

Fill in this information to identify the case:Debtor OTB Acquisition of Kansas LLCUnited States Bankruptcy Court for the: Northern District of Georgia
(State)Case number 25-52420**Modified 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 or 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?	A FORD ABLE LOCKSMITHING 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom?	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	A FORD ABLE LOCKSMITHING INC PO BOX 118 HAYSVILLE, KS 67060-0118	
	Contact phone	Contact phone
	Contact email <u>a-ford-able@cox.net</u>	Contact email
	Uniform claim identifier (if you use one):	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: __ __ __ __
7. How much is the claim? \$ <u>312.52</u>	Does this amount include interest or other charges? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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?	<p>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.</p> <p><u>goods sold/services performed</u></p>
9. Is all or part of the claim secured?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature or property: <div><input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>. <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____</div> Basis for perfection: _____ <small>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.)</small> Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount 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) _____ % <div><input type="checkbox"/> Fixed <input type="checkbox"/> Variable</div></div>
10. Is this claim based on a lease?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</div>
11. Is this claim subject to a right of setoff?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Identify the property: _____</div>



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check all that apply:

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

Amount entitled to priority

\$ _____

☐ 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.

\$ _____

* 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.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?

☒ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ _____

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)(3) 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 acknowledgement 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 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 05/29/2025
MM / DD / YYYY

/s/Tim Ford
Signature

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

Name Tim Ford
First name Middle name Last name

Title pres

Company A-Ford-able Locksmithing inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____

Contact phone _____ Email _____



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 647-1744 | International (310) 751-2628

Debtor: 25-52420 - OTB Acquisition of Kansas LLC		
District: Northern District of Georgia, Atlanta Division		
Creditor: A FORD ABLE LOCKSMITHING INC PO BOX 118 HAYSVILLE, KS, 67060-0118 Phone: Phone 2: Fax: Email: a-ford-able@cox.net	Has Supporting Documentation: Yes, please mail physical supporting documentation Related Document Statement: TypeDateNumMemoAccountClrSplitAmount ON THE BORDER EAST St	
	Has Related Claim: No	
	Related Claim Filed By:	
	Filing Party: Creditor	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: goods sold/services performed	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 312.52	Includes Interest or Charges: Yes	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): No Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Tim Ford on 29-May-2025 8:40:41 a.m. Pacific Time Title: pres Company: A-Ford-able Locksmithing inc.		

**Additional Supporting
Documents Received on
6/9/2025**

RECEIVED
JUN 09 2025
VERITA GLOBAL



255241525060900000000002

Fill in this information to identify the case:

Debtor OTB Acquisition of Kansas LLC

United States Bankruptcy Court for the: Northern District of Georgia
(State)

Case number 25-52420

Modified Official Form 410 Proof of Claim

12/24

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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.

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2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? <u>A FORD ABLE LOCKSMITHING INC</u> <u>PO BOX 118</u> <u>HAYSVILLE, KS 67060-0118</u>	Where should payments to the creditor be sent? (if different) _____
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)		
<div> <div> RECEIVED JUN 09 2025 VERITA GLOBAL </div> <div> Contact phone <u>316 648-6807</u> Contact email <u>a-ford-able@cox.net</u> </div> <div> Contact phone _____ Contact email _____ </div> </div>		
Uniform claim identifier (if you use one): _____		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on <u>MM / DD / YYYY</u>	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim? \$ <u>312.52</u>	Does this amount include interest or other charges? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
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9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature or property: <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> 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 amount 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) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
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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



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).

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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.

\$ _____

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13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?



No



Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

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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 acknowledgement 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 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 05/29/2025
MM / DD / YYYY

/s/Tim Ford
Signature

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

Name

Tim Ford

First name

Middle name

Last name

Title

pres

Company

A-Ford-able Locksmithing Inc.

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

Address

Contact phone

316) 648-6807

Email

a-ford-able@Cox.Net



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 647-1744 | International (310) 751-2628

Debtor: 25-52420 - OTB Acquisition of Kansas LLC		
District: Northern District of Georgia, Atlanta Division		
Creditor: A FORD ABLE LOCKSMITHING INC PO BOX 118 HAYSVILLE, KS, 67060-0118 Phone: Phone 2: Fax: Email: a-ford-able@cox.net	Has Supporting Documentation: Yes, please mail physical supporting documentation Related Document Statement: TypeDateNumMemoAccountClrSpiltAmount ON THE BORDER EAST St	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party: Creditor	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: goods sold/services performed	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 312.52	Includes Interest or Charges: Yes	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): No Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Tim Ford on 29-May-2025 8:40:41 a.m. Pacific Time Title: pres Company: A-Ford-able Locksmithing inc.		

A-Ford-Able Locksmithing, Inc.

