

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

Debtor Thrasio, LLC

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

Case number 24-11902

**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 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. <b>Who is the current creditor?</b>	<u>Majmudar and Partners</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. <b>Has this claim been acquired from someone else?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. <b>Where should notices and payments to the creditor be sent?</b>	<b>Where should notices to the creditor be sent?</b> See summary page	<b>Where should payments to the creditor be sent? (if different)</b>
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	
	Contact phone <u>+91 22 6123-7272</u>	Contact phone _____
	Contact email <u>akil@majmudarindia.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
4. <b>Does this claim amend one already filed?</b>	<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. <b>Do you know if anyone else has filed a proof of claim for this claim?</b>	<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: 4692 \_\_\_\_

7. How much is the claim? \$ 456.67. 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.  
Legal Services

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: \_\_\_\_\_



<p><b>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</b></p> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"><input checked="" type="checkbox"/></td> <td style="width: 70%;">No</td> <td style="width: 25%;"></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Yes. <i>Check all that apply:</i></td> <td style="text-align: center; background-color: #e0e0e0;"><b>Amount entitled to priority</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>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).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>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).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p style="font-size: small;">* 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.</p>	<input checked="" type="checkbox"/>	No		<input type="checkbox"/>	Yes. <i>Check all that apply:</i>	<b>Amount entitled to priority</b>	<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 \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____	<input type="checkbox"/>	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).	\$ _____	<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.	\$ _____
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<p><b>13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. 503(b)(9)?</b></p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%;"><input checked="" type="checkbox"/></td> <td style="width: 70%;">No</td> <td style="width: 25%;"></td> </tr> <tr> <td><input type="checkbox"/></td> <td>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.</td> <td style="text-align: right;">\$ _____</td> </tr> </table>	<input checked="" type="checkbox"/>	No		<input type="checkbox"/>	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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**Part 3: Sign Below**

<p><b>The person completing this proof of claim must sign and date it. FRBP 9011(b).</b></p> <p>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</p> <p><b>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.</b></p>	<p><i>Check the appropriate box:</i></p> <p><input checked="" type="checkbox"/> I am the creditor.</p> <p><input type="checkbox"/> I am the creditor's attorney or authorized agent.</p> <p><input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.</p> <p><input type="checkbox"/> I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.</p> <p>I understand that an authorized signature on this <i>Proof of Claim</i> 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.</p> <p>I have examined the information in this <i>Proof of Claim</i> and have reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date <u>05/03/2024</u> <small>MM / DD / YYYY</small></p> <p><u>/s/Rahul Pimple</u> <small>Signature</small></p> <p><b>Print the name of the person who is completing and signing this claim:</b></p> <p>Name <u>Rahul Pimple</u> <small>First name Middle name Last name</small></p> <p>Title <u>Manager - Billing</u></p> <p>Company <u>Majmudar and Partners</u> <small>Identify the corporate servicer as the company if the authorized agent is a servicer.</small></p> <p>Address _____</p> <p>Contact phone _____ Email _____</p>
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# KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 967-0496 | International +1 (310) 751-2696

<b>Debtor:</b> 24-11902 - Thrasio, LLC		
<b>District:</b> District of New Jersey, Trenton Division		
<b>Creditor:</b> Majmudar and Partners  96 Free Press House, 9th Floor, Free Press Journal Nariman Point  Mumbai, Maharashtra, 400 021 India <b>Phone:</b> +91 22 6123-7272 <b>Phone 2:</b>  <b>Fax:</b>  <b>Email:</b> akil@majmudarindia.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> Legal Services	<b>Last 4 Digits:</b> Yes - 4692	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 456.67	<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> Rahul Pimple on 03-May-2024 2:37:17 a.m. Eastern Time <b>Title:</b> Manager - Billing <b>Company:</b> Majmudar and Partners		



Raheja Chambers, 2nd floor, Free Press Journal Road, Nariman Point, Mumbai, 400021 Maharashtra, INDIA  
•Tel: +91 22 6123-7272 •Fax: +91 22 6123-7252 •E-mail: invoices@majmudarindia.com

## TAX INVOICE

"SUPPLY MEANT FOR EXPORT ON PAYMENT OF INTEGRATED TAX" OR "SUPPLY MEANT FOR EXPORT UNDER BOND" OR  
"LETTER OF UNDERTAKING WITHOUT PAYMENT OF IGST"

<b>Invoice No.</b> MNP/03/24/0023	<b>Place of Supply :</b> Export
<b>Invoice Date</b> March 11, 2024	<b>Whether the tax is payable on reverse charge :</b> No
<b>GSTIN</b> 27AAUFM9136B1ZZ	

<b>Attention</b> Michael Fahey Thrasio LLC 85 West Street, Walpole, MA, USA	<b>Our Ref.</b> MAT-02570 <b>Matter</b> GL-LIF-800015-IN-MP-Project Sachin <b>Period</b> February 1, 2024 through February 29, 2024 <b>SAC Code</b> 998212 - Legal advisory and representation services concerning other fields of law.
<b>Client GSTIN</b> NA	

IRN No.: 0c5954fa4fef9ba94780c0f6bb35a045dea3a7bb0160d38a06dfcc27faa8ff92

Particulars	Taxable Value	CGST (Rate: 0%)	SGST/ UTGST (Rate: 0%)	IGST (Rate 0%)	Total Amount (USD)
GL-LIF-800015-IN-MP-Project Sachin	456.67				456.67
<b>Total Fees</b>					<b>456.67</b>
Less: Deposit Received					0.00
<b>Total Value of Invoice</b>					<b>456.67</b>

Invoice Value in Words: USD Four Hundred and Fifty Six and Sixty Seven only

Signature of the Authorized Representative:

Bank Name: Please send the payment to our bank account stated in the attachment



*Raheja Chambers, 2nd floor, Free Press Journal Road, Nariman Point, Mumbai, 400021 Maharashtra, INDIA*  
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**Overall Billing Summary**

Akil Hirani	0.20 hrs	USD	600/hr	Total USD	200.00
Geetha Sajeev	0.40 hrs	USD	190/hr	Total USD	126.66
Sinjini Majumdar	0.20 hrs	USD	390/hr	Total USD	130.00
<b>Total Services &amp; Disbursements</b>				<b>USD</b>	<b>456.67</b>



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Matter : GL-LIF-800015-IN-MP-Project Sachin

Client Name : Thrasio LLC

**ITEMISED BREAK-UP**

<b>Date</b>	<b>Description of Services</b>	<b>Attorney</b>	<b>Time</b>
2/29/2024	Noted instructions from A. Hirani re PAN query of client. Assessed and prepared advice setting out procedure and need for undertaking.	Geetha Sajeev	0.40
	Reviewed e-mail from M. Fahey re PAN undertaking query. Noted contents and raised a query. Reviewed reply and instructed M&P to assess need for this undertaking. Reviewed advice, finalized and sent to Mike.	Akil Hirani	0.20
	Reviewed emails between M. Fahey, A. Hirani and C. Harris re PAN undertaking.	Sinjini Majumdar	0.20
		<b>Total</b>	1.20

*Other offices: Bangalore and New York*

*Integrated Network Offices: Chennai, Hyderabad and New Delhi*

*[www.majmudarindia.com](http://www.majmudarindia.com)*