

Fill in this information to identify the case:

Debtor 1 Superior Silica Sands (Emerge Energy Services LP)

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of Delaware

Case number 19-11563

2019 JUL 26 PM 2:15

Official Form 410
Proof of Claim

12/15

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? CDW Direct, LLC
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)

<p>Where should notices to the creditor be sent?</p> <p><u>CDW / Attn: Vida Krug</u></p> <p>Name _____</p> <p><u>200 N. Milwaukee Ave</u></p> <p>Number Street _____</p> <p><u>Vernon Hills IL 60061</u></p> <p>City State ZIP Code _____</p> <p>Contact phone <u>847-419-6322</u></p> <p>Contact email <u>Vida.krug@cdw.com</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p> <p>Contact phone _____</p> <p>Contact email _____</p>
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Uniform claim identifier for electronic payments in chapter 13 (if you use one):
KURTZMAN CARSON CONSULTANTS

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: _____

Customer # 12041654-01 **Please reference on all correspondence mailed to CDW**

7. How much is the claim? \$ 5693.39. 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.)

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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 \$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). \$ _____
- Wages, salaries, or commissions (up to \$12,475*) 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 4/01/16 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:

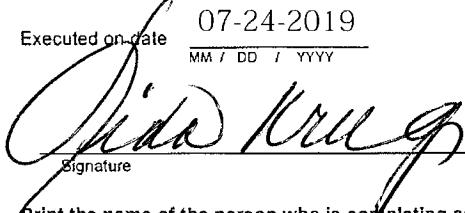
- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

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 07-24-2019
MM / DD / YYYY


Signature

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

Name: Vida Krug
First name Middle name Last name
Title: Sr Recovery Analyst
Company: CDW, LLC

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

Address: 200 N Milwaukee Ave
Number Street
Vernon Hills, IL 60061
City State ZIP Code
Contact phone: 847-419-6322 Email: Vida.krug@cdw.com

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Contact:

Vida Krug
Sr. Recovery Analyst
1-847-419-6322

Date: 07/24/2019

Customer# 12041654-01 Superior Silica Sands

Balance: \$ 5,693.39

Filed : 07/15/2019 Case: 19-11563

Invoice	Date	Amount	Owes	PO#
SMS4375	5/31/2019	\$ 8,204.79	\$ 5,693.39	395
			\$ 5,693.39	

CDWL# VD17355-00001

*** ORIGINAL COPY **

Tax Identification
36-4530079

SMS4375
DL88 /



KQSM018-00001

INVOICE NO.	ACCOUNT NO.	INVOICE DATE
SMS4375	12041654	5-31-19

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SUPERIOR SILICA SANDS
5600 CLEARFORK MAIN ST STE 400
ACCTS PAYABLE
FORT WORTH, TX 76109-3567
8178418070

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SUPERIOR SILICA SANDS
5600 CLEARFORK MAIN ST STE 400
ACCTS PAYABLE
FORT WORTH, TX 76109-3567
P.O.# 395

ACCOUNT MANAGER		DATE ORDERED	DATE SHIPPED	SHIPPED VIA	TERMS	
DANG DANG		5-29-19	5-31-19	ELECTRONIC DISTRIBUTION	NET 30 Days	
ORDER	SHIPPED	ITEM NUMBER	DESCRIPTION		UNIT PRICE	EXTENSION
180	180	4693591	CARBONBLACK DEF CLD MGT WIN RNW 1 MFG#:NG-WIN-PRM-1Y-R-T1 Electronic distribution - NO MEDIA		34.28	6170.40
180	180	5048295	CARBON BLK CB THREATSIGHT SUB 1Y MFG#:NG-MAS-1Y-R Electronic distribution - NO MEDIA		8.48	1526.40
Quote/Order Source:				Subtotal:	7696.80	
				Freight:	.00	
				Sales Tax:	507.99	
					<i>Balance Due</i>	<i>\$5692.39</i>

PLEASE REMIT PAYMENT TO:
CDW Direct
PO Box 75723, Chicago, IL 60675-5723

INVOICE	U.S. Currency
TOTAL	8204.79

ISO 9001:2011
CERTIFIED

TERMS AND CONDITIONS OF SALE:
THE TERMS AND CONDITIONS OF SALE ARE LIMITED TO THOSE ON CDW'S WEBSITE AT CDW.COM. NOTICE OF OBJECTION TO AND REJECTION OF ANY ADDITIONAL OR DIFFERENT TERMS IN ANY FORM DELIVERED BY CUSTOMER IS HEREBY GIVEN.

SUPPORT NUMBERS:
Technical Support Toll-free: (800) 383-4239
Repairs Toll-free: (866) 465-6555 or CDWrepaircoordinators@cdw.com
Customer Relations Toll-free: (866) 782-4239
or CustomerRelations@CDW.com
To have a Will Call order pre-invoiced contact the Curbside team at CDW Vernon Hills Will Call Pick Up at (847) 371-3600 or Curbside@cdw.com

Thank you for your business.