Fill in this information to identify the case:
Debtor 1 Sugarfina, Inc.
Debtor 2 (Spouse, if filing)
United States Bankruptcy Court **District of Delaware**
Case number: **19-11973**

FILED
U.S. Bankruptcy Court
District of Delaware
9/9/2019
Una O'Boyle, Clerk

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?

Office Depot

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. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent? (if different)**
Office Depot	
Name	Name
6600 N Military Trail Bankruptcy Processing Boca Raton, FL 33496	
Contact phone 561-438-5151	Contact phone
Contact email harriet.lewkowitz@officedepot.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 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?

SUGARFINA POC
00006

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: 5377

7. **How much is the claim?** $ 12997.90

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 healthcare 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.** $

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 all that apply*:	**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 $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	$

* Amounts are subject to adjustment on 4/1/22 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 9/9/2019

MM / DD / YYYY

/s/ Harriet Lewkowitz

Signature

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

Name: Harriet Lewkowitz

First name Middle name Last name

Title: Credit Analyst

Company: Office Depot

Identify the corporate servicer as the company if the authorized agent is a servicer

Address: 6600 N Military Trail, S416N

Number Street

Boca Raton, FL 33496

City State ZIP Code

Contact phone 561−438−5151 Email harriet.lewkowitz@officedepot.com

case # 19-11973 Sugarfina, Inc.

Billing Date	Document #	Transaction Type	Balance Due
2019-03-23	291930825001	INV	45.12
2019-03-25	292414464001	INV	39.01
2019-03-26	293693448001	INV	40.78
2019-03-27	291788914001	INV	22.69
2019-03-28	294295142001	INV	123.07
2019-04-16	300604340001	INV	129.19
2019-04-16	298015720001	INV	38.47
2019-04-16	301974832001	INV	63.86
2019-04-16	303040942001	INV	39.28
2019-04-16	299582202001	INV	38.83
2019-04-17	298834511001	INV	127.92
2019-04-17	304121688001	INV	19.92
2019-04-17	304121127001	INV	26.27
2019-04-17	303749863001	INV	31.38
2019-04-17	303806812001	INV	38.47
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2019-04-18	304561533001	INV	43.94
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2019-08-13	354420343001	INV	5.83
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2019-08-14	355842568001	INV	4.42
	Amount Due to Office Depot		**12,997.90**

District of Delaware
Claims Register

19-11973-MFW Sugarfina, Inc.

Judge: Mary F. Walrath **Chapter:** 11

Office: Delaware **Last Date to file claims:**

Trustee: **Last Date to file (Govt):**

Creditor: (13818390)
Office Depot
6600 N Military Trail
Bankruptcy Processing
Boca Raton, FL 33496

Claim No: 1
Original Filed Date: 09/09/2019
Original Entered Date: 09/09/2019

Status:
Filed by: CR
Entered by: EPOC Filer
Modified:

Amount claimed: $12997.90

History:

Details 1-1 09/09/2019 Claim #1 filed by Office Depot, Amount claimed: $12997.90 (EPOC Filer)

Description:

Remarks: (1-1) Account Number (last 4 digits):5377

Claims Register Summary

Case Name: Sugarfina, Inc.
Case Number: 19-11973-MFW
Chapter: 11
Date Filed: 09/06/2019
Total Number Of Claims: 1

Total Amount Claimed*	$12997.90
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		