

Fill in this information to identify the case:	
Debtor 1	JAGGED PEAK CANADA, INC.
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court	District of Nevada
Case number:	20-12599

FILED
 U.S. Bankruptcy Court
 District of Nevada
 6/18/2020
 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.

Part 1: Identify the Claim

1. Who is the current creditor?	CSC/Corporation Service Company Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>CSC</u>	
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? 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)
	CSC/Corporation Service Company Name Acct No xxx-0043 251 Little Falls Dr. Wilmington, DE 19808 Contact phone <u>800-927-9801</u> Contact email <u>Joanne.Smith@cscglobal.com</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	_____ Name Contact phone _____ Contact email _____
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? 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? \$ 653.00
 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 healthcare 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. \$ _____

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)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply.</i>	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the 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 \$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).	\$ _____
	<input type="checkbox"/> 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).	\$ _____
	<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 4/1/22 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 6/18/2020
MM / DD / YYYY

/s/ Joanne Smith

Signature

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

Name Joanne Smith

First name Middle name Last name

Title Workflow Coordinator

Company Corporation Service Company

Identify the corporate servicer as the company if the authorized agent is a servicer

Address 251 Little Falls Drive

Number Street

Wilmington, DE 19808

City State ZIP Code

Contact phone 3026365401 Email Joanne.Smith@cscglobal.com



CSC
251 Little Falls Drive
Wilmington, DE 19808-1674
USA
EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109158415	11-FEB-2020	\$ 148.00

Billing Address:

Jeremy Rosenthal
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Shipping Address:

Jeremy Rosenthal
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Order Date: 13-OCT-2019	Order No: 978705
Ordered By: Jeremy Rosenthal 8298611 Force 10 Partners 20341 SW Birch St Ste 220 Newport Beach, CA 92660-1514	

Description of Services	Quantity	Unit Cost	Amount
Matter No:2020 JANUARY RENEWALS			
RE:JAGGED PEAK, INC. / Company ID:3852928			
Line:007			
NJQU00	FOREIGN FILING IN NEW JERSEY	0	0.00
NJ4ARM	DISBURSEMENT/COST - ANNUAL REPORT/TAX RETURN	1	78.00
NJ410S	SERVICE FEE - PREPARE & FILE ANNUAL REPORT/TAX RETURN - ANNUAL REPORT MONITORING SERVICE	1	175.00
NJARDT	SPECIAL ARRANGEMENT DISCOUNT	-1	105.00
			Subtotal
			\$ 148.00
		Total [USD]	\$ 148.00



CSC
251 Little Falls Drive
Wilmington, DE 19808-1674
USA
EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109158415	11-FEB-2020	\$ 148.00

Billing Address:

Jeremy Rosenthal
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Shipping Address:

Jeremy Rosenthal
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Order Date: 13-OCT-2019	Order No: 978705
Ordered By: Jeremy Rosenthal 8298611 Force 10 Partners 20341 SW Birch St Ste 220 Newport Beach, CA 92660-1514	

THANK YOU FOR USING CSC - Tara D'Ottavio - 800-927-9800

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TERMS: NET 30 DAYS - Invoices not paid within 30 days are subject to a 1.5% per month finance charge. CSC extends credit to the party requesting service whom it holds responsible for payment in full for all monies expended and services rendered.

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Please return this portion with your payment.

Account No:	Invoice No	Invoice Date	Amount Due
8298611	81109158415	11-FEB-2020	\$ 148.00

Amount Remitted: \$ _____

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Mail Payment To:
CSC
P.O. Box 13397
Philadelphia, PA 19101-3397
USA



CSC
 251 Little Falls Drive
 Wilmington, DE 19808-1674
 USA
 EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109158432	11-FEB-2020	\$ 115.00

Billing Address:

Jeremy Rosenthal
 Force 10 Partners
 20341 SW Birch St
 Ste 220
 Newport Beach, CA 92660-1514

Shipping Address:

Jeremy Rosenthal
 Force 10 Partners
 20341 SW Birch St
 Ste 220
 Newport Beach, CA 92660-1514

Order Date: 13-OCT-2019	Order No: 978705
Ordered By: Jeremy Rosenthal	
8298611	
Force 10 Partners	
20341 SW Birch St	
Ste 220	
Newport Beach, CA 92660-1514	

