B10 (Official Form 10) (04/13)

UNITED STATES BANKRUPTCY COURT Southern District of Mississippi	PROOF OF CLAIM

Name of Debtor:	Case Number:
Mississippi Phosphates Corporation, et al.	14-51667-KMS

U.S. BANKRUPTCY COURT
SOUTHERN DISTRICT OF MISSISSIPPI
FILED
NOV 21 2014
DANNY L. MILLER, CLERK
BY _____ DEPUTY CLERK
COURT USE ONLY

NOTE: *Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.*

Name of Creditor (the person or other entity to whom the debtor owes money or property):
US Fusion, L.L.C.

Name and address where notices should be sent:
P. O. Box 69
Gonzales, LA 70707

RECEIVED
DEC 02 2014
BMC GROUP

Telephone number: (225) 647-2747 email:

☐ Check this box if this claim amends a previously filed claim.

Court Claim Number: _____
(If known)

Filed on: _____

Name and address where payment should be sent (if different from above):

Telephone number: email:

☐ Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

1. Amount of Claim as of Date Case Filed: $ 26,610.49

If all or part of the claim is secured, complete item 4.

If all or part of the claim is entitled to priority, complete item 5.

☐ Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. Basis for Claim: Goods sold and services rendered
(See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as: (See instruction #3a)	3b. Uniform Claim Identifier (optional): (See instruction #3b)

4. Secured Claim (See instruction #4)
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: $ _____

Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle ☐ Other
Describe:

Basis for perfection: _____

Value of Property: $ _____

Amount of Secured Claim: $ _____

Annual Interest Rate _____ % ☐ Fixed or ☐ Variable
(when case was filed)

Amount Unsecured: $ _____

5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.

☐ Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).

☐ Wages, salaries, or commissions (up to $12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).

☐ Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).

Amount entitled to priority:
$ _____

☐ Up to $2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).

☐ Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).

☐ Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(__).

*Amounts are subject to adjustment on 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

MISS PHOSPHATES
00022

B10 (Official Form 10) (04/13) 2

7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. *(See instruction #7, and the definition of "redacted".)*

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box.

☑ I am the creditor. ☐ I am the creditor's authorized agent. ☐ I am the trustee, or the debtor, or their authorized agent. (See Bankruptcy Rule 3004.) ☐ I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Guy Lewis
Title:
Company: US Fusion, L.L.C.
Address and telephone number (if different from notice address above):

Guy Lewis 11-17-14
(Signature) (Date)

Telephone number: email:

Penalty for presenting fraudulent claim: Fine of up to $500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:
Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

Creditor's Name and Address:
Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:
State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:
State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:
State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:
Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:
If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:
Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).
If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:
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.

7. Documents:
Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:
The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

REMIT TO:
US FUSION
P.O. BOX 69
GONZALES, LA 70707
225-647-2747

INVOICE

INVOICE DATE	INVOICE NUMBER
8/27/2014	M14-583BW-C
DUE DATE	PAGE#
9/26/2014	1 OF 1

Sold To: MISSISSIPPI PHOSPHATES
P.O. BOX 848
PASCAGOULA, MS 39568
PH#

Ship To: MISSISSIPPI PHOSPHATES
601 INDUSTRIAL RD
PASCAGOULA, MS 39581

Ordered By	Telephone	Order Date	Purchase Order Number
JOE HOLLAND	601-508-2482	8/22/2014	14002302
Project Team Member	Ship Via	Ship Date	Release Number
BRIAN	BEST WAY	8/27/2014	
	Bill of Lading	Terms	
		NET 30 DAYS	

Ordered	UM	Product Description	Unit Price	UM	Net Amount
1	EA	SUPERINTENDENT, FOREMAN, & HELPER - 2 DAYS, W/LODGING, MISC. FUEL EXPENSES, PER DIEMS, BASED OFF 21.75 HRS ON 09/29/14 & 09/30/2014	7,005.42	EA	$7,005.42

NO CREDIT WILL BE ALLOWED FOR GOODS RETURNED WITHOUT OUR PERMISSION ALL RETURNS SUBJECT TO RESTOCKING, HANDLING AND FREIGHT CHARGES.	Subtotal	$7,005.42
	Freight	$575.00
	Tax	$0.00
	Total Amount	$7,580.42

