


Fill in this information to identify the case:

Debtor 1 Premier Kings, Inc.

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Alabama 

Case number 23-02871

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?	<u>Datasite LLC</u> 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? <u>Datasite LLC</u> Name <u>733 South Marquette Ave., Suite 600</u> Number Street <u>Minneapolis MN 55402</u> City State ZIP Code Contact phone <u>651-632-4046</u> Contact email <u>leif.simpson@datasite.com</u>	Where should payments to the creditor be sent? (if different) <u>Datasite LLC</u> Name <u>P.O. Box 74007252</u> Number Street <u>Chicago IL 60674</u> City State ZIP Code Contact phone <u>651-632-4046</u> Contact email <u>leif.simpson@datasite.com</u>
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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230287123120700000000006

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? \$ 9,283.72 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 provided

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

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: _____

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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 one:

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 \$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 11/22/2023
MM / DD / YYYY



 Signature

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

Name Leif E Simpson
First name Middle name Last name

Title Credit Manager

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

Address 733 South Marquette Ave., Suite 600
Number Street

Minneapolis MN 55402
City State ZIP Code

Contact phone 651-632-4046 Email leif.simpson@datasite.com

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INVOICE

Datasite LLC
 Baker Center
 733 S Marquette Ave, Suite 600
 Minneapolis, MN 55402
 United States

Premier Kings, Inc. 7078 Peachtree Industrial Boulevard, Suite 800 Peachtree Corners GA 30071 ATTN : Premier Kings Accounting	Invoice Number	INV-607134
	Invoice Date	05-Sep-23
	Invoice Due Date	05-Oct-23
	Billing Period	01-Aug-23 to 31-Aug-23
	Invoice Total	USD 437.00
PO Number		
Tax Number		

Description	Quantity	Price	Amount
Project Name: Royalty Project Id: a278a00000ABF03AAH Effective: 18-Jul-23 Term: 6 Months			
Pages Processed	950	USD 0.460	USD 437.00
Project Subtotal			USD 437.00

Subtotal	USD 437.00
Tax	USD 0.00
Total Invoice Amount	USD 437.00

Remit To Information	
Remit Check Payment to: Datasite LLC P. O. Box 74007252 Chicago, IL 60674-7252 PLEASE PAY FROM THIS INVOICE (1.5% SERVICE CHARGE PER MONTH ADDED TO PAST DUE ACCOUNTS) Tax ID No. 41-2007271	Remit ACH/Fed Wire Payment to: Datasite LLC Account #: 4451043298 Bank of America 100 West 33rd Street New York, NY 10001 ACH Routing: 111000012 Wire ABA Routing: 026009593 SWIFT CODE: BOFAUS3N

Please reference Datasite invoice # on your payment
 Pay your invoices in our new billing center.

The online Billing Center at Datasite Assist is accessible to authorized billing contacts registered in the form of individual email addresses excluding email distribution lists.

Datasite LLC
 Baker Center
 733 S Marquette Ave, Suite 600
 Minneapolis, MN 55402
 United States

Premier Kings, Inc. 7078 Peachtree Industrial Boulevard, Suite 800 Peachtree Corners GA 30071 ATTN : Premier Kings Accounting	Invoice Number	INV-618224
	Invoice Date	05-Oct-23
	Invoice Due Date	04-Nov-23
	Billing Period	01-Sep-23 to 30-Sep-23
	Invoice Total	USD 538.20
PO Number		
Tax Number		

Description	Quantity	Price	Amount
Project Name: Royalty Project Id: a278a00000ABF03AAH Effective: 18-Jul-23 Term: 6 Months			
Pages Processed	1,170	USD 0.460	USD 538.20
Project Subtotal			USD 538.20

Subtotal	USD 538.20
Tax	USD 0.00
Total Invoice Amount	USD 538.20

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INVOICE

Datasite LLC
 Baker Center
 733 S Marquette Ave, Suite 600
 Minneapolis, MN 55402
 United States

Premier Kings, Inc. 7078 Peachtree Industrial Boulevard, Suite 800 Peachtree Corners GA 30071 ATTN : Premier Kings Accounting	Invoice Number	INV-632764
	Invoice Date	16-Nov-23
	Invoice Due Date	16-Dec-23
	Billing Period	01-Oct-23 to 25-Oct-23
	Invoice Total	USD 8,308.52
PO Number		
Tax Number		

Description	Quantity	Price	Amount
Project Name: Royalty Project Id: a278a00000ABF03AAH Effective: 18-Jul-23 Term: 6 Months			
Pages Processed	18,062	USD 0.460	USD 8,308.52
Project Subtotal			USD 8,308.52

Subtotal	USD 8,308.52
Tax	USD 0.00
Total Invoice Amount	USD 8,308.52

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Remit Check Payment to: Datasite LLC P. O. Box 74007252 Chicago, IL 60674-7252 PLEASE PAY FROM THIS INVOICE (1.5% SERVICE CHARGE PER MONTH ADDED TO PAST DUE ACCOUNTS) Tax ID No. 41-2007271	Remit ACH/Fed Wire Payment to: Datasite LLC Account #: 4451043298 Bank of America 100 West 33rd Street New York, NY 10001 ACH Routing: 111000012 Wire ABA Routing: 026009593 SWIFT CODE: BOFAUS3N

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