

Fill in this information to identify the case:

Debtor NewCom International, Inc.
 United States Bankruptcy Court for the: Southern District of Texas
(State)
 Case number 20-32270

**Official Form 410
 Proof of Claim**

04/19

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?	<u>ADECCO COLOMBIA S A</u> <small>Name of the current creditor (the person or entity to be paid for this claim)</small> 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? See summary page	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Contact phone <u>3232237763</u> Contact email <u>norbey.vasquez@adecco.com</u>	Contact phone _____ Contact email _____
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 _____ <small>MM / DD / YYYY</small>	
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? No
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 5901 ____

7. How much is the claim? \$ 21,704.595. 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 or property:
 Real estate: If the claim is secured by the debtor's principle 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 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) _____ %
 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)?

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:

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$13,650*) 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).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.	\$ _____

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim 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)(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 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 07/01/2020
MM / DD / YYYY

/s/Norbey Vasquez
Signature

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

Name Norbey Vasquez
First name Middle name Last name

Title Facturas pendientes de pago

Company ADECCO COLOMBIA S A
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____

Contact phone _____ Email _____



KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877) 709-4758 | International (424) 236-7236

Debtor: 20-32270 - NewCom International, Inc.		
District: Southern District of Texas, Houston Division		
Creditor: ADECCO COLOMBIA S A Carrera 7 # 76 -35. Piso 6, Bogotá D.C. – Colombia Autopista Norte No. 114 – 44 Oficina 601 Bogotá D.C, Bogotá D.C, 11001 Colombia Phone: 3232237763 Phone 2: 7462605 Fax: Email: norbey.vasquez@adecco.com	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party:	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: services performed	Last 4 Digits: Yes - 5901	Uniform Claim Identifier:
Total Amount of Claim: 21,704.595	Includes Interest or Charges: No	
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: Norbey Vasquez on 01-Jul-2020 8:40:07 a.m. Eastern Time Title: Facturas pendientes de pago Company: ADECCO COLOMBIA S A		

Adecco

ADECCO COLOMBIA S A
860.050.906-1



**DIVISION ESPECIALIZADA
FINANCE & LEGAL**

CL 70A 9 46 Bogotá
Tel: 3259500
BOGOTÁ, COLOMBIA
CR 7 76 35 P 6
PBX: 4895454

Señores:

SPEEDCAST SUCURSAL COLOMBIA

A K 45 108 27 TO 2 OF 804 Bogotá
Nit.: 900455901-9
Teléfono: 3001566
Código: 900455901
Radicación:

**FACTURA
ELECTRÓNICA DE
VENTA No.**

2FC8779

CIUDAD Y FECHA
BOGOTÁ, martes, 7 de abril de 2020
COLOMBIA

Fecha de Vencimiento: miércoles, 15 de abril de 2020



DETALLE: MARZO 2020 Servicios Prestados: - 20200331

	Valor \$
Salario por Horas -	5.762.273
Auxilio de Transporte -	205.708
Prestaciones Sociales -	2.546.292
Costo Administracion -	1.192.001
Subtotal	9.706.274
IVA (Base: 1.192.001)	226.480
Reintegros a Terceros	0
Devolucion Descuento	0
Valor a pagar	9.932.754

VALOR TOTAL: 9.932.754

VALOR EN LETRAS: NUEVE MILLONES NOVECIENTOS TREINTA Y DOS MIL SETECIENTOS CINCUENTA Y CUATRO PESOS CON CERO CVS M/CTE.

IMPRESO POR: ADECCO COLOMBIA NIT: 860.050.906-1 Tel: 4895454

ACEPTO

ADECCO\Carlos.Mercado

Nombre _____

Firma _____

Identificación _____

Fecha de Recibo _____

Actividad Eco. ICA 7820 Rég. Común. Autorete- Res DIAN 06438 de Jul 26/04 – Gran Cont. Res 000076 Dic 01/16
Factura electronica resolución DIAN No. 18763002255146 del 02 de Diciembre de 2019 al 01 de Diciembre de 2021. Autoriza Rango del No. 2FC1 al No. 2FC100000

Nota: Sírvase cancelar la presente factura con cheque cruzado a favor de Adecco Colombia S.A., hacer transferencia electrónica o consignación en nuestra cuenta recaudadora: cuenta de Ahorros **BBVA No.493003750**

Esta factura se asimila en sus efectos a una letra de cambio, conforme al artículo 621 y 774 C.Co. Esta factura es un título valor conforme a la ley 1231 del 17 de Julio de 2008. Se cobraran intereses moratorios a la tasa máxima legal permitida sobre el valor de las facturas vencidas, las sumas recibidas se imputarán primero a intereses y el saldo se abonará a capital, conforme a los artículos 1653 C.C. y 884 C.Co, sin perjuicio de las acciones ejecutivas a que haya lugar.

En cumplimiento de lo dispuesto en el Art 13 el Decreto 4369/06, usted podrá consultar la información sobre afiliación y pago de aportes al sistema de Seguridad Social Integral de trabajadores en misión a su servicio en la página www.adecco.com.co

Adecco



DIVISION ESPECIALIZADA IT
(INFORMATICA Y
TECNOLOGIA)

Auto Norte # 114-44 Oficina 601 Bogotá

Tel: 7462605

BOGOTÁ, COLOMBIA

CR 7 76 35 P 6

ADECCO COLOMBIA S A

860.050.906-1

Señores:

SPEEDCAST SUCURSAL COLOMBIA

A K 45 108 27 TO 2 OF 804 Bogotá

Nit.: 900455901-9

Teléfono: 3001566

Código: 900455901

Radicación:

**FACTURA
ELECTRÓNICA DE
VENTA No.**

2FC9627

CIUDAD Y FECHA

BOGOTÁ, lunes, 20 de abril de 2020
COLOMBIA

Fecha de Vencimiento: martes, 28 de abril de 2020



DETALLE: ABRIL 2020 -Servicios Prestados: 20200430

	Valor \$
Salario por Horas -	6.872.273
Auxilio de Transporte -	205.708
Prestaciones Sociales -	3.012.742
Costo Administracion -	1.412.704
Subtotal	11.503.427
IVA (Base: 1.412.704)	268.414
Reintegros a Terceros	0
Devolucion Descuento	0
Valor a pagar	11.771.841

VALOR TOTAL:

11.771.841

VALOR EN LETRAS: ONCE MILLONES SETECIENTOS SETENTA Y UN MIL OCHOCIENTOS CUARENTA Y UN PESOS CON CERO CVS M/CTE.

IMPRESO POR: ADECCO COLOMBIA NIT: 860.050.906-1 Tel: 4895454

ACEPTO

adecco\Ever.Reyes

Nombre _____

Identificación _____

Firma _____

Fecha de Recibo _____

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