Description of Services	Quantity	Unit Cost	Amount	
Matter No:2020 JANUARY RENEWALS				
RE:JAGGED PEAK, INC. / Company ID:3852928				
Line:001				
AZQU00	FOREIGN FILING IN ARIZONA	0	0.00	0.00
AZ4ARM	DISBURSEMENT/COST - ANNUAL REPORT/TAX RETURN	1	45.00	45.00
AZ410S	SERVICE FEE - PREPARE & FILE ANNUAL REPORT/TAX RETURN - ANNUAL REPORT MONITORING SERVICE	1	175.00	175.00
AZARDT	SPECIAL ARRANGEMENT DISCOUNT	-1	105.00	-105.00
			Subtotal	\$ 115.00
			Total [USD]	\$ 115.00



CSC
251 Little Falls Drive
Wilmington, DE 19808-1674
USA
EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109158432	11-FEB-2020	\$ 115.00

Billing Address:

Jeremy Rosenthal
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Shipping Address:

Jeremy Rosenthal
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Order Date: 13-OCT-2019	Order No: 978705
Ordered By: Jeremy Rosenthal 8298611 Force 10 Partners 20341 SW Birch St Ste 220 Newport Beach, CA 92660-1514	

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Account No:	Invoice No	Invoice Date	Amount Due
8298611	81109158432	11-FEB-2020	\$ 115.00

Amount Remitted: \$ _____

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Philadelphia, PA 19101-3397
USA



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 251 Little Falls Drive
 Wilmington, DE 19808-1674
 USA
 EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109205040	20-FEB-2020	\$ 125.00

Billing Address:

Darryl Myers
 Force 10 Partners
 20341 SW Birch St
 Ste 220
 Newport Beach, CA 92660-1514

Shipping Address:

Darryl Myers
 Force 10 Partners
 20341 SW Birch St
 Ste 220
 Newport Beach, CA 92660-1514

Order Date: 20-FEB-2020	Order No: 186669
Ordered By: Darryl Myers	
8298611	
Force 10 Partners	
20341 SW Birch St	
Ste 220	
Newport Beach, CA 92660-1514	

Description of Services	Quantity	Unit Cost	Amount
Matter No:2020 MARCH RENEWALS			
RE:JAGGED PEAK, INC. / Company ID:3852928			
Line:005			
NEQU00 FOREIGN FILING IN NEBRASKA	0	0.00	0.00
NE4ARM DISBURSEMENT/COST - ANNUAL REPORT/TAX RETURN	1	55.00	55.00
NE410S SERVICE FEE - PREPARE & FILE ANNUAL REPORT/TAX RETURN - ANNUAL REPORT MONITORING SERVICE	1	175.00	175.00
NEARDT SPECIAL ARRANGEMENT DISCOUNT	-1	105.00	-105.00
		Subtotal	\$ 125.00
		Total [USD]	\$ 125.00



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USA
EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109205040	20-FEB-2020	\$ 125.00

Billing Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Shipping Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Order Date: 20-FEB-2020	Order No: 186669
Ordered By: Darryl Myers 8298611 Force 10 Partners 20341 SW Birch St Ste 220 Newport Beach, CA 92660-1514	

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Account No:	Invoice No	Invoice Date	Amount Due
8298611	81109205040	20-FEB-2020	\$ 125.00

Amount Remitted: \$ _____

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USA



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Wilmington, DE 19808-1674
USA
EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109356019	27-MAR-2020	\$ 135.00

Billing Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Shipping Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Order Date: 08-DEC-2019	Order No: 091325
Ordered By: Darryl Myers	
8298611	
Force 10 Partners	
20341 SW Birch St	
Ste 220	
Newport Beach, CA 92660-1514	

Description of Services	Quantity	Unit Cost	Amount
Matter No:2020 MARCH RENEWALS			
RE:JAGGED PEAK, INC. / Company ID:3852928			
Line:010			
WIQU00 FOREIGN FILING IN WISCONSIN	0	0.00	0.00
WI4ARM DISBURSEMENT/COST - ANNUAL REPORT/TAX RETURN	1	65.00	65.00
WI410S SERVICE FEE - PREPARE & FILE ANNUAL REPORT/TAX RETURN - ANNUAL REPORT MONITORING SERVICE	1	175.00	175.00
WIARDT SPECIAL ARRANGEMENT DISCOUNT	-1	105.00	-105.00
		Subtotal	\$ 135.00
		Total [USD]	\$ 135.00