P O Box 118
Haysville, KS 67060
316-524-5625

Statement

Date
4/30/2025

To:
ON THE BORDER 2201 W. ROYAL LN. #170 IRVING, TX. 75063

Account #	
Due Date	5/15/2025
Amount Due	\$71.84

Fax #	Web Site	Amount Enc.
316-522-2131	affordablelocksmithing.com	
	a-ford-able@cox.net	

Date	Transaction	Amount	Balance		
07/31/2024	#540518. --- Locksmithing \$64.59	64.59	64.59		
10/31/2024	INV #FC 2449. Orig. Amount \$1.47. Finance Charge --- FINANCE CHARGE \$1.47	1.47	66.06		
11/30/2024	--- Stmt Charge #540518 for 64.59 on 07/31/2024 INV #FC 2464. Orig. Amount \$0.96. Finance Charge --- FINANCE CHARGE \$0.96	0.96	67.02		
12/30/2024	--- Stmt Charge #540518 for 64.59 on 07/31/2024 INV #FC 2486. Orig. Amount \$0.96. Finance Charge --- FINANCE CHARGE \$0.96	0.96	67.98		
01/31/2025	--- Stmt Charge #540518 for 64.59 on 07/31/2024 INV #FC 2504. Orig. Amount \$1.02. Finance Charge --- FINANCE CHARGE \$1.02	1.02	69.00		
03/01/2025	--- Stmt Charge #540518 for 64.59 on 07/31/2024 INV #FC 2522. Orig. Amount \$0.92. Finance Charge --- FINANCE CHARGE \$0.92	0.92	69.92		
03/31/2025	--- Stmt Charge #540518 for 64.59 on 07/31/2024 INV #FC 2544. Orig. Amount \$0.96. Finance Charge --- FINANCE CHARGE \$0.96	0.96	70.88		
04/30/2025	--- Stmt Charge #540518 for 64.59 on 07/31/2024 INV #FC 2565. Orig. Amount \$0.96. Finance Charge --- FINANCE CHARGE \$0.96	0.96	71.84		
	--- Stmt Charge #540518 for 64.59 on 07/31/2024				
CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due
0.96	0.96	0.92	1.02	67.98	\$71.84

The LEGAL rate of interest will be assessed on all accounts past due. AS ALLOWED BY KANSAS LAW. A FINANCE CHARGE OF 1.5% of the previous balance less any payments or credits during that month. This is an ANNUAL PERCENTAGE RATE OF 18%
the purchaser agrees to pay whatever additional sum the court may adjudge reasonable as attorney fees in case suit or action is commenced to collect all or part of this account.

A-Ford-Able Locksmithing, Inc.

P O Box 118
Haysville, KS 67060
316-524-5625

Statement

Date
4/30/2025

To:
ON THE BORDER 2201 W. ROYAL LN. #170 IRVING, TX. 75063

Account #	
Due Date	5/15/2025
Amount Due	\$240.68

Fax #	Web Site		Amount Enc.
316-522-2131	affordablelocksmithing.com	a-ford-able@cox.net	

Date	Transaction	Amount	Balance		
07/22/2024	#540493. --- Locksmithing \$213.51	213.51	213.51		
10/31/2024	INV #FC 2450. Orig. Amount \$8.11. Finance Charge --- FINANCE CHARGE \$8.11	8.11	221.62		
11/30/2024	--- Stmt Charge #540493 for 213.51 on 07/22/2024 INV #FC 2465. Orig. Amount \$3.16. Finance Charge --- FINANCE CHARGE \$3.16	3.16	224.78		
12/30/2024	--- Stmt Charge #540493 for 213.51 on 07/22/2024 INV #FC 2487. Orig. Amount \$3.16. Finance Charge --- FINANCE CHARGE \$3.16	3.16	227.94		
01/31/2025	--- Stmt Charge #540493 for 213.51 on 07/22/2024 INV #FC 2505. Orig. Amount \$3.37. \n Finance Charge --- FINANCE CHARGE \$3.37	3.37	231.31		
03/01/2025	--- Stmt Charge #540493 for 213.51 on 07/22/2024 INV #FC 2523. Orig. Amount \$3.05. Finance Charge --- FINANCE CHARGE \$3.05	3.05	234.36		
03/31/2025	--- Stmt Charge #540493 for 213.51 on 07/22/2024 INV #FC 2545. Orig. Amount \$3.16. Finance Charge --- FINANCE CHARGE \$3.16	3.16	237.52		
04/30/2025	--- Stmt Charge #540493 for 213.51 on 07/22/2024 INV #FC 2566. Orig. Amount \$3.16. Finance Charge --- FINANCE CHARGE \$3.16 --- Stmt Charge #540493 for 213.51 on 07/22/2024	3.16	240.68		
CURRENT	1-30 DAYS PAST DUE	31-60 DAYS PAST DUE	61-90 DAYS PAST DUE	OVER 90 DAYS PAST DUE	Amount Due
3.16	3.16	3.05	3.37	227.94	\$240.68

The LEGAL rate of interest will be assessed on all accounts past due. AS ALLOWED BY KANSAS LAW. A FINANCE CHARGE OF 1.5% of the previous balance less any payments or credits during that month. This is an ANNUAL PERCENTAGE RATE OF 18%
the purchaser agrees to pay whatever additional sum the court may adjudge reasonable as attorney fees in case suit or action is commenced to collect all or part of this account.