

## 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  
DEC 16 2019  
BMC GROUP

## Official Form 410

## Proof of Claim

04/16

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?	<u>Bright House Networks</u> Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor <u>Spectrum, Charter Communications</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?	Where should notices to the creditor be sent?  <u>Spectrum</u> Name <u>1600 Dublin Rd</u> Number Street <u>Columbus OH 43215</u> City State ZIP Code  Contact phone <u>614-826-2572</u> Contact email <u>debra.shanklin@charter.com</u>	Where should payments to the creditor be sent? (if different)  <u>Spectrum</u> Name <u>1600 Dublin Rd</u> Number Street <u>Columbus OH 43215</u> City State ZIP Code  Contact phone <u>614-826-2572</u> Contact email <u>debra.shanklin@charter.com</u>
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)  Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____		
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? _____	

JAGGED PEAK Ctl ID



00056

**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>0</u> <u>3</u> <u>0</u> <u>1</u>
7. How much is the claim?	\$ <u>2,179.68</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 Rendered</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.  <b>Nature of property:</b> <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: _____  <b>Basis for perfection:</b> _____ 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.)  <b>Value of property:</b> \$ _____ <b>Amount of the claim that is secured:</b> \$ _____ <b>Amount of the claim that is unsecured:</b> \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)  <b>Amount necessary to cure any default as of the date of the petition:</b> \$ _____  <b>Annual Interest Rate</b> (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 \$2,850\* 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 \$12,850\*) 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 4/01/19 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 11/25/2019  
MM / DD / YYYY

Debra Shanklin

Signature

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

Name	<u>Debra</u>	<u>Delois</u>	<u>Shanklin</u>
	First name	Middle name	Last name
Title	<u>Bankruptcy Analyst</u>		
Company	<u>Time Warner / Spectrum Cable Inc.</u>		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	<u>1600 Dublin Rd</u>		
	Number	Street	
	<u>Columbus</u>	<u>OH</u>	<u>43215</u>
	City	State	ZIP Code
Contact phone	<u>614-826-2572</u>	Email	<u>debra.shanklin@charter.com</u>

December 9, 2019

Jagged Peak Inc  
7650 Courtney Campbell Causeway  
Suite 1200  
Tampa, FL 33607

Re: Chapter 11 Bankruptcy Case 19-15959 filed 9/16/2019

Dear Sirs

Enclosed is a Proof of claim for the above business Jagged Peak.  
Please process and inform me you received our Proof of claim form.  
Your assistance is greatly appreciated.

Respectfully

Debra Shanklin | Credit Services Specialist- Bankruptcy Analyst  
1600 Dublin Rd | Columbus, OH 43212  
Phone: 614-255-6377



August 25, 2019  
 Invoice Number: 084100301082519  
 Account Number: **0050841003-01**  
 Security Code: **2573**  
 Service At: 2007 GANDY BLVD N  
 RRBC  
 SAINT PETERSBURG, FL 33702-2169

# SPECTRUM ENTERPRISE NEWS

## Contact Us

Visit us at [Enterprise.Spectrum.com](http://Enterprise.Spectrum.com)  
 Or, call us at 1-866-477-1386

## Summary Services from 08/24/19 through 09/23/19 details on following pages

Previous Balance	0.00
Payments Received	0.00
Remaining Balance	\$0.00
Spectrum Enterprise Internet	1,080.00
One-Time Charges	250.00
Partial Month Charges	1,080.00
Taxes, Fees and Charges	17.50
Current Charges	\$2,427.50
Total Due by 09/10/19	\$2,427.50



**Thank you for choosing Spectrum Enterprise.**  
 We appreciate your prompt payment and value you as a client.



4145 S. Falkenburg Rd Riverview, FL 33578-8652  
 7635 1610 NO RP 25 08252019 NNNNNY 01 001978 0009

JAGGED PEAK INC  
 7560 COURTNEY CAMPBELL  
 TAMPA FL 33607-8413

August 25, 2019

JAGGED PEAK INC

Invoice Number: 084100301082519  
 Account Number: 0050841003-01  
 Service At: 2007 GANDY BLVD N  
 RRBC  
 SAINT PETERSBURG, FL 33702-2169

<b>Total Due by 09/10/19</b>	<b>\$2,427.50</b>
<b>Amount you are enclosing</b>	<b>\$</b>



Please Remit Payment To:  
 BRIGHT HOUSE NETWORKS  
 PO BOX 790450  
 SAINT LOUIS, MO 63179-0450



0001200100508410030148242750

Page 2 of 2

August 25, 2019



Invoice Number: 084100301082519  
 Account Number: 0050841003-01  
 Security Code: 2573

**Contact Us**  
 Visit us at [Enterprise.Spectrum.com](http://Enterprise.Spectrum.com)  
 Or, call us at 1-866-477-1386

7635 1610 NO RP 25 08252019 NNNNNY 01 001978 0009

### Charge Details

Previous Balance	0.00
Remaining Balance	\$0.00

Payments received after 08/25/19 will appear on your next bill.

