--- TF--				
	KNVA			Th	12/26/19	:30	9:41 PM	GOLD12062019	\$75.00		2
	KNVA			F	12/27/19	:30	9:29 PM	GOLD12062019	\$75.00		1
5	KNVA	Sun KXAN 9PM News	9p-930p								
					12/23/19 to 12/29/19	1x	-----S				
	KNVA			Su	12/29/19	:30	9:16 PM	GOLD12062019	\$75.00		1
6	KNVA	Su 10-11pm	10p-11p								
					12/23/19 to 12/29/19	1x	-----S				
	KNVA			Su	12/29/19	:30	10:26 PM	GOLD12062019	\$40.00		1
7	KNVA	Su 11pm-12am	11p-12a								
					12/23/19 to 12/29/19	1x	-----S				
	KNVA			Su	12/29/19	:30	11:10 PM	GOLD12062019	\$40.00		1
		<u>Aired Spots</u>				6					

<u>Gross Total</u>	\$305.00	
<u>Agency Commission</u>	\$45.75	
<u>Net Amount Due</u>	\$259.25	<u>Payment Terms 30 Days</u>

We warrant that the actual broadcast information shown on this invoice was taken from the official program log.



Remit Address:

KNVA
PO Box 844304
Dallas, TX 75284
Main: (512) 476-3636
Billing: (317) 296-3099

INVOICE

Advertiser	Gold's Gym
Order Brand	
Product	AUS -AUSTIN
Estimate Number	0002

Invoice #	26751468-2
Invoice Date	01/26/20
Invoice Month	January 2020
Invoice Period	12/30/19 - 01/26/20

Property	KNVA
Account Executive	Katz Dallas
Sales Office	Katz/Dallas
Sales Region	National

Order #	26751468
Alt Order #	26751468
Deal #	
Order Flight	12/23/19 - 01/12/20

Billing Calendar	Broadcast
Billing Type	Cash
Special Handling	

Agency Code	9912469
Advertiser Code	GOLD
Product 1/2	AUS

Agency Ref	IN5981/AU298/AL283/MC
Advertiser Ref	

Billing Address:

Mindstream Media Group - Dallas
Attention: Southwest Media Group Email
1717 Main Street
40th Floor
Dallas, TX 75201

Line	Channel	Description	Time	Day	Date	Length	Air Time	Ad-ID	Rate	Reconciliation	Ref #
1	KNVA	M-Su 5p-12a ROT	5p-12a		01/06/20 to 01/12/20	1x	MTWTF--				
	KNVA			M	01/06/20	:30	9:57 PM	GOLD12062019	\$0.00		1
2	KNVA	LN M-F	9p-946p		12/30/19 to 01/05/20	2x	MTWTF--				
	KNVA			M	12/30/19	:30	9:41 PM	GOLD12062019	\$75.00		1
	KNVA			W	01/01/20	:30	9:20 PM	GOLD12062019	\$75.00		2
					01/06/20 to 01/12/20	4x	MTWTF--				
	KNVA			Tu	01/07/20	:30	9:29 PM	GOLD12062019	\$75.00		3
	KNVA			W	01/08/20	:30	9:22 PM	GOLD12062019	\$75.00		6
	KNVA			Th	01/09/20	:30	9:42 PM	GOLD12062019	\$75.00		4
	KNVA			F	01/10/20	:30	9:14 PM	GOLD12062019	\$75.00		5
8	KNVA	Sign-On/Sign-Off	6p-12a		01/06/20 to 01/12/20	10x	-TWTF--				
	KNVA			Tu	01/07/20	:30	9:59 PM	GOLD12062019	\$0.00		2
	KNVA			W	01/08/20	:30	10:57 PM	GOLD12062019	\$0.00		3
	KNVA			W	01/08/20	:30	11:43 PM	GOLD12062019	\$0.00		10
	KNVA			W	01/08/20	:30	11:59 PM	GOLD12062019	\$0.00		4
	KNVA			Th	01/09/20	:30	10:55 PM	GOLD12062019	\$0.00		5
	KNVA			Th	01/09/20	:30	11:29 PM	GOLD12062019	\$0.00		1
	KNVA			Th	01/09/20	:30	11:50 PM	GOLD12062019	\$0.00		6
	KNVA			F	01/10/20	:30	10:14 PM	GOLD12062019	\$0.00		9
	KNVA			F	01/10/20	:30	10:26 PM	GOLD12062019	\$0.00		7
	KNVA			F	01/10/20	:30	10:42 PM	GOLD12062019	\$0.00		8

Aired Spots **17**

Gross Total **\$450.00**

We warrant that the actual broadcast information shown on this invoice was taken from the official program log.

Remit Address:

KNVA
 PO Box 844304
 Dallas, TX 75284
 Main: (512) 476-3636
 Billing: (317) 296-3099

Billing Address:

Mindstream Media Group - Dallas
 Attention: Southwest Media Group Email
 1717 Main Street
 40th Floor
 Dallas, TX 75201

INVOICE

Advertiser	Gold's Gym	Invoice #	26751468-2
Order Brand		Invoice Date	01/26/20
Product	AUS -AUSTIN	Invoice Month	January 2020
Estimate Number	0002	Invoice Period	12/30/19 - 01/26/20

Property	KNVA	Order #	26751468
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Billing Calendar	Broadcast	Agency Code	9912469
Billing Type	Cash	Advertiser Code	GOLD
Special Handling		Product 1/2	AUS

Agency Ref	IN5981/AU298/AL283/MC
Advertiser Ref	

Agency Commission **\$67.50**

Net Amount Due **\$382.50**

Payment Terms 30 Days