SUPPLEMENT TO MODIFIED OFFICIAL FORM 410 ("PROOF OF CLAIM FORM")

CLAIM SUMMARY REQUEST FORM

If you are a current or former employee of Zachry or one of its affiliates, you do **not** need to complete this form.

For all claimants who are vendors and customers of the Debtors, although completion of this form is **not mandatory**, the Debtors **strongly recommend** that any party asserting a claim fill out this form in full and submit it with the Proof of Claim Form. Filling out this supplement in full will allow the Debtors to understand the facts supporting the claim and reconcile the claim against the Debtors' books and records. The Bankruptcy Court encourages claimants to complete this form. You **must** submit a Form 410 Proof of Claim, this form alone does not constitute the filing of a Proof of Claim in the Chapter 11 case of Zachry Holding Inc., et al., Case No. 24-90377. For more information, please visit https://www.veritaglobal.net/zhi.

1. Name of claimant as stated on Proof of Claim Form:

Ace Hydraulics, Inc

2. Claim Summary. List of Project / Job Name(s), Job Location(s), and Purchase Order(s) and description of the claim (you may attach a separate summary that contains the same information):

#	Project Name(s)	Amount of Claim
1	Invoice 51912	$2,245.72
2	Invoice 52384	$702.26
3		

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#	Job Name(s)	Job Location(s)	Purchase Order(s)	Amount of Claim
1	Invoice 51912		4501101906	2,245.72
2	Invoice 52384			702.26
3				

Additional claim summary page available at end of this document



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3. Documentation. Documentation supporting the claim should be attached hereto. Documentation should include both evidence of the nature of the claim asserted as well as evidence of the date or dates on which the claim arose.

4. Claims Against Multiple Debtor Entities. Each Proof of Claim and Claim Summary must state a claim against **only one** Debtor and clearly indicate the Debtor against which the claim is asserted.

5. Sign and Date Form.

Date: 8-13-24

Signature: _____

Name: Kim Schuster

Address: 5007 S 35th St. Ft. Smith, AR 72903

Phone: 479-646-7700

Email: kim.aschuster@gmail.com

If you are a vendor or customer claimant, the Debtors strongly recommend that you please complete the Proof of Claim Form and this Supplement. Attach the Supplement to the Electronic Proof of Claim Form (ePOC) as supporting documentation (ePOC Step 10) or include the Supplement in the envelope with the Proof of Claim mailed to Verita at the address below. Forms will not be accepted by Electronic Mail or Facsimile.

Submit Electronic Proof of Claim (ePOC):

Please visit https://www.veritaglobal.net/zhi to submit an ePOC. See ePOC Step 10 - Supporting Documentation to load this Supplement form.

Mailing Address:

Zachry Claims Processing Center
c/o KCC dba Verita
222 N. Pacific Coast Hwy., Ste. 300
El Segundo, CA 90245

Invoice

ACE HYDRAULICS, INC.
fluid power sales and service
5007 SO. 35th STREET
FORT SMITH, AR. 72903
479-646-7700

Date	Invoice #
2/14/2024	51912

Bill To

ZACHRY MAINTENANCE SERVICE, LLC
3741 RED BLUFF ROAD, SUIE 105
PASADENA, TX 77503
ATTN: POWER GROUP ACCOUNTING

P.O. No.	Terms	Project
4501101906	NET-30	

Quantity	Description	Rate	Amount
2	SEAL KIT	220.00	440.00T
1	LABOR, RESEAL AND TEST 2 CYLINDERS	1,200.00	1,200.00T
1	BOLTS, AND NUTS	30.00	30.00T
1	SEAL KIT	60.00	60.00T
1	LABOR, RESEAL AND TEST TIE ROD CYLINDER	300.00	300.00T
1	SHIPPING AND HANDLING	20.88	20.88T
	Sales Tax-Ft. Smith	9.50%	194.84

Total $2,245.72