

Fill in this information to identify the case:

Debtor 1 KIKO USA, Inc.
 Debtor 2 _____
 (Spouse, if filing)
 United States Bankruptcy Court for the: District of Delaware
 Case number 18-10069

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 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

<p>1. Who is the current creditor?</p>	<p>Southwestern Bell Telephone 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>AT&T</u></p>	
<p>2. Has this claim been acquired from someone else?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____</p>	
<p>3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</p>	<p>Where should notices to the creditor be sent? c/o AT&T Services, Inc Karen A. Cavagnaro-Lead Paralegal Name One AT&T Way, Room 3A104 Number Street Bedminster NJ 07921 City State ZIP Code Contact phone (908) 532-1957 Contact email km1426@att.com</p>	<p>Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone _____ Contact email _____</p>
<p>4. Does this claim amend one already filed?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY</p>	
<p>5. Do you know if anyone else has filed a proof of claim for this claim?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____</p>	



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: 7060

7. How much is the claim? \$ 683.02 . 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 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:
 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)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

- No
 Yes. Check one:

- | | 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 \$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). | \$ _____ |
| <input type="checkbox"/> 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). | \$ _____ |
| <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 4/01/19 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:

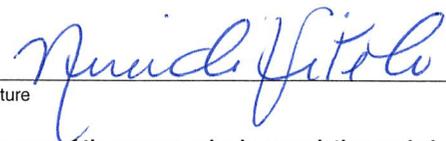
- I am the creditor.
 I am the creditor's attorney or authorized agent.
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

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 03/19/2018
MM / DD / YYYY

Signature 

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

Name	<u>Nereida</u>	<u>Vitela</u>
	<small>First name</small>	<small>Middle name</small> <small>Last name</small>
Title	<u>Bankruptcy Representative</u>	
Company	<u>Southwestern Bell Telephone Company</u>	
	<small>Identify the corporate servicer as the company if the authorized agent is a servicer.</small>	
Address	<u>4331 Communications Drive, 4W</u>	
	<small>Number</small>	<small>Street</small>
	<u>Dallas</u>	<u>TX 75211</u>
	<small>City</small>	<small>State</small> <small>ZIP Code</small>
Contact phone	<u>(888) 827-3238</u>	Email <u>nereida.vitela@att.com</u>
	<small>Contact phone</small>	<small>Email</small>

AT&T Corp
Pre-petition Claim Documentation

Creditor: Southwestern Bell Telephone Company

Debtor 1: KIKO USA, Inc.

Debtor 2 (Spouse, if filing): _____

Court: District of Delaware

File Date: 01/11/2018

Chapter: 11

Total Amount Filed: \$ 683.02

Account Number	Billed Amount Due	Last Transaction	Last Payment
7060	\$ 657.21	02/14/2018	01/02/2018
5689	\$ 25.81	01/10/2018	12/22/2017



KIKO MILANO USA
470 PARK AVE S FL 15
NEW YORK NY 10016 - 6820

Page 1 of 2
Account Number [REDACTED] 7 060
Billing Date Mar 7, 2018
Web Site att.com

Bill-At-A-Glance

Previous Bill	626.61
Payment	.00
Adjustments	.00
Past Due - Please Pay Immediately	626.61
Current Charges	30.60
Amount to be Debited	\$657.21
Debiting Bank Account on	00/00/00
REVISED FINAL BILL	

Billing Summary

Online: att.com/myatt	Page	
Plans and Services	1	.00
1 800 321-2000		
Service Changes:		
1 800 321-2000		
Repair Services:		
1 800 246-8464		
AT&T Internet Services	1	12.89CR
1 877 722-3755		
AT&T Long Distance	1	43.49
1 800 559-7928		
Total Current Charges		30.60

AT&T Internet Services

Important Information

Notice: Charges appearing in this section are for services provided by AT&T Corp. and/or by AT&T Missouri, AT&T Oklahoma, AT&T Kansas, AT&T Arkansas, or AT&T Texas, based upon your service address location.

For Billing Inquiries:
High Speed Internet (DSL): 877.722.3755
Web Hosting: 888.932.4678
Tech Support: 877.265.3410
Microsoft Office: 866.531.4891
WiFi Sm Site: 855.288.9434
AT&T Wi-Fi contact information located at attwifi.com.

Itemized Charges and Credits

Item		
No. Date Description		
Charges for [REDACTED]		
1. 2-22 COST ASSESSMENT CHARGE		.20CR
2. 2-22 AT&T HSL BUS ELITE-S		12.65CR
KIKO MILANO USA		
[REDACTED]		12.85CR
Total Itemized Charges and Credits		12.85CR

Surcharges and Other Fees

3. State Cost-Recovery Fee	.04CR
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Taxes

4. Federal	.00
5. State and Local	.00
Total Taxes	.00

Total AT&T Internet Services 12.89CR

AT&T Long Distance

Important Information

Message Regarding Terms & Conditions:
To view your Terms & Conditions for AT&T Long Distance, access www.att.com/servicepublications or call AT&T at the toll free number on your bill.

News You Can Use Summary

REVISED FINAL BILL COLLECTION POLICY
See "News You Can Use" for additional information

Local Services provided by AT&T Arkansas, AT&T Kansas, AT&T Missouri, AT&T Oklahoma, or AT&T Texas based upon the service address location.

GO GREEN - Enroll in paperless billing.

Your Bank Account
Will be Debited on

00/00/00

Amount to
Be Debited

\$657.21



Billing Date Mar 7, 2018
Date Mailed Mar 14, 2018

Account Number [REDACTED] 7 060

KIKO MILANO USA
470 PARK AVE S FL 15
NEW YORK NY 10016 - 6820

AT&T
PO BOX 5001
CAROL STREAM IL 60197-5001





Go paperless. Sign up for paperless billing and we'll send you an email reminder to pay. It's easier, safer, and more convenient.

Easily manage your account with myAT&T. You can pay your bill online, sign up for paperless billing and AutoPay, and manage your account. Go to att.com/myatt to get started.



Account summary

Your last bill	\$86.04
Payment, Nov 22 - Thank you!	-\$86.04
Remaining balance	\$0.00

Service summary

Account charges <i>Page 2</i>	\$11.04
Internet <i>Page 2</i>	\$75.00
Total services	\$86.04

Total due \$86.04
AutoPay is scheduled to debit your bank account on Dec 22, 2017

Ways to pay and manage your account:

myAT&T online
att.com/myatt

myAT&T app
for iPhone and Android

By phone
Ordering, billing or support: 800.321.2000
TTY: 800.651.5111



KIKO USA
470 PARK AVE S FL 15
NEW YORK NY 10016-6820

AutoPay of \$86.04 is scheduled for
Dec 22, 2017

Account number [REDACTED] 5689

AT&T
PO BOX 5014
CAROL STREAM, IL 60197-5014