Fill in this information to identify the case:

Claim #4 Date Filed: 8/11/2026

Debtor1 CASHCALL INC

Debtor 2
(Spouse, if filing)

United States Bankruptcy Court for the SOUTHERN (SAN DIEGO) District of CALIFORNIA

Case number 26-03102

☑ Date Stamped Copy Returned
☐ No self addressed stamped envelope
☐ No copy to return

Official Form 410
Proof of Claim **04/25**

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 data is on the notice of bankruptcy (Form 309) that you received

Part 1: Identify the Claim

1 Who is the current creditor?	NM Taxation & Revenue Department Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor	Creditor Number 2264299
2 Has this claim been acquired from someone else?	☑ No ☐ Yes From whom?	
3 Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? NM TAXATION & REVENUE DEPARTMENT COMPLIANCE BUREAU PO BOX 50129 ALBUQUERQUE, NM 87181-0129 Contact phone (505) 477-1026 Contact email lisa ela@tax nm gov	Where should payments to the creditor be sent? (if different) NM TAXATION & REVENUE DEPARTMENT COMPLIANCE BUREAU PO BOX 50129 ALBUQUERQUE, NM 87181-0129 Contact phone (505) 477-1026 Contact email lisa ela@tax nm gov
4 Does this claim amend one already filed?	☑ No ☐ Yes Claim number on court claims registry (if known) Filed on	
5 Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes Who made the earlier filing?	

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AUG 11 2026
VERITA GLOBAL