Services from 08/24/19 through 09/23/19

### Spectrum Enterprise Internet

Fiber Internet 100Mbps	1,080.00
	<b>\$1,080.00</b>

Spectrum Enterprise Internet Total	\$1,080.00
------------------------------------	------------

### One-Time Charges

Dedicated Access Installation	07/24	250.00
One-Time Charges Total		\$250.00

### Partial Month Charges

Fiber Internet 100Mbps	07/24-08/23	1,080.00
Partial Month Charges Total		\$1,080.00

### Taxes, Fees and Charges

State Sales Tax	17.50
Taxes, Fees and Charges Total	\$17.50

Current Charges	\$2,427.50
Total Due by 09/10/19	\$2,427.50

### Billing Information

**Terms & Conditions** - Spectrum's detailed standard terms and conditions for service are located at [spectrum.com/policies](http://spectrum.com/policies).

**Tax and Fees** - This statement reflects the current taxes and fees for your area (including sales, excise, user taxes, etc.). These taxes and fees may change without notice. Visit [spectrum.net/taxesandfees](http://spectrum.net/taxesandfees) for more information.

**Past Due Fee / Late Fee Reminder** - A late fee will be assessed for past due charges for service.

**Billing Practices** - Spectrum Enterprise mails monthly, itemized invoices for all monthly services in advance. A full payment is required on or before the due date indicated on this invoice. Payments made after the indicated due date may result in a late payment processing charge. Failure to pay could result in the disconnection of all your Spectrum Business service(s). Disconnection of Business Voice service may also result in the loss of your phone number.

**Changing Business Locations** - Please contact Spectrum Enterprise before moving your Business Voice modem to a new address. To establish service at your new location or return equipment, please contact your Spectrum Enterprise Account Executive at least twenty one (21) business days prior to your move.

**Authorization to Convert your Check to an Electronic Funds Transfer Debit** - For your convenience, if you provide a check as payment, you authorize Spectrum Enterprise to use the information from your check to make a one-time electronic funds transfer from your account. If you have any questions, please call our office at the telephone number on the front of this invoice. To assist you in future payments, your bank or credit card account information may be electronically stored in our system in a secure, encrypted manner.

**Complaint Procedures** - You have 60 days from the billing date to register a complaint if you disagree with your charges.



Visit [Spectrum.com/stores](http://Spectrum.com/stores) for store locations. For questions or concerns, visit [Spectrum.net/support](http://Spectrum.net/support) or call 1-855-657-7328.

### Your WAY can be the GREEN way! GO GREEN with Spectrum Enterprise.

Online Bill Pay is helping the environment one customer at a time. It's easy - all you need to do is sign up for Online Bill Pay. It will save you money on postage and time - and it will also save trees!

Enrolling is easy, just go to [Enterprise.Spectrum.com](http://Enterprise.Spectrum.com). Each month, you'll receive a paperless e-bill that you pay online with your choice of payment options.

- Debit Card - Credit Card - Electronic Funds Transfer
- Receive a quick summary of your account at any time
- Access up to 6 months of statements



### Payment Options

**Pay Online** - Create or Login to pay or view your bill online at [Spectrumbusiness.net](http://Spectrumbusiness.net).

**Pay by Mail** - Detach payment coupon and enclose with your check made payable to Bright House Networks. Please do not include correspondences of any type with payments.

For questions or concerns, please call 1-866-477-1386.



## 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:** (11029852)  
SPECTRUM  
1600 DUBLIN RD  
COLUMBUS, OH 43215

**Claim No: 48**  
*Original Filed*  
*Date:* 12/16/2019  
*Original Entered*  
*Date:* 12/16/2019

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

Amount claimed: \$2179.67

**History:**

[Details](#) [48-1](#) 12/16/2019 Claim #48 filed by SPECTRUM, Amount claimed: \$2179.67 (BMC GROUP, INC. (1))  
[1](#)

**Description:** (48-1) Services performed

**Remarks:** (48-1) ClaimsAgent Recvd: 12/16/2019

### 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

<b>Total Amount Claimed*</b>	\$2179.67
<b>Total Amount Allowed*</b>	

\*Includes general unsecured claims

**The values are reflective of the data entered. Always refer to claim documents for actual amounts.**

	Claimed	Allowed
<b>Secured</b>		
<b>Priority</b>		
<b>Administrative</b>		