REMIT TO:

US FUSION

P.O. BOX 69
GONZALES, LA 70707
225-647-2747

INVOICE

INVOICE DATE	INVOICE NUMBER
10/14/2014	M14-583BW-B
DUE DATE	PAGE#
11/13/2014	1 OF 1

Sold To: MISSISSIPPI PHOSPHATES
P.O. BOX 848
PASCAGOULA, MS 39568
PH# 601-508-2482

Ship To: MISSISSIPPI PHOSPHATES
601 INDUSTRIAL RD
PASCAGOULA, MS 39581

Ordered By	Telephone	Order Date	Purchase Order Number
JOE HOLLAND	601-508-2482	8/22/2014	14002302
Project Team Member	Ship Via	Ship Date	Release Number
BRIAN	BEST WAY	8/27/2014	
	Bill of Lading	Terms	
		NET 30 DAYS	

Ordered	UM	Product Description	Unit Price	UM	Net Amount
1	LOT	36" SPOOL FAB - FOREMAN, TECH, & SUPERINTENDENT - 8.5 HRS	3,054.35	LOT	$3,054.35

NO CREDIT WILL BE ALLOWED FOR GOODS RETURNED WITHOUT OUR PERMISSION ALL RETURNS SUBJECT TO RESTOCKING, HANDLING AND FREIGHT CHARGES.	**Subtotal**	$3,054.35
	Freight	$0.00
	Tax	$0.00
	Total Amount	$3,054.35

REMIT TO:
US FUSION
P.O. BOX 69
GONZALES, LA 70707
225-647-2747

INVOICE

INVOICE DATE	INVOICE NUMBER
8/27/2014	M14-583BW-A
DUE DATE	PAGE#
9/26/2014	1 OF 1

Sold To: MISSISSIPPI PHOSPHATES
P.O. BOX 848
PASCAGOULA, MS 39568
PI-W

Ship To: MISSISSIPPI PHOSPHATES
601 INDUSTRIAL RD
PASCAGOULA, MS 39581

Ordered By	Telephone	Order Date	Purchase Order Number
TIM		8/22/2014	14002302
Project Team Member	Ship Via	Ship Date	Release Number
BRIAN	BEST WAY	8/27/2014	
	Bill of Lading	Terms	
		NET 30 DAYS	

Ordered	UM	Product Description	Unit Price	UM	Net Amount
4	EA	36" IPS SDR 11 HDPE FLANGE ADAPTERS	1,013.25	EA	$4,053.00
4	EA	36" IPS DUCTILE IRON BACKING RING	657.18	EA	$2,628.72
1	EA	36" IPS SDR 11 HDPE 90 DEG 3-SEG EL	5,800.00	EA	$5,800.00

	Subtotal	$12,481.72
NO CREDIT WILL BE ALLOWED FOR GOODS RETURNED WITHOUT OUR PERMISSION	Incoming Freight	$1,544.00
ALL RETURNS SUBJECT TO RESTOCKING, HANDLING AND FREIGHT CHARGES.	Tax	$0.00
	Total Amount	$14,025.72

REMIT TO:
US FUSION
P.O. BOX 69
GONZALES, LA 70707
225-647-2747

INVOICE

INVOICE DATE	INVOICE NUMBER
7/31/2014	J14-577BW-A
DUE DATE	PAGE#
8/30/2014	1 of 1

Sold To: MISSISSIPPI PHOSPHATES CORP.
P.O. BOX 848
PASCAGOULA, LA 39568
PH#

Ship To: MISSISSIPPI PHOSPHATES CORP.
601 INDUSTRIAL RD
PASCAGOULA, MS 39581

Ordered By	Telephone	Order Date	Purchase Order Number
TIM		7/18/2014	MPC-14002078
Project Team Member	**Ship Via**	**Ship Date**	**Release Number**
BRIAN		7/21/2014	
	Bill of Lading	**Terms**	
		NET 30 DAYS	

Ordered	UM	Product Description	Unit Price	UM	Net Amount
1	EA	FOREMAN AND HELPER FOR EMERGENCY EXTRUSION WELD REPAIR - 11.5 HRS	1,950.00	EA	$ 1,950.00

