Fill in this information to identify the case:	
Debtor 1 TRADE GLOBAL LLC	
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Case number District of LEVACA Case number	-

RECEIVED
AND FILED DIS
2019 DEC 9 PM 12 35
U.S. BANKRUFTCY COURT
MARY A. SCHOTT, CLERK

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.

P	art 1: Identify the C	laim	
1.	Who is the current creditor?	Name of the current creditor (the person or entity to be paid for this claim)	
2.	Has this claim been acquired from someone else?	Other names the creditor used with the debtor 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) Sumply MS LLC Name 1373 PCCCHM ON Number Street City State ZIP Code Contact phone 888-255-8918 Contact phone 888-255-8918 Contact email Occurring Simplems Com Contact email occurri	30
4.	Does this claim amend one already filed?	Yes. Claim number on court claims registry (if known) OO 1 Filed on 4 14 100 MM DD / YYYYY	19
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing? Sumple VMS	

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?	\$ 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.
9.	Is all or part of the claim secured?	No
		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
	Is this claim based on a 'elease?	No Yes. Amount necessary to cure any default as of the date of the petition. \$
	Is this claim subject to a right of setoff?	ρίτνο

Official Form 410 Proof of Claim page 2

☐ Yes. Identify the property: _

12. Is all or part of the claim entitled to priority under	₫ No	
11 U.S.C. § 507(a)?	☐ Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	☐ 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).	\$
endued to phonty.	■ 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.	\$
	* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after	er the date of adjustment.
Part 3: Sign Below		
The person completing	Check the appropriate box:	
this proof of claim must	I am the creditor.	
sign and date it. FRBP 9011(b).	I am the creditor's attorney or authorized agent.	
If you file this claim	☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.	
electronically, FRBP	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.	
5005(a)(2) authorizes courts to establish local rules		
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment	that when calculating the
	amount of the claim, the creditor gave the debtor credit for any payments received toward the de	ebt.
A person who files a fraudulent claim could be	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the info	ormation is true
fined up to \$500,000, imprisoned for up to 5	and correct.	
years, or both.	I declare under penalty of perjury that the foregoing is true and correct.	
18 U.S.C. §§ 152, 157, and 3571.	11 1 -1 and 9	
3371.	Executed on date	
	Signature	
	Rrint the name of the person who is completing and signing this claim:	
	Name JUSON DEVID CSWALL	>
	First name Middle name Last name	
	Title VCESTDEN	
	Company Simple VMS, LLC	
	Identify the corporate servicer as the company if the authorized agent is a servicer.	
	7373 RESCHMONT THE Suite!	40
	Address Number Street	\
	Cincinnati OH 4523	00
	City State ZIP Code	1 - Condama
	Contact phone COCCOU	morasingevins

Totals Due from Jagged Peak- assimplevms

Row Labels	Jagged	Peak total Due
JaggedPeak-Meridian-05062019-S	\$	496.99
JaggedPeak-Meridian-06242019	\$	95,085.54
JaggedPeak-Meridian-07082019	\$	133,292.86
JaggedPeak-Meridian-07152019	\$	118,385.30
JaggedPeak-Meridian-07222019	\$	115,754.19
JaggedPeak-Meridian-07292019	\$	125,283.64
JaggedPeak-Meridian-08052019	\$	155,897.05
JaggedPeak-Meridian-08122019	\$	137,502.04
JaggedPeak-Meridian-08192019	\$	119,520.40
JaggedPeak-Meridian-08262019	\$	116,633.00
JaggedPeak-Meridian-09032019	\$	127,516.98
JaggedPeak-Meridian-09092019	\$	69,943.36
JaggedPeak-Meridian-09162019	\$	90,553.97
JaggedPeak-ProvidentDrive-07082019	\$	31,735.98
JaggedPeak-ProvidentDrive-07152019	\$	30,756.20
JaggedPeak-ProvidentDrive-07222019	\$	26,748.62
JaggedPeak-ProvidentDrive-07292019	\$	27,319.74
JaggedPeak-ProvidentDrive-08052019	\$	24,797.45
JaggedPeak-ProvidentDrive-08122019	\$	29,994.62
JaggedPeak-ProvidentDrive-08192019	\$	54,560.39
JaggedPeak-ProvidentDrive-08262019	\$	31,275.27
JaggedPeak-ProvidentDrive-09032019	\$	18,905.40
JaggedPeak-ProvidentDrive-09092019	\$	8,708.74
JaggedPeak-ProvidentDrive-09162019	\$	247.27
Grand Total		\$1,690,915.00
Ammended Jagged Peak 9-15-only		\$14,430.88
Totals with ammended		\$1,705,345.88

