

**Fill in this information to identify the case:**

Debtor Joe's Holdings, LLC

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware  
(State)

Case number 21-11205

**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>FORD MODELS, INC.</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?	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>FORD MODELS, INC.</u> <u>ACCOUNTING</u> <u>11 E 26th Street, FL14</u> <u>New York, United Sta 10010, US</u>	
	Contact phone <u>212-219-6500</u>	Contact phone _____
	Contact email <u>dchase@fordmodels.com</u>	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 _____ 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?  No  
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 7794 \_\_\_\_

7. How much is the claim? \$ 4211.18. 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 rendered and usage rights granted to the debtor

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)?

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 10/14/2021  
MM / DD / YYYY

/s/David Chase  
Signature

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

Name David Chase  
First name Middle name Last name

Title Contracts Manager

Company Ford Models, Inc  
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 (866) 556-7696 | International 001-310-823-9000

<b>Debtor:</b> 21-11205 - Joe's Holdings, LLC		
<b>District:</b> District of Delaware		
<b>Creditor:</b> FORD MODELS, INC. ACCOUNTING 11 E 26th Street, FL14  New York, United Sta, 10010 US <b>Phone:</b> 212-219-6500 <b>Phone 2:</b>  <b>Fax:</b>  <b>Email:</b> dchase@fordmodels.com	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded <b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> No <b>Related Claim Filed By:</b>	
	<b>Filing Party:</b> Creditor	
<b>Other Names Used with Debtor:</b>	<b>Amends Claim:</b> No <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> Services rendered and usage rights granted to the debtor	<b>Last 4 Digits:</b> Yes - 7794	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 4211.18	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> No <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> <b>Value of Property:</b> <b>Annual Interest Rate:</b> <b>Arrearage Amount:</b> <b>Basis for Perfection:</b> <b>Amount Unsecured:</b>	
<b>Submitted By:</b> David Chase on 14-Oct-2021 4:33:50 p.m. Eastern Time  <b>Title:</b> Contracts Manager  <b>Company:</b> Ford Models, Inc		

# FORD MODELS

**Ford Models, Inc.**

11 East 26th Street, 14th Floor, New York, NY 10010  
tel (212) 219-6500

INVOICE DATE      02/21/2020  
INVOICE #          75831  
TERMS :            PAYABLE UPON RE  
DUE DATE :        2/21/2020

**JOE'S JEANS**

Centric West Joe's 2019s Jeans  
GREENSBORO, NC 27407

JOB DATE <b>02/20/2020</b>	Model Name		
MODEL ID <b>94735</b>	CLIENT ID <b>57794</b>	<b>TYLER WOOD</b>	
		Batch # 91250	

PRODUCT <b>SAKS SUMMIT SHOOT</b>	Ford Agent <b>Demi Cambridge</b>
USAGE	P. O. #

DESCRIPTION	QTY	RATE	AMOUNT	EXP / OTHER
<b>DAY</b>	<b>1.00</b>	<b>2,000.00</b>	<b>2,000.00</b>	
PLEASE MAKE CHECK PAYABLE TO: <b>Ford Models, Inc.</b>			<b>2,000.00</b>	
AND MAIL IT TO: <b>Ford Models, Inc.</b>			<b>400.00</b>	
Attn: Accounts Receivable	SERVICE CHARGE		<b>400.00</b>	
11 East 26th Street, 14th Floor	SUB TOTAL		<b>2,400.00</b>	
New York, NY 10010	<b>TOTAL INVOICE</b>		<b>2,400.00</b>	
	USD			

Invoice    Fashion  
Notes

*Please note prompt payment to Ford Models, Inc. within the stated terms ensures talent retained by your company will be paid in a timely manner.*

**\*\*IMPORTANT:** Include your Client ID and each Invoice Number being paid in the "reference section of your remittance"  
A finance charge of 1.5% per month will be added to the amounts unpaid as of the Due Date.

This invoice reflects the rates and services previously agreed upon by a representative of the billed client. If there are any questions or concerns, please contact us at [billing@fordmodels.com](mailto:billing@fordmodels.com) or 312-646-7347

**THANK YOU.**

# FORD MODELS

**Ford Models, Inc.**

11 East 26th Street, 14th Floor, New York, NY 10010  
tel (212) 219-6500

INVOICE DATE      02/29/2020  
INVOICE #          76026  
TERMS :            PAYABLE UPON RE  
DUE DATE :        2/29/2020

**JOE'S JEANS**

Sayge Greeley  
Centric West Joe's 2019s Jeans  
GREENSBORO, NC 27407

JOB DATE <b>02/28/2020</b>	Model Name		
MODEL ID <b>94735</b>	CLIENT ID <b>57794</b>	<b>TYLER WOOD</b>	
		Batch # 91416	

PRODUCT <b>Presentation</b>	Ford Agent <b>Demi Cambridge</b>
USAGE	P. O. #

DESCRIPTION	QTY	RATE	AMOUNT	EXP / OTHER
DAY	1.00	1,300.00	1,300.00	
TAXI	1.00	11.62		11.62
TAXI	1.00	11.76		11.76
FLIGHT	1.00	227.80		227.80
PLEASE MAKE CHECK PAYABLE TO: <b>Ford Models, Inc.</b>			<b>1,300.00</b>	
AND MAIL IT TO: <b>Ford Models, Inc.</b>			<b>260.00</b>	
Attn: Accounts Receivable	SERVICE CHARGE		<b>260.00</b>	
11 East 26th Street, 14th Floor	SUB TOTAL		<b>1,560.00</b>	<b>251.18</b>
New York, NY 10010	<b>TOTAL INVOICE                    USD</b>		<b>1,811.18</b>	

Invoice    Fashion
Notes

*Please note prompt payment to Ford Models, Inc. within the stated terms ensures talent retained by your company will be paid in a timely manner.*

**\*\*IMPORTANT:** Include your Client ID and each Invoice Number being paid in the "reference section of your remittance"  
A finance charge of 1.5% per month will be added to the amounts unpaid as of the Due Date.

This invoice reflects the rates and services previously agreed upon by a representative of the billed client. If there are any questions or concerns, please contact us at [billing@fordmodels.com](mailto:billing@fordmodels.com) or 312-646-7347

**THANK YOU.**