Fill in this information to identify the case:								
Debtor 1	Superior Silica Sands LLC							
Debtor 2 (Spouse, if filing)								
United States I	United States Bankruptcy Court for the: District of Delaware							
Case number	19-115566 (KBO)							

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 C	laim						
Who is the current creditor?	Amtex Scale & S	ystem, Inc. ditor (the person or ent	ity to be paid for this cl	laim)			
	Other names the credito	r used with the debtor	Amtex Scale				
Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	n?					
Where should notices and payments to the creditor be sent?	Where should notice Amtex Scale & S		pe sent?	Where should payments to the creditor be sent? (if different)			
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	, , , , , , , , , , , , , , , , , , , 		Name			
	P.O. Box 40309						
	Number Street Austin	TX	78704	Number	Street		
	City	State	ZIP Code	City	State	ZIP Code	
	Contact phone 512 44	14 1059		Contact phone	e		
REGENEU	Contact email tc@Ar			Contact email			
AUG 1 2 2019							
MOO I = EVIS	Uniform claim identifier f	or electronic payments	in chapter 13 (if you u	ise one):			
MANCARSONCONSULTANTS							
Does this claim amend one already filed?	☑ No ☐ Yes. Claim numb	per on court claims r	egistry (if known) _		· · · · · · · · · · · · · · · · · · ·	/ 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?		000	Date Stamped Copy R No self addressed sta No copy to return	eturned mped e nvel ope	

6.	Do you have any number you use to identify the debtor?	ou use to identify the 🗹 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 9 S S S							
7.	How much is the claim?	\$ 27,748.61. 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	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.							
	claim?	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.							
		Charges for: Freight, Travel, Vehicle, Equip, Labor & Sales Tax							
 Э.	Is all or part of the claim secured?	Ø №							
	secureu :	☐ 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							
	RECEIVED	Amount necessary to cure any default as of the date of the petition: \$							
	AUG 1 2 2019	Annual Interest Rate (when case was filed) 18.00 % Fixed							
RTZ	ZHANCARSONEGNSULTANTS	D March 1							
10.	Is this claim based on a	☑ No							
	lease?	☐ Yes. Amount necessary to cure any default as of the date of the petition. \$							
11.	Is this claim subject to a	☑ No							
	right of setoff?	☐ Yes. Identify the property:							
		— 100. Identify the property.							

12. Is all or part of the claim				on, a standard com a norma de para de crusado de para e conse	11 WALES AND RESERVED AND A 7 //				
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	one:				Amount entitled to priori			
A claim may be partly priority and partly		ic support obligations (in C. § 507(a)(1)(A) or (a)(1	cluding alimony and child supl)(B).	pport) under		\$			
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).							
endied to priority.	bankrup		s (up to \$13,650*) earned wit debtor's business ends, whi			\$			
	☐ Taxes o	r penalties owed to gove	ernmental units. 11 U.S.C. § 8	507(a)(8).		\$			
	☐ Contribu	utions to an employee be	enefit plan. 11 U.S.C. § 507(a)(5).		\$			
	Other. S	Specify subsection of 11	U.S.C. § 507(a)() that appl	ies.		\$			
	* Amounts a	ire subject to adjustment on	4/01/22 and every 3 years after t	that for cases b	egun on or after	the date of adjustment.			
Part 3: Sign Below									
The person completing	Check the appro	priate box:							
this proof of claim must sign and date it.	☑ I am the cre	editor.							
FRBP 9011(b).			rized agent.						
If you file this claim	☐ I am the creditor's attorney or authorized agent. ☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.								
electronically, FRBP	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.								
5005(a)(2) authorizes courts to establish local rules	_ rama gaan	antor, surcty, endorser, t	or other codebtor. Dankruptes	r Nuic 3003.					
specifying what a signature									
is.			e on this <i>Proof of Claim</i> serve e debtor credit for any payme						
A person who files a		mily and drounds gard and	s debter eroun for any payme			Α.			
fraudulent claim could be fined up to \$500,000,	I have examined and correct.	the information in this P	roof of Claim and have a rea	sonable belie	f that the infor	mation is true			
imprisoned for up to 5	and correct.								
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	I declare under penalty of perjury that the foregoing is true and correct.								
3371.	Executed on date	e 08/05/2019 MM / DD / YYYY	-						
		22							
		hran	-						
	Signature								
	Print the name of	of the person who is co	empleting and signing this	claim:					
	Name	Teresa	Jean		Cochran				
		First name	Middle name		Last name				
		Dunaidont							
	Title	President							
	Title Company	Amtex Scale & Sy	<u>-</u>	-					
		Amtex Scale & Sy	vstems, Inc. vicer as the company if the autho	rized agent is a	servicer.				
RECENED		Amtex Scale & Sy	vicer as the company if the autho	-	servicer.				
RECEIVED		Amtex Scale & Sy	<u>-</u>	-	servicer.				
RECEIVED AUG 1 2 2019	Company	Amtex Scale & Syldentify the corporate sense 820 Shelby Lane Street	vicer as the company if the autho	s)	servicer.				
RECEIVED AUG 1 2 2019	Company	Amtex Scale & Syldentify the corporate sense.	vicer as the company if the autho	-	servicer. 78745				
RECEIVED AUG 1 2 2019 ANCARSONCONSUTANTS	Company	Amtex Scale & Syldentify the corporate sense 820 Shelby Lane Street	vicer as the company if the autho	s)					