CSC
251 Little Falls Drive
Wilmington, DE 19808-1674
USA
EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109356019	27-MAR-2020	\$ 135.00

Billing Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Shipping Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Order Date: 08-DEC-2019	Order No: 091325
Ordered By: Darryl Myers 8298611 Force 10 Partners 20341 SW Birch St Ste 220 Newport Beach, CA 92660-1514	

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Account No:	Invoice No	Invoice Date	Amount Due
8298611	81109356019	27-MAR-2020	\$ 135.00

Amount Remitted: \$ _____

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P.O. Box 13397
Philadelphia, PA 19101-3397
USA

0 000081109356019 0000013500



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 251 Little Falls Drive
 Wilmington, DE 19808-1674
 USA
 EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109456311	13-APR-2020	\$ 130.00

Billing Address:

Darryl Myers
 Force 10 Partners
 20341 SW Birch St
 Ste 220
 Newport Beach, CA 92660-1514

Shipping Address:

Darryl Myers
 Force 10 Partners
 20341 SW Birch St
 Ste 220
 Newport Beach, CA 92660-1514

Order Date: 10-APR-2020	Order No: 259614
Ordered By: Darryl Myers	
8298611	
Force 10 Partners	
20341 SW Birch St	
Ste 220	
Newport Beach, CA 92660-1514	

Description of Services	Quantity	Unit Cost	Amount	
Matter No:PAST DUE RENEWAL				
RE:JAGGED PEAK, INC. / Company ID:3852928				
Line:005				
COQU00	FOREIGN FILING IN COLORADO	0	0.00	0.00
CO4ARM	DISBURSEMENT/COST - ANNUAL REPORT/TAX RETURN	1	60.00	60.00
CO410S	SERVICE FEE - PREPARE & FILE ANNUAL REPORT/TAX RETURN - ANNUAL REPORT MONITORING SERVICE	1	175.00	175.00
COARDT	SPECIAL ARRANGEMENT DISCOUNT	-1	105.00	-105.00
			Subtotal	\$ 130.00
			Total [USD]	\$ 130.00



CSC
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USA
EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8298611	81109456311	13-APR-2020	\$ 130.00

Billing Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Shipping Address:

Darryl Myers
Force 10 Partners
20341 SW Birch St
Ste 220
Newport Beach, CA 92660-1514

Order Date: 10-APR-2020	Order No: 259614
Ordered By: Darryl Myers 8298611 Force 10 Partners 20341 SW Birch St Ste 220 Newport Beach, CA 92660-1514	

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Account No:	Invoice No	Invoice Date	Amount Due
8298611	81109456311	13-APR-2020	\$ 130.00

Amount Remitted: \$ _____

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P.O. Box 13397
Philadelphia, PA 19101-3397
USA

District of Nevada Claims Register

[20-12599-mkn JAGGED PEAK CANADA, INC.](#)

Judge: MIKE K. NAKAGAWA

Chapter: 11

Office: Las Vegas

Last Date to file claims: 09/30/2020

Trustee:

Last Date to file (Govt): 11/24/2020

Creditor: (11171933) CSC/Corporation Service Company Acct No xxx-0043 251 Little Falls Dr. Wilmington, DE 19808	Claim No: 1 <i>Original Filed</i> Date: 06/18/2020 <i>Original Entered</i> Date: 06/18/2020	Status: Filed by: CR Entered by: admin Modified:
Amount claimed: \$653.00		
History: Details 1 - 06/18/2020 Claim #1 filed by CSC/Corporation Service Company, Amount claimed: \$653.00 (admin)		
Description:		
Remarks:		

Claims Register Summary

Case Name: JAGGED PEAK CANADA, INC.

Case Number: 20-12599-mkn

Chapter: 11

Date Filed: 05/28/2020

Total Number Of Claims: 1

Total Amount Claimed*	\$653.00
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		