Vendor	Vendor Client Site	Site	Invoice#	Status	Hours E	Expenses T	otal Billed	Hours Expenses Total Billed Total Due SVMS	Total Due Vendor Invoice Date Due Date Received Past Due	Invoice Date	Due Date	Received	ast Due
Staffmark	Jagged	Meridian	Staffmark Jagged Meridian JaggedPeak-Meridian-09152019-only Submitted	Submitted	107.86	0	1799.64	21.12	1778.52	9/23/19			
Iforce	Jagged	Meridian	Jagged Meridian JaggedPeak-Meridian-09152019-only Submitted	Submitted	32.24	0	569.06	13.36	555.7	9/23/19			
Kable	Jagged	Meridian	Jagged Meridian JaggedPeak-Meridian-09152019-only Submitted 343.07	Submitted	343.07	0	5833.85	54.78	5779.07	9/23/19			
Job	Jagged	Meridian	Jagged Meridian JaggedPeak-Meridian-09152019-only Submitted	Submitted	388.5	0	6228.32	58.48	6169.84	9/23/19			

ation
SÍT
夏
81
3

Case 19-15960-mkn	Claim 1-2et to SimpleVMS after Commission	Commission for Rob Geist	Hotal SimpleVMS Discount	2/17/16 and constant	Depart Total	SimpleVMS Svc. Fee	∯otal Before SimpleVMS Svc. Fee	<mark>გ</mark> 0/23/2019 Total	কুhe Job Center	Staffmark	Kable Staffing	iForce	Vendor
	ion								1.0000%	1.2500%	1.0000%	2.5000%	Discount
				87.22	074 22			871.22	388.05	107.86	343.07	32.24	Hours #
				c	-			0	0	0	0	0	# Exps
				\$ I4,430.00	\$1.4 A20 88			\$14,430.88	\$6,228.32	\$1,799.64	\$5,833.85	\$569.06	Total
				+ - - -	£147774			\$147.74	\$58.48	\$21.12	\$54.78	\$13.36	Discount I
				1012312013	- 1			10/23/2019	10/23/2019	10/23/2019	10/23/2019	10/23/2019	Date to Pay
	\$140 .35 [\$7.39	\$147.74	\$14,430.00	\$1 <i>1 1</i> 20 88	\$147.74	\$14,430.88	\$14,283.14	\$6,169.84	\$1,778.52	\$5,779.07	\$555.70	Amount I
		-		-	ل			[]					Paid (
								10/23/2019 to Op Acct: \$147.74					Amount Paid Check / Reference Number

District of Nevada Claims Register

19-15960-mkn TRADEGLOBAL, LLC, A DELAWARE LIMITED LIABILITY COM

Judge: MIKE K. NAKAGAWA Chapter: 11

Office: Las Vegas

Last Date to file claims: 01/22/2020

Trustee:

Last Date to file (Govt): 03/16/2020

Creditor: (11029853) Claim No: 1 Status: SIMPLE VMS, LLC Original Filed Filed by: CR

7373 BEECHMONT Date: 09/24/2019 Entered by: BMC GROUP, INC.

CINCINNATI, OH Original Entered (1) 45230 Claimant History Date: 09/24/2019 Modified:

Last Amendment Filed: 12/17/2019 Last Amendment Entered: 12/17/2019

Amount claimed: \$14430.87

History:

Details 1-1 09/24/2019 Claim #1 filed by SimpleVMS, LLC, Amount claimed: \$1690915.00 (admin)

Details 1-2 12/17/2019 Amended Claim #1 filed by SIMPLE VMS, LLC, Amount claimed: \$14430.87 (BMC

GROUP, INC. (1))

Description: (1-2) Services performed

Remarks: (1-2) US BANKRUPTCY COURT RECEIVED 12/9/2019

Claims Register Summary

Case Name: TRADEGLOBAL, LLC, A DELAWARE LIMITED LIABILITY COM

Case Number: 19-15960-mkn

Chapter: 11

Date Filed: 09/16/2019 **Total Number Of Claims:** 1

Total Amount Claimed*	\$14430.87
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		
Priority		
Administrative		