JAN 1 5 2020

Fill in this information to identify the case:	BMC GROUP
Debtor 1 Jagged Peak, Inc.	
Debtor 2 (Spouse, if filing)  United States Bankruptcy Court for the: District of Nevada	JAN <b>1 5 2020</b>
Case number 19-15959	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.

1.	Who is the current	Danson Inc.						
	creditor?	Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor Aegis Protective Services						
2.	Has this claim been acquired from someone else?	☑ No □ Yes. From whom?						
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  Aegis Protective Services			Where should payments to the creditor be sent? (if different)			
	Federal Rule of	Name	ei vices		Name			
	Bankruptcy Procedure	3033 Robertson A	venue		, tuino			
	(FRBP) 2002(g)	Number Street	- TVCTIGE		Number	Street		
		Cincinnati	ОН	45209				
		City	State	ZIP Code	City	State	ZIP Code	
		Contact phone 513-94	8-0066, exte	nsion 145	Contact phone			
TATA MANTANTAN TONONTON TONONTON TONOTHE STATE S		Contact email pamela.carlson@aegis-ps.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	er on court claim	ns registry (if known) _		Filed on	O / YYYY	
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made t	he earlier filing?					

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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?	\$ 128,005.94. 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).					
В.	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.  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:					
		<ul> <li>□ 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.</li> <li>□ Motor vehicle</li> <li>□ Other. Describe:</li> </ul>					
		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	<b>☑</b> No					
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.					
11	. Is this claim subject to a	<b>☑</b> No					
	right of setoff?	☐ Yes. Identify the property:					

**Proof of Claim** 

12. Is all or part of the claim entitled to priority under	<b>☑</b> No					1991:50
11 U.S.C. § 507(a)?	Yes. Chec	k 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).					\$
onuse to phony.	<ul> <li>□ 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).</li> <li>□ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</li> </ul>					\$
						\$
	☐ Contrib	\$				
		Specify subsection of 11 U.S.C. §				\$
					_	
	* Amounts	are subject to adjustment on 4/01/22 a	ind every 3 years after th	at for cases I	egun on or af	er the date of adjustment.
Part 3: Sign Below						
The person completing	Check the appr	opriate box:				
this proof of claim must sign and date it.	☑ I am the ci	editor.				
FRBP 9011(b).	I am the creditor's attorney or authorized agent.					
If you file this claim	☐ I am the tr	ustee, or the debtor, or their autho	rized agent. Bankrupt	cy Rule 300	)4.	
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
to establish local rules						
specifying what a signature is.	I understand th	at an authorized signature on this	Proof of Claim serves	as an ackr	owledgment	that when calculating the
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Evenuted on de	ote 01/10/2020				
	Executed on da	MM / DD / YYYY				
	/3	1101	-			
	Signature	<del>-</del>	Application			
	Print the name of the person who is completing and signing this claim:					
	Name	Pamela Jeanne Carlson	ì			
	Name	First name	Middle name		Last name	
	Title	Controller				
	Company	Aegis Protective Services				
	Company	Identify the corporate servicer as the company if the authorized agent is a servicer.				
	A didac = =	3033 Robertson Avenue				
	Address	Number Street				4-4
		Cincinnati		ОН	45209	
		City		State	ZIP Code	
	Contact phone	513-948-0066, Ext 145		Email Dan	ela carlso	n@aegis-ps.com

## PROOF OF CLAIM FILING INFORMATION FOR

JAGGED PEAK, INC. (LEAD CASE) CASE NO. 19-15959

## **U.S. BANKRUPTCY COURT FOR THE DISTRICT OF NEVADA**

Debtor Name	Case Number
Jagged Peak, Inc.	19-15959
TradeGlobal, LLC	19-15960
TradeGlobal North America Holding, Inc.	19-15961

General Bar Date: January 15, 2020

Governmental Bar Date: March 16, 2020

You may file your completed and executed Proof of Claim as follows:

If by regular mail, send to:

If by messenger or overnight delivery, send to:

BMC Group, Inc.

BMC Group, Inc.

Attn: Jagged Peak Claims Processing

Attn: Jagged Peak Claims Processing

PO Box 90100

3732 West 120<sup>th</sup> Street Hawthorne, CA 90250

Los Angeles, CA 90009

Once filed, a "Filed" stamped copy of the proof of claim will be returned to the claimant Within three (3) business days of docketing IF the claimant encloses a stamped, self-addressed envelope with a copy of the proof of claim.