

Fill in this information to identify the case:

Debtor 1 _____

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of _____

Case number _____

Official Form 410
Proof of Claim

04/22

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? Acme/Luxury Services Inc
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)
Name <u>Acme/Luxury Services Inc</u>	Name _____
Number Street <u>12670 W CrestLine Dr</u>	Number Street _____
City State ZIP Code <u>Littleton Colo 80127</u>	City State ZIP Code _____
Contact phone <u>303-475-3585</u>	Contact phone <u>720-297-7538</u>
Contact email <u>lwenholz@comcast.net</u>	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 07 14 2023
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? _____

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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? \$ 5,221.42 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

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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 one:

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Up to \$3,350* 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 \$15,150*) 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

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/25 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.

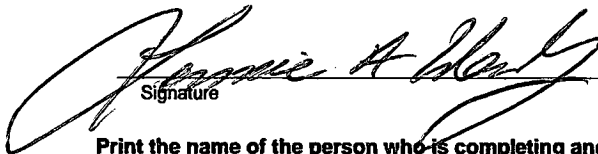
I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

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 07 14 2023
MM / DD / YYYY


Signature

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

Name Lonnie K Wenzholz
First name Middle name Last name

Title VICE President

Company Acme / Luxury Services Inc
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 12670 W Crestline Dr
Number Street

Littleton Colo 80127
City State ZIP Code

Contact phone 720-297-7538 Email lwenzholz@Comcast.net

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Print

Save As...

Add Attachment

Reset

KCC

Christopher Estes

1-877-726-6510

Official Form 410

Instructions for Proof of Claim

United States Bankruptcy Court

12/15

These instructions and definitions generally explain the law. In certain circumstances, such as bankruptcy cases that debtors do not file voluntarily, exceptions to these general rules may apply. You should consider obtaining the advice of an attorney, especially if you are unfamiliar with the bankruptcy process and privacy regulations.

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.

How to fill out this form

- ❑ Fill in all of the information about the claim as of the date the case was filed.
- ❑ Fill in the caption at the top of the form.
- ❑ If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.
- ❑ Attach any supporting documents to this form. Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *redaction* on the next page.)
Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- ❑ Do not attach original documents because attachments may be destroyed after scanning.
- ❑ If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.
- ❑ A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth. See Bankruptcy Rule 9037.
- ❑ For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian. For example, write *A.B., a minor child (John Doe, parent, 123 Main St., City, State)*. See Bankruptcy Rule 9037.

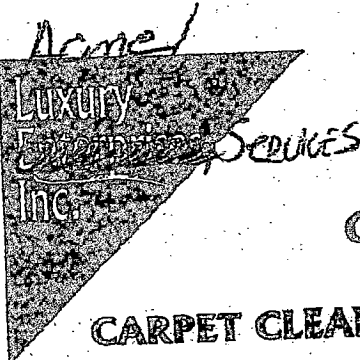
Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, either enclose a stamped self-addressed envelope and a copy of this form or go to the court's PACER system (www.pacer.psc.uscourts.gov) to view the filed form.

Understand the terms used in this form

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.



Owners Operated
 Lonnie Wenzholz & Curt Mikelson
 Cellular 303-475-3585

Commercial & Residential
 Truck Mounted Equipment
 Insured
 Grout & Tile Cleaning



CARPET CLEANING • UPHOLSTERY CLEANING • AIR DUCT CLEANING

CUSTOMER'S NAME CYXTERA		DATE 3-18-2023
ADDRESS 9180 Commerce Center Cir	APT	<input type="checkbox"/> CASH <input type="checkbox"/> CHARGE ACCOUNT NO.
CITY Highlands Ranch Colo	TELEPHONE 7-231-0780	SALES BK. & CK. NO. DATE OF SALES CHECK

QTY.	THE FOLLOWING ARTICLES ARE TO BE CLEANED SUBJECT TO THE PRICES STATED HEREON, AND THE CONDITIONS STATED BELOW.	UNIT COST	EXTENSION
	9110 Carpets Den 1-B		740. ⁶⁰
	4-10-2023 P.O. # 6054944		
	<i>1wenzholz@comcast.net</i>	TOTAL	

AFTER CARPET CLEANING, PROTECTIVE PAPER IS PLACED UNDER ALL FURNITURE. PLEASE DO NOT REMOVE FOR 48 HOURS. ALLOW FURNITURE TO DRY 24 HOURS BEFORE USING. PLEASE WALK ON WET CARPETS WITH APPROPRIATE CAUTION. IT MAY LEAVE THE SOLES OF SHOES SLIPPERY.

