

Fill in this information to identify the case:

Debtor 1 Gold's Gym Licensing, LLC

Debtor 2 _____
(Spouse, if filing)

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

Case number 20-31323-hdh11

E-Filed on 09/08/2020
Claim # 317

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?** Southwestern Bell Telephone Company
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor AT&T

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?	Where should payments to the creditor be sent? (if different)
	<u>% AT&T Services, Inc.</u> Name <u>Karen Cavagnaro, Lead Paralegal. One AT&T W</u> Number Street <u>Bedminster NJ 07921</u> City State ZIP Code Contact phone <u>(908) 532-1957</u> Contact email _____ 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: 4 5 5 7

7. How much is the claim? \$ 2,677.61. 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 09/08/2020
MM / DD / YYYY

Renee L Christenson

Signature

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

Name Renee L Christenson
First name Middle name Last name

Title Bankruptcy Representative

Company Southwestern Bell Telephone Company
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 4331 Communications Dr. Fl. 4W
Number Street

Dallas TX
City State ZIP Code

Contact phone (888) 827-3238 Email renee.l.christenson@att.com

Attachment 1 - LEG S_billImageRequest 1967_Redacted.pdf

Description - BILL COPY



GOLDS GYM
4001 MAPLE AVE STE 200
DALLAS TX 75219 - 3249

Page 1 of 3
Account Number [REDACTED] 967
Billing Date Apr 9, 2020
Web Site att.com

Bill-At-A-Glance

Previous Bill	390.72
Payment	.00
Adjustments	29.30
Past Due - Please Pay Immediately	420.02
Current Charges	389.96
Total Amount Due	\$809.98
Current Charges Due in Full by	May 4, 2020

Detail of Payments and Adjustments

Item No.	Date	Description	Adjustments	Payments
1.	4-09	Late payment charge on unpaid balance	29.30	

Plans and Services

Monthly Service - Apr 9 thru May 8

Charges for [REDACTED]	
2. Bus Local Calling Unlimited B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage	65.00
Charges for [REDACTED]	
3. Bus Local Calling Unlimited B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage	65.00
Charges for [REDACTED]	
4. Bus Local Calling Unlimited B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage	65.00
Charges for [REDACTED]	
5. Bus Local Calling Unlimited B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage	65.00
Total Monthly Service	260.00

Billing Summary

Online: att.com / m yatt	Page	
Plans and Services	1	365.30
1 877 438-0041		
Payment Arrangements:		
1 800 704-8324		
Service Changes:		
1 877 438-0041		
Repair Services:		
1 800 442-9950		
AT&T Long Distance	2	24.66
1 800 321-2000		
Total Current Charges		389.96

News You Can Use Summary

- . PREVENT DISCONNECT
 - . PROMPT PAYMENT ACT
 - . FEE DESCRIPTIONS
 - . LONG DIST. PROVIDERS
 - . COST ASSESSMENT CHRGE
 - . STILL GETTING PAPER?
- See "News You Can Use" for additional information

Local Services provided by AT&T Arkansas, AT&T Kansas, AT&T Missouri, AT&T Oklahoma, or AT&T Texas based upon the service address location.

GO GREEN - Enroll in paperless billing.

Return bottom portion with your check in the enclosed envelope.

DUE BY: May 4, 2020 \$809.98 Amount After May 6, 2020 \$839.23



Past Due Charges - \$420.02 - Please Pay Immediately
Billing Date Apr 9, 2020
Date Mailed Apr 16, 2020

Account Number [REDACTED] 967
Please include your account number on your check

GOLDS GYM
4001 MAPLE AVE STE 200
DALLAS TX 75219 - 3249

Make check payable to:
AT&T
PO BOX 105414
ATLANTA GA 30348-5414

Attachment 2 - LEG S_billImageRequest 4557_Redacted.pdf

Description - BILL COPY



GOLDS GYM
 ATTN ACCOUNTS PAYABLE
 4001 MAPLE AVE STE 200
 DALLAS TX 75219 - 3249

Page 1 of 3
 Account Number [REDACTED] 4 557
 Billing Date Apr 11, 2020
 Web Site att.com

Bill-At-A-Glance

Previous Bill	331.65
Payment	.00
Adjustments	24.87
Past Due - Please Pay Immediately	356.52
Current Charges	331.25
Total Amount Due	\$687.77
Current Charges Due in Full by	May 6, 2020