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GLENN HEGAR TEXAS COMPTROLLER OF PUBLIC ACCOUNTS

The Texas Comptroller of Public Accounts (CPA) administers the Statewide Historically Underutilized Business (HUB) Program for the State of Texas, which includes certifying minority and woman-owned businesses as HUBs and is designed to facilitate the participation of minority and woman-owned businesses in state agency procurement opportunities.

We are pleased to inform you that your application for certification/re-certification as a HUB has been approved. Your company's profile is listed in the State of Texas HUB Directory and may be viewed online at http://www.window.state.tx.us/procurement//cmbl/hubonly.html. Provided that your company continues to meet HUB eligibility requirements, the enclosed HUB certificate is valid for four years.

You must notify the HUB Program in writing of any changes affecting your company's compliance with the HUB eligibility requirements, including changes in ownership, day-to-day management, control and/or principal place of business. *Note: Any changes made to your company's information may require the HUB Program to re-evaluate your company's eligibility.*

Please reference the enclosed pamphlet for additional resources, such as the state's Centralized Master Bidders List (CMBL), that can increase your chance of doing business with the state.

Thank you for your participation in the HUB Program! If you have any questions, you may contact a HUB Program representative at 512-463-5872 or toll-free in Texas at 1-888-863-5881.

Texas Historically Underutilized Business (HUB) Certificate



Certificate/VID Number: File/Vendor Number: Approval Date: Scheduled Expiration Date: 1742435605700 005033 24-SEP-2015 24-SEP-2019

The Texas Comptroller of Public Accounts (CPA), hereby certifies that

AMTEX SCALE & SYSTEMS INC

has successfully met the established requirements of the State of Texas Historically Underutilized Business (HUB) Program to be recognized as a HUB. This certificate printed 25-SEP-2015, supersedes any registration and certificate previously issued by the HUB Program. If there are any changes regarding the information (i.e., business structure, ownership, day-to-day management, operational control, business location) provided in the submission of the business' application for registration/certification as a HUB, you must immediately (within 30 days of such changes) notify the HUB Program in writing. The CPA reserves the right to conduct a compliance review at any time to confirm HUB eligibility. HUB certification may be suspended or revoked upon findings of ineligibility.

Paul A. Cibon

Paul Gibson, Statewide HUB Program Manager Texas Procurement and Support Services

Note: In order for State agencies and institutions of higher education (universities) to be credited for utilizing this business as a HUB, they must award payment under the Certificate/VID Number identified above. Agencies and universities are encouraged to validate HUB certification prior to issuing a notice of award by accessing the Internet (http://www.window.state.tx.us/procurement/cmbl/cmblhub.html) or by contacting the HUB Program at 1-888-863-5881 or 512-463-5872.



Invoice

Date	Invoice No.
7/9/2019	31776

Bill To

Superior Silica Sands LLC

Attn: Accounts Payable

5600 Clearfork Main St. #400

Austin TX 78745

Fort Worth TX 76109

Ship To:

Superior Silica Sands LLC

Kenny Kunsman 715 797 3687

3014 CR 704

Kosse TX 76653

EMAIL INVOICES TO:

an@sssand.com

						140/00/33	Jana	C/171		
Purchase Order K Kunsman			Terms Due Date Ship D			Ship Via	Ship Via Rep		Client No.	TDA Acct. No.
			Net 30	8/8/2019	7/9/2019	UPS	JSP	00472609		0621959
Item	Qty		Description							Amount
A+ Customer	9	RLW 720i S/	for: Truck Scale N: 1611200088		and Would N	ot Zero			95.00	855.00T

Repaired with Replacement Load Cells & Calibration of Scale Conclusion of Service: Scale was left in Proper Working Order 1.567.50T 142.50 A± OT 11 5.5 Hours/ 2 Men Additional Labor Hours to Complete Job Scope 835.00 2,505.00T PART 3 75K Double Ended Beam Load Cell 1.295.00 1.295.00T Heavy Capacity Test Vehicle Limestone Co. Flat Rate Charge

Technician Action: Tested Load Cells & Cabling/Connections

97.07 97.07T UPS Freight & Handling Charges Shipping & Handling

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Thank you for your business. PAST DUE ACCOUNTS ARE SUBJECT TO 1.5% **MONTHLY** FINANCE CHARGE WHICH IS AN Federal I.D. No. 74-2435605 Physical Address: ANNUAL RATE of 820 Shelby Lane Ste 101 **Balance Due** 18%

\$521.36
\$6,840.93

\$6,840.93

Telephone Number	Facsimilie Number	E-mail	Web Site
(512) 444-1059	(512) 444-8944	tc@AmtexScale.com	www.AmtexScale.com
REV:1B		Effective Date: 03/26/2017	OP-01-F-SR.2

Helping People Find the Weigh!

