Case 19-15959-mkn Claim 1-1 Filed 09/17/19 Page 1 of 3

Fill in this information to identify the case:			
Debtor 1 JAGGED PEAK, INC.			
Debtor 2			
(Spouse, if filing)			
United States Bankruptcy Court			
Case number: 19-15959			

FILED
U.S. Bankruptcy Court
District of Nevada
9/17/2019

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?	ThyssenKrupp Elevator Corp. Name of the current creditor (the person or entity to be paid for this claim)				
	Other names the creditor used with the debtor				
2.Has this claim been acquired from someone else?	✓ No ☐ Yes. From whom?				
3.Where should notices and payments to the	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)			
creditor be sent?	ThyssenKrupp Elevator Corp.				
Federal Rule of	Name	Name			
Bankruptcy Procedure (FRBP) 2002(g)	Law Office of D. Park Smith 250 Cherry Springs Road, Suite 200 Hunt, TX 78024				
	Contact phone <u>830 238–3591</u>	Contact phone			
	Contact email park@dparksmithlaw.com	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	r) Filed on			
F. Do wood know if onwood	Ma No	MM / DD / YYYY			
5.Do you know if anyone else has filed a proof of claim for this claim?	Yes. Who made the earlier filing?				

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Give Information About the Claim as of the Date the Case Was Filed 6.Do you have any No number you use to Y Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 2703 identify the debtor? 7.How much is the Does this amount include interest or other charges? \$ 548.07 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 Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful the claim? 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. elevator maintenance & repair 9. Is all or part of the ☑ No claim secured? ☐ Yes. The claim is secured by a lien on property. Nature of property: If the claim is secured by the debtor's principal residence, file a Mortgage ☐ Real estate. 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 (The sum of the secured and \$ unsecured: 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) % П Fixed П Variable 10. Is this claim based on Y No a lease? Yes. Amount necessary to cure any default as of the date of the petition.\$ 11.Is this claim subject to Y Nο

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Yes. Identify the property:

a right of setoff?

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12.Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	Y	No Yes. Check all that apply:		Amount entitled to priority	
A claim may be partly priority and partly	•	☐ Domestic support obligation under 11 U.S.C. § 507(a	ations (including alimony and child support) 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 deposi property or services for U.S.C. § 507(a)(7).	ts toward purchase, lease, or rental of personal, family, or household use. 11	\$	
entitied to priority.		☐ Wages, salaries, or con 180 days before the bar	nmissions (up to \$13,650*) earned within hkruptcy petition is filed or the debtor's	\$	
			ver is earlier. 11 U.S.C. § 507(a)(4). d to governmental units. 11 U.S.C. §	\$	
		☐ Contributions to an emp	ployee benefit plan. 11 U.S.C. § 507(a)(5).	\$	
		☐ Other. Specify subsection	on of 11 U.S.C. § 507(a)(_) that applies	\$	
		* Amounts are subject to adjustn of adjustment.	nent on 4/1/22 and every 3 years after that for cases	s begun on or after the date	
Part 3: Sign Below					
The person completing this proof of claim must	Che	ck the appropriate box:			
sign and date it. FRBP 9011(b).	☐ I am the creditor.				
If you file this claim	V	I am the creditor's attorney	•	D. I. 0004	
electronically, FRBP 5005(a)(2) authorizes courts		,	otor, or their authorized agent. Bankruptcy		
to establish local rules specifying what a signature	☐ 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				
is.	the a	mount of the claim, the creditor g	ave the debtor credit for any payments received tow	ard the debt.	
A person who files a fraudulent claim could be			s Proof of Claim and have a reasonable belief that the	ne information is true	
fined up to \$500,000, imprisoned for up to 5 years, or both.	and correct. I declare under penalty of perjury that the foregoing is true and correct.				
18 U.S.C. §§ 152, 157 and 3571.	Exe	cuted on date 9/17/20	019		
		MM / DI	D/YYYY		
	/s/ 1	D. Park Smith			
	Sign	ature			
	ŭ		no is completing and signing this claim:		
	Nar	·	D. Park Smith		
	Title)	First name Middle name Last name Attorney		
	Con	npany			
			Identify the corporate servicer as the company if the servicer	ne authorized agent is a	
	Add	Iress	250 Cherry Springs Road, Suite 200		
			Number Street		
			Hunt, TX 78024		
			City State ZIP Code		
	Cor	ntact phone 830 238-359	_ "	thlaw.com	

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thyssenkrupp

thyssenkrupp Elevator Corporation Attn: Accounts Receivable Dept.