	Subtotal	$ 1,950.00
NO CREDIT WILL BE ALLOWED FOR GOODS RETURNED WITHOUT OUR PERMISSION ALL RETURNS SUBJECT TO RESTOCKING, HANDLING AND FREIGHT CHARGES.	Freight	$ -
	Tax	$ -
	Total Amount	$ 1,950.00

Mississippi Phosphates Corporation

Purchase Order

Date	P.O. #
8/1/2014	MPC-14002078

Purchasing
Phone: 228-712-3330
FAX: 228-762-6037

REMITTANCE:
ACCOUNTING DEPARTMENT
Mississippi Phosphates Corp
PO Box 648
Pascagoula MS 39568
Tax ID # 64-0794981

Vendor	Ship To
US FUSION P O BOX 69 GONZALES LA 70737	Mississippi Phosphates Corporation 601 Industrial Road Pascagoula MS 39581-0848 United States

Required By	Written By	Terms	Ship Via
7/29/2014		Net 30	

Stock #	Row/Bin	Qty	Description	Rate	Amt	
57028 outside cont. lump sum	1		1	REPAIR SPLIT IN FUSION JOINT ON 36" HDPE ELBOW CONTRACT#1212-09 REQ: J. BOLLAND/ 8252.57028 REQ.# NONE	1,950.00	1,950.00	0

CONFIRMATION OF ORDER PLEASE ACKNOWLEDGE

	Total	$1,950.00

CONFIRMING ORDER: Duplicate Shipments WILL NOT be accepted. Please Confirm Price and Delivery to Tim Mason at FAX 228-762-6037. Purchase Order will be considered firm if no response is received. Routine deliveries are accepted Monday thru Thursday 7:00 AM - 12 Noon and 12:30 - 4:00 PM. Friday 6:00 AM - 12:00 Noon and 12:30 - 3:00. Thank you for your timely attention in processing this order. MPC TERMS AND CONDITIONS WILL APPLY ON ALL ORDERS.

US FUSION LLC

2324 S. Commerce Ave. Ph# 225-647-2747
Gonzales, LA 70737 Fax# 225-644-3509

Work Order/Change Order

Date: 7/21/14

Project: Extrusion Weld Repair USF Job#: 14-577 USF Writer: Brian

Customer: Miss Phosphates Customer Purchase Order: PO Pending

Job Site Contact: Tim Mason Phone: 228-762-3210 Cell:

Owner/
Job Site Address: Miss. Phosphates
Pascagoula, MS

Circle One:
Shop Fabrication or Field Job
Drawing Attached: Yes / No
Material List Attached: Yes / No

Scope of Work: Date Required:
1-tech, extrusion gun w/ generator, other tools

Comments:
6:00 DePart Shop 9:00 on Site & Standing By For Customer UNTIL 9:45 9:45-1:00 Stand By While Line was Blowed down, 1:00-2:00 Repaired Pipe with Extrusion gun. Made (4) 12" Beads on Pipe 2:00 Depart site 5:30 at Shop 5:30-6:00 unload Equipment

Depart Time (USF)/Start Time: 6:00 Depart Time (Site): 2:00 Lunch/Break
Arrival Time (On-Site): 9:00 Arrival (USF)/Stop Time: 6:00 Start: 12:00
MOB Miles: 160 DEMOB Miles: 160 Stop: 12:30

Name	Title	Hours	Per Diem
Kyle Hamilton	Foreman	11.5	✓
Lafarm Kelly	Helper	11.5	✓

Equipment:
- ____ Butt Fusion Unit(s) Size
- ____ Electrofuse Unit
- 1 Truck w/ Hand Tools
- 1 Generator (8K / 30K)
- 1 Extrusion Gun
- ____ Job Trailer
- ____ Testing Equip:

Materials Used

Qty	Description	Qty	Description
1	Box of 5mm welding		

*See attached Bill of Materials for complete list of materials used on project

Print: K. HAMILTON Print: Jeff Wise
Sign: Sign:
US Fusion Representative (Original)
Site Representative (Yellow Copy)