Detail of Payments and Adjustments

Item No.	Date	Description	Adjustments	Payments
1.	4-11	Late payment charge on unpaid balance	24.87	

Plans and Services

Monthly Service - Apr 11 thru May 10

Charges for [REDACTED]

2. Bus Local Calling Unlimited A Business Line (Measured Rate)	117.00
Auto Redial	
Call Blocker SM	
Call Forwarding	
Call Return SM	
Call Waiting	
Caller ID Name Delivery	
Caller ID Number Delivery	
Expanded Local Calling Service	
Remote Access Call Forwarding	
Speed Calling 30	
Three-Way Calling	
Touchtone	
Unlimited Local Usage	

Charges for [REDACTED]

3. Bus Local Calling Unlimited A Business Line (Measured Rate)	117.00
Auto Redial	
Call Blocker SM	
Call Forwarding	
Call Return SM	
Call Waiting	
Caller ID Name Delivery	
Caller ID Number Delivery	
Expanded Local Calling Service	
Remote Access Call Forwarding	
Speed Calling 30	
Three-Way Calling	
Touchtone	
Unlimited Local Usage	

Total Monthly Service 234.00

Billing Summary

Online: att.com / m yatt	Page	
Plans and Services	1	300.36
1 800 321-2000		
Service Changes:		
1 800 321-2000		
Repair Services:		
1 800 286-8313		
AT&T Long Distance	2	30.89
1 800 321-2000		
Total Current Charges		331.25

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GO GREEN - Enroll in paperless billing.

Return bottom portion with your check in the enclosed envelope.

DUE BY: May 6, 2020 \$687.77 Amount After May 8, 2020 \$712.61



Past Due Charges - \$356.52 - Please Pay Immediately
 Billing Date Apr 11, 2020
 Date Mailed Apr 20, 2020

Account Number [REDACTED] 4 557
 Please include your account number on your check

GOLDS GYM
 ATTN ACCOUNTS PAYABLE
 4001 MAPLE AVE STE 200
 DALLAS TX 75219 - 3249

Make check payable to:
 AT&T
 PO BOX 105414
 ATLANTA GA 30348-5414

Attachment 3 - LEG S_billImageRequest 8700_Redacted.pdf

Description - BILL COPY



GOLDS GYM BULVERDE
4001 MAPLE AVE STE 200
DALLAS TX 75219 - 3249

Page 1 of 3
Account Number [REDACTED] 8 700
Billing Date Apr 17, 2020
Web Site att.com

Bill-At-A-Glance

Previous Bill	774.58
Payment	.00
Adjustments	54.28
Past Due - Please Pay Immediately	828.86
Current Charges	674.40
Total Amount Due	\$1,503.26
Current Charges Due in Full by	May 11, 2020

Detail of Payments and Adjustments

Item No.	Date	Description	Adjustments	Payments
1.	4-17	Late payment charge on unpaid balance	54.28	

Plans and Services

Monthly Service - Apr 17 thru May 16

Charges for [REDACTED]		
2. Bus Local Calling Unlimited B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage		127.00
Charges for [REDACTED]		
3. Bus [REDACTED] B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage		127.00
Charges for [REDACTED]		
4. Bus Local Calling Unlimited B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage		127.00
Charges for [REDACTED]		
5. Bus Local Calling Unlimited B Business Line (Measured Rate) Caller ID Name Delivery Caller ID Number Delivery Expanded Local Calling Service Touchtone Unlimited Local Usage		127.00
Total Monthly Service		508.00

Billing Summary

Online: att.com / myatt	Page	
Plans and Services	1	670.74
1 800 321-2000		
Service Changes:		
1 800 321-2000		
Repair Services:		
1 800 286-8313		
AT&T Long Distance	2	3.66
1 800 321-2000		
Total Current Charges		674.40

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GO GREEN - Enroll in paperless billing.

Return bottom portion with your check in the enclosed envelope.

DUE BY: May 11, 2020 \$1,503.26

Amount After May 13, 2020 \$1,553.84



Past Due Charges - \$828.86 - Please Pay Immediately
Billing Date Apr 17, 2020
Date Mailed Apr 24, 2020

Account Number [REDACTED] 8 700
Please include your account number on your check

GOLDS GYM BULVERDE
4001 MAPLE AVE STE 200
DALLAS TX 75219 - 3249

Make check payable to:
AT&T
PO BOX 5001
CAROL STREAM IL 60197-5001