

Fill in this information to identify the case:

Debtor 1 Jagged Peak Inc

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of Nevada

Case number 19-15959

RECEIVED

OCT 08 2019

BMC GROUP

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?

United Delivery Service
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 creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?

United Delivery Service
Name
15376 Summit Ave Ste 1F
Number Street
Oakbrook Terrace IL 60181
City State ZIP Code

Contact phone 630-930-5221

Contact email billing@uniteddeliveryservice.com

Where should payments to the creditor be sent? (if different)

Name _____

Number Street _____

City State ZIP Code _____

Contact phone _____

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? _____

JAGGED PEAK Ct ID



00004

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?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>3 6 8 2</u>
7. How much is the claim?	\$ <u>82,879.33</u> Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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. <u>services performed</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> 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) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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:

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.

☐ 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.

\$ _____

* 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 10 01 2019
MM / DD / YYYY

Ronald Castaldo

Signature

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

Name

Ronald
First name

Middle name

Castaldo
Last name

Title

Vice President

Company

United Delivery Service

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

Address

15376 Summit Ave Ste 1 F
Number Street

Oakbrook Terrace
City

IL
State

60181
ZIP Code

Contact phone

630-930-5221

Email

Billing@uniteddeliveryservice.com

10:12 AM

United Delivery Service2, Ltd

10/01/19

Customer Open Balance

Accrual Basis

All Transactions

<u>Type</u>	<u>Date</u>	<u>Num</u>	<u>Memo</u>	<u>Due Date</u>	<u>Open Balance</u>	<u>Amount</u>
OVN-JAGGED PEAK						
Invoice	08/18/2019	212890		08/20/2019	10,242.81	10,242.81
Invoice	08/25/2019	213145		08/27/2019	9,588.95	9,588.95
Invoice	09/01/2019	213429		09/04/2019	11,280.81	11,280.81
Invoice	09/08/2019	213684		09/10/2019	11,840.08	11,840.08
Invoice	09/15/2019	213944		09/17/2019	9,777.83	9,777.83
Invoice	09/22/2019	214203		09/24/2019	16,044.32	16,044.32
Invoice	09/29/2019	214462		10/01/2019	14,104.53	14,104.53
Total OVN-JAGGED PEAK					82,879.33	82,879.33
TOTAL					82,879.33	82,879.33

District of Nevada Claims Register

[19-15959-mkn JAGGED PEAK, INC., A NEVADA CORPORATION](#)

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: (10959901)
UNITED DELIVERY SERVICE
15376 SUMMIT AVE STE 1F
OAKBROOK TERRACE, IL
60181

Claim No: 9
Original Filed Date: 10/11/2019
Original Entered Date: 10/11/2019

Status:
Filed by: CR
Entered by: BMC GROUP, INC. (1)
Modified:

Amount claimed: \$82879.33

History:

[Details](#) [9-](#) 10/11/2019 Claim #9 filed by UNITED DELIVERY SERVICE, Amount claimed: \$82879.33 (BMC
[1](#) GROUP, INC. (1))

Description: (9-1) Services Performed

Remarks: (9-1) ClaimsAgent Recvd: 10/8/2019

Claims Register Summary

Case Name: JAGGED PEAK, INC., A NEVADA CORPORATION

Case Number: 19-15959-mkn

Chapter: 11

Date Filed: 09/16/2019

Total Number Of Claims: 1

Total Amount Claimed*	\$82879.33
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		