WHAT WE CAN AND CANNOT DO: Our service technicians will clean your home in a proper, workmanlike manner, using equipment and detergents standard to the cleaning industry. • WE CANNOT GUARANTEE TO REMOVE ALL STAINS, because some are caused by permanent dyes, acids, or bleaches. • BROADLOOM IS NOT PRESHRUNK at the mill; therefore, we cannot control shrinkage of area rugs or the opening of loose seams. • SHADING may appear after cleaning velvet effect carpets; this condition will gradually disappear. • We will exercise care in handling worn fabric but will not be responsible for FRAYING. • SUN FADING AND OXIDATION (YELLOWING) of both, fabric, especially white fabric, and broadloom may become more evident after soil is removed by cleaning. • We will accept no responsibility for conditions that existed prior to cleaning or for inaccurate sewn-in cleaning instruction tags. • Normal cleaning will not prevent PET STAIN ODOR from recurring; ask your serviceman for the application of special deodorizers.

Upon inspecting the articles to be cleaned; the store's representative pointed out to me the following:

I have been advised that the above visible conditions cannot be corrected by cleaning and I herewith give my permission to clean my furniture and/or carpeting having full knowledge of the visible conditions of my furniture and/or carpeting prior to cleaning.

The signature of the customer constitutes acknowledgment of the contract and the acceptance of the conditions stated above.

	3-18-2023	CUSTOMER'S SIGNATURE
ESTIMATOR'S SIGNATURE	DATE	
THE ABOVE WORK HAS BEEN SATISFACTORILY COMPLETED	4-29-2023	CUSTOMER'S SIGNATURE
RECEIVED PAYMENT	SIGNATURE OF OPERATOR	DATE



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 Lonnie Wenholz & Curt Mikelson
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 720-297-7538

Commercial & Residential
 Truck Mounted Equipment
 Insured
 Grout & Tile Cleaning



CARPET CLEANING • UPHOLSTERY CLEANING • AIR DUCT CLEANING

CUSTOMER'S NAME CYXTERA	DATE 3-18-2023
ADDRESS 9180 Commerce Center Cir	APT Wes
CITY Highlands Ranch Colo	TELEPHONE 7-331-0780
<input type="checkbox"/> CASH	<input type="checkbox"/> ACCOUNT
<input type="checkbox"/> CHARGE	NO.
SALES BK. & CK. NO.	DATE OF SALES CHECK

QTY.	THE FOLLOWING ARTICLES ARE TO BE CLEANED SUBJECT TO THE PRICES STATED HEREON, AND THE CONDITIONS STATED BELOW.	UNIT COST	EXTENSION
	9180 CARPET AREAS Den 1-A		740. ⁶⁰
	4-10-2023 P.O. # 6054945		
	1 Wenholz @ Comcast. AZT		
	TOTAL		

AFTER CARPET CLEANING, PROTECTIVE PAPER IS PLACED UNDER ALL FURNITURE. PLEASE DO NOT REMOVE FOR 48 HOURS. ALLOW FURNITURE TO DRY 24 HOURS BEFORE USING. PLEASE WALK ON WET CARPETS WITH APPROPRIATE CAUTION. IT MAY LEAVE THE SOLES OF SHOES SLIPPERY.

