Claim #219	Data Filad:	1/15/2025
Claim #2 19	Date Filed:	4/ 10/2020

Fill in this information to identify the case:	
Debtor 1 OTB Holding LLC	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Northern District of Georgia	
Case number 25-52415	

Official Form 410

Proof of Claim

12/24

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.

1.	Who is the current creditor?	Atlas Distributing Inc Name of the current creditor (the person or entity to be paid for this claim)								
		Other names the creditor	used with the debto	or						
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	?							
3.	Where should notices and payments to the	Where should notice	s to the creditor	be sent?	Where should payments to the creditor be sent? (if different)					
	creditor be sent?	Atlas Distributing	Inc							
	Federal Rule of Bankruptcy Procedure	Name			Name		•			
	(FRBP) 2002(g)	44 Southbridge S	t		Number	Street				
		Number Street	140	01501	Number	Sireet				
		Auburn Citv	MA State	ZIP Code	City		State	ZIP Code		
Æ	deaen red	Contact phone 508 79			Contact pho	ne		_		
ľ	RECEIVED	Contact email jlepore		uting.com	Contact ema	ail				
	APR 17 2025	Contact email Jicpoi C	<u>@andodionio</u>	<u>91</u>	Contact on a			_		
EF	RITA GLOBAL	Uniform claim identifier (i	-							
4.	Does this claim amend one already filed?	✓ No☐ Yes. Claim numb	er on court claim	s registry (if known)		File	ed on	/ YYYY		
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?							



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: 1 7 7 9							
7.	How much is the claim?	\$							
8.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.							
	ciaim?	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	Ŭ No							
	secured?	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							
	RECEIVED APR 17 2025	Amount necessary to cure any default as of the date of the petition: \$							
	\	Annual Interest Rate (when case was filed)%							
	RITA GLOBAL	☐ Fixed ☐ Variable							
_									
10	. Is this claim based on a lease?	☑ No							
	lease :	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							
1	right of cotoff?	☐ Yes. Identify the property:							

12. Is all or part of the claim entitled to priority under	☑ No ☐ Yes. Check	one.			Amount entitled to priori					
11 U.S.C. § 507(a)? A claim may be partly	☐ Domesti	orie. c support obligations (including ali c. § 507(a)(1)(A) or (a)(1)(B).	imony and child suppo	ort) under	\$					
priority and partly nonpriority. For example, in some categories, the law limits the amount	Up to \$3	for \$								
entitled to priority.	bankrupt	salaries, or commissions (up to \$' tcy petition is filed or the debtor's C. § 507(a)(4).	15,150*) earned within business ends, which	180 days before ever is earlier.	the \$					
		penalties owed to governmental	units. 11 U.S.C. § 507	(a)(8).	\$					
	☐ Contribu	tions to an employee benefit plan	. 11 U.S.C. § 507(a)(5).	\$					
		pecify subsection of 11 U.S.C. § 5			\$					
	* Amounts a	re subject to adjustment on 4/01/25 an	d every 3 years after tha	t for cases begun on	or after the date of adjustment.					
		- All Marie Control of the Control o								
Part 3: Sign Below		· · · · · · · · · · · · · · · · · · ·								
The person completing this proof of claim must	Check the appro									
sign and date it. FRBP 9011(b).		I am the creditor.								
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 5005(a)(3) authorizes courts	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.									
to establish local rules specifying what a signature	I understand that	t an authorized signature on this F	Proof of Claim serves	as an acknowledg	ment that when calculating the					
is.	amount of the cla	aim, the creditor gave the debtor	credit for any payment	s received toward	the debt.					
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.									
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.									
3571.	Executed on dat	e 04/08/2025 MM / DD / YYYY								
	0.	^ <i>1</i> /			•					
	Signatura	open Donnelly								
	Print the name	of the person who is completin	g and signing this c	aim:						
	Name	Stephen Donnelly								
	Hamo	First name	Middle name	Last r	ame					
	Title	Credit Manager								
Denemmen	Company	Atlas Distributing Inc	ne company if the authori	zed agent is a service	er.					
MEVERVEL		receiting the corporate conviction do the		-						
APR 17 2025	Address	44SouthbridgeSt								
RITAGLOBAL		Number Street		MA 01:	501					
		Auburn		State ZIP C						
		508 -791-6221			@atlasdistributing.com					
	Contact phone	JUU -1 3 1-022 1								

ATLAS DISTRIBUTING, INC. ATLAS DISTRIBUTING, INC. 44 SOUTHBRIDGE ST. MA 01501 AUBURN 508-791-6221

ACCOUNT STATEMENT

91779 4/08/25

DON SALOIS JR

OTB ACQUISITION LLC ON THE BORDER RESTAURA### 1228 RIVERDALE STREET WEST SPRINGFIEL MA 01089

DATE	INVOICE #	INVOICE BALANCE	ACCUM. BALANCE	DUE DATE	DAYS
2/05/25 2/21/25	309297 315081	406.35 128.45-	406.35 277.90	3/07/25 2/21/25	62 46

*** TOTAL OUTSTANDING ***

277.90

Please contact ACCOUNTSRECEIVABLE@ATLASDISTRIBUTING.COM with questions regarding invoices or payment

AGEING: 0- 30 31-45 46-60 OVER 61 TOT. OUTSTANDING .00 .00 128.45- 406.35 277.90



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Т 0 ATLAS DISTRIBUTING, INC. Page:

