

**Fill in this information to identify the case:**

Debtor 1 Limetree Bay Refining, LLC

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of Texas, Houston Division

Case number 21-32354

E-Filed on 08/20/2021  
Claim # 30

# 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?** Crawford Electric Supply  
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. <b>Where should notices and payments to the creditor be sent?</b> <small>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</small>	<b>Where should notices to the creditor be sent?</b>	<b>Where should payments to the creditor be sent? (if different)</b>
	<u>Darlene Chambers</u> Name <u>5500 Jefferson Hwy</u> Number Street <u>New Orleans</u> <u>LA</u> <u>70123</u> City State ZIP Code Contact phone _____ Contact email <u>dchambers@crawfordelectricsupply.com</u>  Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	_____ Name _____ Number Street _____ City State ZIP Code Contact phone _____ Contact email _____

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? \_\_\_\_\_

**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: \_\_\_\_\_

7. **How much is the claim?** \$ 118,126.60. **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.  
Goods Sold

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.** \$ 0.00

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)?**

No

Yes. Check one:

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.

**Amount entitled to priority**

\$                      0.00

\$                      0.00

\$                      0.00

\$                      0.00

\$                      0.00

\$                      0.00

\* 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 08/20/2021  
MM / DD / YYYY

DARLENE CHAMBERS

Signature

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

Name DARLENE CHAMBERS  
First name Middle name Last name

Title CREDIT MANAGER

Company CRAWFORD ELECTRIC SUPPLY  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_  
Number Street

City State ZIP Code

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

Attachment 1 - LIMETREE BAY REFINING LLC STATEMENT.pdf

Description -

# Crawford Monthly Statement

**CRAWFORD ELECTRIC SUPPLY RBRI**  
**36426 HIGHWAY 30**  
**GEISMAR LA 70734**  
**225-407-4330 Phone**  
**225-673-6242 Fax**

LIMETREE BAY REFINING LLC \*\*\*COD\*\*\*  
 1 ESTATE HOPE  
 CHRISTIANSTED, VI 00820  
 340-692-3000 Fax: 340-692-3471

**Payment Information**

Please check off invoices  
 paid and include tear-off  
 strip with your payment.

Payment Mailing Address  
 CRAWFORD ELECTRIC SUPPLY  
 P.O. BOX 847160

DALLAS TX 75284-7160

DATE	INVOICE NUMBER	PURCHASE ORDER NUMBER	INVOICE AMOUNT	INVOICE BALANCE	RUNNING BALANCE
01/18/21	S009897070.001	4700006292	14,253.82	14,253.82	14,253.82
01/26/21	S009947875.001	4700006533	36,260.40	36,260.40	50,514.22
01/29/21	S009899941.005	4700006276	76.41	76.41	50,590.63
01/29/21	S009920752.001	4700006368	791.25	791.25	51,381.88
02/05/21	S009882466.005	4700006194	19,007.38	19,007.38	70,389.26
02/23/21	S009947875.003	4700006533	478.10	478.10	70,867.36
02/23/21	S010004117.003	4700006726	857.70	857.70	71,725.06
02/24/21	S009965968.001	4700006591	1,189.65	1,189.65	72,914.71
02/24/21	S009991510.001	4700006687	3,242.95	3,242.95	76,157.66
02/24/21	S009991510.002	4700006687	2,176.24	2,176.24	78,333.90
02/24/21	S010004117.001	4700006726	2,997.40	2,997.40	81,331.30
02/24/21	S010004117.002	4700006726	7,851.50	7,851.50	89,182.80
02/24/21	S010024780.001	4700006819	1,544.80	1,544.80	90,727.60
03/02/21	S009965968.002	4700006591	9.35	9.35	90,736.95
03/15/21	S010024039.001	4700006833	7,296.20	7,296.20	98,033.15
03/24/21	S009991510.003	4700006687	205.17	205.17	98,238.32
03/24/21	S010068626.001	4700006014	5,317.24	5,317.24	103,555.56
03/31/21	S009991510.004	4700006687	659.98	659.98	104,215.54
04/29/21	S010043356.001	4700006845	27,448.26	13,911.06	118,126.60

INVOICE NUMBER	BALANCE	V
S009897070.001	14,253.82	
S009947875.001	36,260.40	
S009899941.005	76.41	
S009920752.001	791.25	
S009882466.005	19,007.38	
S009947875.003	478.10	
S010004117.003	857.70	
S009965968.001	1,189.65	
S009991510.001	3,242.95	
S009991510.002	2,176.24	
S010004117.001	2,997.40	
S010004117.002	7,851.50	
S010024780.001	1,544.80	
S009965968.002	9.35	
S010024039.001	7,296.20	
S009991510.003	205.17	
S010068626.001	5,317.24	
S009991510.004	659.98	
S010043356.001	13,911.06	

ACCOUNT SUMMARY			
CURRENT	30 DAYS	60 DAYS	90 DAYS
0.00	0.00	13,911.06	104,215.54



Account Number 184652  
 Statement Date 08/20/21  
 Total Amount Due 118,126.60

184652  
 08/20/21  
 04/30/21  
 118,126.60

All past due balances are subject to SERVICE CHARGES of 1.50% per month.