TEXAS DEPARTMENT OF AGRICULTURE

COMPANY LICENSE NO. 245675

JOB No.: 31776



AUSTIN

Phone: 512 444-1059 Fax: 512 444-8944 1-800-388-2622

te@amtexscale.com

Remit To:

P.O. Box 40309 Austin TX 78704 EIN 74-2435605

Come By or Ship To: 820 Shelby Lane # 101

Austin TX 78745

Customer: ICICA JANDS CERTIFICATES SERVICE CALL Person Calling: INSPECTION STICKER ONLY ANNUAL RWM-780 Report City: County: SEMI ANNUAL INSTALLATION P.O.C Telephone: **OUARTERLY** WARRANTY Purchase Order No.: USDA Report MONTHLY Email: Terms: N.I.S.T. HANDBOOK 44 INSPECTION PROCEDURES RECORDED "AS FOUND" READINGS ON CERTIFICATE TEST FOR ZERO, REPEAT ZERO, LEVEL OF SCALE, KEYPAD FUNCTION REPAIRS NEEDED, NO RECORDED AS "LEFT READINGS" ON CERTIFICATE APPLIED INCREASE & DECREASE TEST WEIGHTS CERTIFICATES PROVIDED TO CUSTOMER ON SITE CALIBRATED SCALE SPAN / LINEAR * AMTEX RETAINED COPIES OF CERTIFICATES TESTED CALIBRATION APPLIED "NEXT DUE" CALIBRATION STICKERS CERTIFICATES TO BE MAILED TO CUSTOMER **EQUIPMENT INFORMATION:** MODEL NO. SERIAL NO. MODEL NO SERIAL NO. UPON ARRIVAL, WOULD E. FOUND 3 BAD LOAD PECLS AND I QUESTIONABLE CELLS AS NEEDED, ALL CARLEING RAN AND CONNECTOR QUESTION ABLE CELL SHOULD BE REPLACED, SO NOT KNOW IT Equipment / Parts Price Per Item Extended Price THIS SERVICE HAS BEEN RECEIVED 75K SOUBLE ENDED BEAM 83500 REGULAR HOURS (4.5) 200 Additional Service / NOTES: IT WILL LAST OR POSSIBLEGET OVERTIME HOURS 5.5XZW PORSELUE WERE ABLE TO GET TRAVEL CHARGE a TRAVEL HOURS ENUFF ANTWINIFILT OUT OF (a) HCTV CHARGE TO OVERCOME DESCREPENCE FREIGHT 1091 SUB TOTAL PAST DUE ACCOUNTS ARE SUBJECT TO A 1.5% MONTHLY SALES TAX FINANCE CHARGE, WHICH IS AN ANNUAL RATE OF 18% TOTAL

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Invoice

Date	Invoice No.
7/23/2019	31789

Bill To

(512) 444-1059

(512) 444-8944

REV:1B

Superior Silica Sands LLC Attn: Accounts Payable 5600 Clearfork Main St. #400 Fort Worth TX 76109 Ship To:

Superior Silica Sands LLC Kenny Kunsman 715 797 3687 3014 CR 704 Kosse TX 76653 EMAIL INVOICES TO:

www.AmtexScale.com

OP-01-F-SR.2

						EMAI ap@ss			ES TO:			
Purchase Order			Terms	Due Date	Ship Date	Ship Via	Rep		A Client No.	TDA Acct. No.		
K Kunsman			Net 30	8/22/2019	7/23/2019	UPS	JSP	004	72609	0621959		
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Federal I.D. No. 74-2435605 Physical Address: 820 Shelby Lane Ste 101 Austin TX 78745			5	" III CII 15 /1.1				Total				
			ANNUAL RATE of 18%				Balance Due 52			\$20,907.68		
Telephone Numbe	er	Facsimilie Num	ber	E-mail			Web Site					

te@AmtexScale.com

Effective Date: 03/26/2017

Helping People Find the Weigh!

TEXAS DEPARTMENT OF AGRICULTURE

COMPANY LICENSE NO. 245675

JOB No.:

31789



AUSTIN

Phone: 512 444-1059 Fax: 512 444-8944

1-800-388-2622 tc(a_amtexscale.com Remit To:

P.O. Box 40309 Austin TX 78704 EIN 74-2435605

Come By or Ship To:

820 Shelby Lane #101 Austin TX 78745

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