44 SOUTHBRIDGE STREET • P.O. BOX 420 AUBURN, MA 01501-0420 TELEPHONE: (508) 791-6221 • FAX: (508) 791-0812

www.atlasdistributing.com

¹ INVOICE

CUSTOMER# 91779

INVOICE # 309297

DATE

DUE DATE

2/05/25

AMOUNT REMITTED

ON THE BORDER RESTAURANT 1228 RIVERDALE STREET WEST SPRINGFIEL MA 01089 413 304-3500

INVOI 3	O 9 2 9	39	INVOICE DA 2/0	5/25	CUSTON	91779			DUE DATE	1	ET 30 DA	YS	SALESPERSON 901
		DELIVER	YINSTRUCTIONS		 T				MESSAGE			R	3300-071
PENS	AT	7 AM										. –	
ITEM		QUANTITY	-	DESCRI	PTION		P	PRICE 'ER CASE	DISCOUN	NET PRIC	E DEPOSIT	E	EXTENDED PRICE
6301	,	ASES BOTT	CORONA	XTRA L	SE NRI	12Z		34.30	<u> </u>	34.3			142.00
6311		i	CORONA					34.30		34.3			35.50
6302		3	CORONI					26.25		26.2			82.35 35.50
6321		1	CORONA			VR.		34.30 156.00	1				171.00
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TOT.	CAS	SES:	9 T	OT. KEG		1		TOT.	DEP.	\$	40.80		
PRODUCT	OTH	precois	TION PRICE	AMOUNT	PRODUCT CODE	NS QTY,	DESC	RIPTION	PRICE	AMOUNT	TOTAL SALE		466.35
PRODUCT CODE 99502	OTY.	DESCRIP	\$ 30.00	Amount			24 PK.		\$ 1.74				
99504		1/4 BBL.	\$ 30.00		99545		BAG - 0	- CANS \$ 17.40		_			
99506		1/6 BBL.	\$ 30.00		 	 			 				
		 		 	 	 			 		TOTAL		
		 			 						DUE		

MPORTANT: NO CLAIMS ALLOWED FOR SHORTAGE OR BREAKAGE UNLESS MADE AT TIME OF DELIVERY CHECK ORDER CAREFULLY AS NO SHORTAGE OR BREAKAGE CLAIMS ARE ALLOWED AFTER DELIVERY, ALL INVOICES OUTSTANDING 50 DAYS AFTER DELIVERY ARE SUBJECT TO A SERVICE CHARGE OF 1.5% PER MONTH, 18% PER YEAR.

'INDICATES DISCOUNT APPLIED TO PRICE PER CASE.

ATLAS DISTRIBUTING, INC.

44 SOUTHBRIDGE STREET - P.O. BOX 420 AUBURN, MA 01501-0420 TELEPHONE: (508) 791-6221

FAX: (508) 791-0812

ATLAS DRIVER'S SIGNATURE

RECEIVED AL OUSTOMER BY

DELIVERY COPY

DATE



D

ATLAS DISTRIBUTING, INC. Page: 1 INVOICE

44 SOUTHBRIDGE STREET • P.O. BOX 420 AUBURN, MA 01501-0420 TELEPHONE: (508) 791-6221 · FAX: (508) 791-0812 www.atlasdistributing.com

CUSTOMER# INVOICE # 91779 315081

DATE 2/21/25 DUE DATE

AMOUNT REMITTED

ON THE BORDER RESTAURA### 1228 RIVERDALE STREET WEST SPRINGFIEL MA 01089 413 304-3500

PO# PICK UP

DUE DATE SALESPERSON 901 CUSTOMER NUMBER 115081 2/21/25 PREPATO PENS AT 7 AM 5300-059 MESSAGE EXTENDED QUANTITY
CASES | XLGS NET PRICE ITEM PER GAGE DISCOUNT DEPOSIT DESCRIPTION PER CASE PRICE CODE ****** CLOSING/END OFSEASON (P/U) INV#299237 CORONA LIGHT LSE NR12Z 71.00-00002 CASES OF ITEM# 63113 @ 35 50 CLOSING/END OFSEASON (P/U) INV#309297 CORONITA 7Z LSE 27.45-00001 CASE OF ITEM# 63028 @ 27 45 EMPTIES ONLY INV#Curt. EMPTY 1/2 BBL @ \$30 30.00-00001 CASE OF ITEM# 99502 @ 30 00 1 × 1/4 Barrel Empty TOT. DEP. S .00 O TOT. KEGS: TOT. CASES EMPTIES / RETURNS TOTAL 128.45-PRICE AMOUNT DESCRIPTION AMOUNT PRODUCT CODE SALE DESCRIPTION QTY. PRICE 24 PK. CASE \$ 1.74 \$ 30.00 99510 1/2 BBL 99502 BAG - CANS \$ 17.40 99545 1/4 BBL \$ 30.00 99504 1/6 BBL \$ 30.00 99506 TOTAL DUE

MPORTANT: NO CHAIMS ALLOWED FOR SHORTAGE OR BREAKAGE UNLESS MADE AT TIME OF DELIVERY. ALL INVDICES OUTSTANDING 80 DAYS AFTER DELIVERY ARE SUBJECT TO A SERVICE CYPILED F 15% PER MONTH, 18% PER YEAR.
INDICATES DISCOUNT APPLIED TO PRICE PER CASE.

RECEIVED AT CUSTOME

DATE

ATLAS DISTRIBUTING, INC.

44 SOUTHBRIDGE STREET • P.O. BOX 420 AUBURN, MA 01501-0420 TELEPHONE: (508) 791-6221 FAX: (508) 791-0812

DELIVERY COPY

TLAS DRIVER'S SIGNATURE

S JONNELLY ATLASDISTRIBUTING YUSOUTHBRIDGE ST AUBURN, MA 01501



US POSTAGE MIPTINEY BOWES

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CLEARED SECURITY

APR. 15, 2025:

U.S. MARSHALS SERVICE Atlanta, Georgia

CLERKOFTHE UNITED STATES BANKRUPTCY COURT 75 TED TURNER DRIVE, SW ATLANTA, GA 30303