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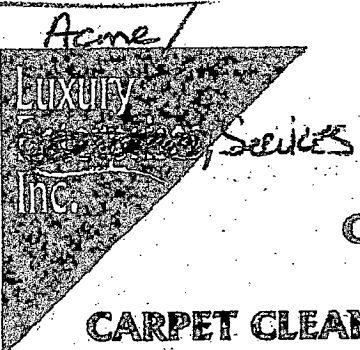
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ESTIMATOR'S SIGNATURE: *[Signature]* DATE: **3-18-2023** CUSTOMER'S SIGNATURE: _____

THE ABOVE WORK HAS BEEN SATISFACTORILY COMPLETED DATE: **4-29-2023** CUSTOMER'S SIGNATURE: _____

RECEIVED PAYMENT SIGNATURE OF OPERATOR: _____ DATE: _____



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Grout & Tile Cleaning



Cellular 303-475-3585
720-297-7538

CARPET CLEANING • UPHOLSTERY CLEANING • AIR DUCT CLEANING

CUSTOMER'S NAME Cytera		DATE 3-15-2023
ADDRESS 8534 Concord Center Dr		APT Rm Hstck
CITY Englewood Colo 80112	TELEPHONE 7-557-6761	SALES BK. & CK. NO.
		ACCOUNT NO.
		DATE OF SALES CHECK

QTY.	THE FOLLOWING ARTICLES ARE TO BE CLEANED SUBJECT TO THE PRICES STATED HEREON, AND THE CONDITIONS STATED BELOW.	UNIT COST	EXTENSION
	Den 2-A Call Center and OFFICES		
	3447 SFF		1,137.51
	3-26-2023 P.O. # 6054525		
		TOTAL	

AFTER CARPET CLEANING, PROTECTIVE PAPER IS PLACED UNDER ALL FURNITURE. PLEASE DO NOT REMOVE FOR 48 HOURS. ALLOW FURNITURE TO DRY 24 HOURS BEFORE USING. PLEASE WALK ON WET CARPETS WITH APPROPRIATE CAUTION. IT MAY LEAVE THE SOLES OF SHOES SLIPPERY.

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	3-15-2023	CUSTOMER'S SIGNATURE
ESTIMATOR'S SIGNATURE	DATE	
THE ABOVE WORK HAS BEEN SATISFACTORILY COMPLETED	4-16-2023	CUSTOMER'S SIGNATURE
RECEIVED PAYMENT	SIGNATURE OF OPERATOR	DATE



Owners Operated
Lonnie Wenholz & Curt Mikkelsen

Commercial & Residential
Truck Mounted Equipment
Insured
Grout & Tile Cleaning



Cellular 303-475-3585
720-297-7538

CARPET CLEANING • UPHOLSTERY CLEANING • AIR DUCT CLEANING

CUSTOMER'S NAME CYXTERA		DATE 3-15-2023
ADDRESS 8534 Concord Center Dr		APT Ryan HUSTER
CITY Englewood Co 80112	TELEPHONE 7-557-6761	ACCOUNT <input type="checkbox"/> CASH <input type="checkbox"/> CHARGE NO.
		SALES BK. & CK. NO. DATE OF SALES CHECK

QTY.	THE FOLLOWING ARTICLES ARE TO BE CLEANED SUBJECT TO THE PRICES STATED HEREON, AND THE CONDITIONS STATED BELOW.	UNIT COST	EXTENSION
	Den 2-A Facilities Carpet Areas 7,887.5 SF 5 mats		2,602.71
	3-26-2023 P.O. # 6054524		
		TOTAL	

AFTER CARPET CLEANING, PROTECTIVE PAPER IS PLACED UNDER ALL FURNITURE. PLEASE DO NOT REMOVE FOR 48 HOURS. ALLOW FURNITURE TO DRY 24 HOURS BEFORE USING. PLEASE WALK ON WET CARPETS WITH APPROPRIATE CAUTION. IT MAY LEAVE THE SOLES OF SHOES SLIPPERY.

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	3-15-2023	CUSTOMER'S SIGNATURE
ESTIMATOR'S SIGNATURE	DATE	
THE ABOVE WORK HAS BEEN SATISFACTORILY COMPLETED	4-8-2023	CUSTOMER'S SIGNATURE
RECEIVED PAYMENT	SIGNATURE OF OPERATOR	DATE