7481 N.W. 66th St. Miami, FL 33166

BILL TO:

MAINTENANCE INVOICE

Page 1 of 1

INVOICE DATE: 09/01/2019 132703 CUSTOMER #: JOB #: US111683 INVOICE #: 3004805943

PO #:

SERVICE DATE: 09/01/2019 TO 11/30/2019

TFRMS: IMMEDIATE **TOTAL DUE:** \$548.07

VISA DISCOVER

TO VIEW AND PAY ONLINE GO TO: https://thyssenkruppelevator.billtrust.com USE THIS ENROLLMENT TOKEN: XWX THS MKX

SHIP TO:

JAGGED PEAK 2007 GANDY BLVD N

ST PETERSBURG FL 33716-2172

ATTN: ACCOUNTS PAYABLE JAGGED PEAK

7650 W COURTNEY CAMPBELL CAUSEWAY SUITE 1200 TAMPA FL 33607-7214

ITEM	QUANTITY	DESCRIPTION	EXTENDED AMOUNT
		TAMPA BRANCH This is a billing for the service period referenced above.	
C131US	1	Gold - Full Maintenance, Customer pays full amount of Overtime - Elevator - With Phone Monitoring JAGGED PEAK	\$548.07
		ATTENTION: We are moving to a new bank and have a new remittance address.	

Please update your records to reflect our new remittance address. You can also contact us at ARsupport@thyssenkrupp.com to set up ACH payments, which is our preferred payment method.

Visit our online portal to view, print and pay your bills online. Look for your enrollment token on this bill and visit

https:thyssenkruppelevator.billtrust.com

AMOUN ⁻	Т	DISCOUNT	SUBTOTAL	SALES TAX	PLEASE PAY
\$548.07	7	\$0.00	\$548.07	\$0.00	\$548.07

For Service Related or General Questions, please call 813-287-1744. For Billing or Payment questions, please call 678-424-5634.

Goods or services covered by this invoice were produced in compliance with the requirements of the Fair Labor Standards Act of 1938, as amended.

RETURN THIS PORTION WITH YOUR PAYMENT IN THE ENVELOPE PROVIDED WITH THE REMITTANCE ADDRESS VISIBLE

thyssenkrupp

thyssenkrupp Elevator Corporation Attn: Accounts Receivable Dept. 7481 N.W. 66th St. Miami, FL 33166

INVOICE DATE: 09/01/2019 **CUSTOMER #:** 132703 JOB #: US111683 3004805943 INVOICE #: PO #:

SERVICE DATE: 09/01/2019 TO 11/30/2019

TERMS: **IMMEDIATE TOTAL DUE:** 548.07

JAGGED PEAK

Amount Enclosed: \$

Payment Method Personal Check Enclosed ☐ Money Order Enclosed Cashiers Check Enclosed Please Make Check Payment To: thyssenkrupp Elevator Corporation

REMIT PAYMENT TO:

THYSSENKRUPP ELEVATOR CORPORATION PO BOX 3796 CAROL STREAM, IL 60132-3796

District of Nevada Claims Register

19-15959-mkn JAGGED PEAK, INC.

Judge: MIKE K. NAKAGAWA Chapter: 11

Office: Las Vegas Last Date to file claims: 01/15/2020 Trustee: Last Date to file (Govt): 03/16/2020

Creditor:(10931556)Claim No: 1Status:ThyssenKrupp Elevator Corp.Original FiledFiled by: CRLaw Office of D. Park SmithDate: 09/17/2019Entered by: admin250 Cherry Springs Road, SuiteOriginal EnteredModified:

200 Date: 09/17/2019

Hunt, TX 78024

Amount claimed: \$548.07

History:

Details 1-1 09/17/2019 Claim #1 filed by ThyssenKrupp Elevator Corp., Amount claimed: \$548.07 (admin)

Description:

Remarks: (1-1) Account Number (last 4 digits):2703

Claims Register Summary

Case Name: JAGGED PEAK, INC. Case Number: 19-15959-mkn

Chapter: 11

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

Total Amount Claimed*	\$548.07
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		