KSW&B

SIDNEY M. BLITZER, JR.
PAUL H. SPAHT
LEE G. KANTROW
JOHN C. MILLER
DAVID S. RUBIN[2]
DIANE L. CROCHET
RICHARD E. ZIMMERMAN, JR.
BOB D. TUCKER
CONNELL L. ARCHEY
RANDAL J. ROBERT
W. SCOTT REATY
JENNIFER AARON HATAWAY
JULIE M. MCCALL

JACOB M. KANTROW
LUCIE R. KANTROW
JOSHUA A. DECUIR
W. CARLOS SPAHT[3]
KEITH J. FERNANDEZ
BENJAMIN J. NELSON

KANTROW SPAHT WEAVER & BLITZER
(A PROFESSIONAL LAW CORPORATION)

ATTORNEYS AT LAW
445 NORTH BOULEVARD · SUITE 300/POST OFFICE BOX 2997
BATON ROUGE, LOUISIANA 70821-2997
TELEPHONE (225) 383-4703
FAX (225) 343-0630 · (225) 343-0637
WWW.KSWB.COM

BYRON R. KANTROW
(1909-1997)
CARLOS G. SPAHT
(1906-2001)

GERALDINE B. WEAVER
OF COUNSEL

[1] BOARD CERTIFIED ESTATE PLANNING AND ADMINISTRATION AND TAX LAW SPECIALIST CERTIFIED BY THE LOUISIANA BOARD OF LEGAL SPECIALIZATION

[2] BOARD CERTIFIED BUSINESS BANKRUPTCY LAW SPECIALIST CERTIFIED BY THE LOUISIANA BOARD OF LEGAL SPECIALIZATION

[3] ADMITTED IN LOUISIANA AND ALABAMA

November 18, 2014

Honorable Danny L. Miller
Clerk of Court
U.S. Bankruptcy Court
Southern District of Mississippi
501 E. Court Street, Suite 2300
Jackson, Mississippi 39201

Re: In re Mississippi Phosphates Corporation; Case No. 14-51667-KMS
Our File: 3227.32749

Dear Mr. Miller:

Please find enclosed the original and three (3) copies of your Proof of Claim to file in the captioned matter on behalf of US Fusion, L.L.C. Please send us a file-stamped copy of the Proof of Claim in the enclosed self-addressed envelope.

Thank you for your courtesies.

Very truly yours,

KANTROW, SPAHT, WEAVER & BLITZER
(A PROFESSIONAL LAW CORPORATION)

By:
David S. Rubin

DSR:jrv
Enclosures

317321

KANTROW, SPAHT, WEAVER & BLITZER
(A PROFESSIONAL LAW CORPORATION)
ATTORNEYS AT LAW
SUITE 300 - CITY PLAZA
445 NORTH BOULEVARD
POST OFFICE BOX 2997
BATON ROUGE, LOUISIANA 70821-2997
(225) 383-4703

Honorable Danny L. Miller
Clerk of Court
U.S. Bankruptcy Court
Southern District of Mississippi
501 E. Court Street, Suite 2300
Jackson, Mississippi 39201

Southern District of Mississippi
Claims Register

14-51667-KMS Mississippi Phosphates Corporation

Judge: Katharine M. Samson
Office: Gulfport-6 Divisional Office
Trustee:

Chapter: 11
Last Date to file claims: 02/24/2015
Last Date to file (Govt): 04/25/2015

Creditor: (3856190) US FUSION PO BOX 69 GONZALES, LA 70737	**Claim No: 22** *Original Filed Date:* 11/21/2014 *Original Entered Date:* 11/21/2014	*Status:* *Filed by:* CR *Entered by:* Terry Wright *Modified:*	
Amount claimed: $26610.49			

History:

Details	22-1	11/21/2014	Claim #22 filed by US FUSION, Amount claimed: $26610.49 (Wright, Terry)

Description:
Remarks:

Claims Register Summary

Case Name: Mississippi Phosphates Corporation
Case Number: 14-51667-KMS
Chapter: 11
Date Filed: 10/27/2014
Total Number Of Claims: 1

Total Amount Claimed*	$26610.49
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		