

RECEIVED

JUL 22 2019

LEGAL SERVICES

Fill in this information to identify the case:

Debtor 1 Schramm, Inc.

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Delaware

Case number 19-11397

Filed: USBC - District of Delaware
HDR Holding Inc. et al., (B10)
19-11396 (MFW)

HDR



0000000006

Official Form 410

Proof of Claim

04/16

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

Part 1: Identify the Claim

1. Who is the current creditor?	<u>The Sherwin-Williams Company</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? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Michael B. Bach, Authorized Agent</u> Name <u>25 Whitney Drive, Suite 106</u> Number Street <u>Milford</u> <u>OH</u> <u>45150</u> City State ZIP Code Contact phone <u>(513) 247-7407</u> Contact email <u>michaelb@dehaan-bach.com</u>	Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ 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 _____ 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: 0 3 8 6

7. How much is the claim? \$ 13,906.80 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.
goods sold

9. Is all or part of the claim secured? ☒ No
☐ Yes. The claim is secured by a lien on property.
Nature of property:
☐ Real estate. If the claim is secured by the debtor's principal 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 amounts 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 one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

☐ Wages, salaries, or commissions (up to \$12,850*) 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).

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

☐ Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

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 acknowledgment 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 a 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 07/18/2019
MM / DD / YYYY

Signature

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

Name Michael B. Bach
First name Middle name Last name

Title Authorized Agent for The Sherwin-Williams Company

Company DeHaan & Bach, LPA
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 25 Whitney Drive, Suite 106
Number Street
Milford OH 45150
City State ZIP Code

Contact phone (513) 247-7407 Email michaelb@dehaan-bach.com



STATEMENT OF COMMERCIAL ACCOUNT

STATEMENT DATE: 06/30/19

PAGE: 1

CUSTOMER NUMBER : 2665-2038-6

THE SHERWIN-WILLIAMS CO.
ACCOUNTS RECEIVABLE DEPT.
7411 INDUSTRIAL PARKWAY
MACUNGIE, PA 18062

SCHRAMM, INC.
800 E VIRGINIA AVE
WEST CHESTER, PA 19380 4497

JOB NUMBER: 01
JOB NAME: SCHRAMM, INC.
PAYMENT TERMS: 1% 10, NET 20TH PROX

DUE DATE
07/20/2019

PLEASE PAY
\$13,906.80

REMITTANCE ADVICE

CUSTOMER NO.

PAGE 1

2665-2038-6

JOB NUMBER : 01

4323 / 00889

SCHRAMM, INC.
800 E VIRGINIA AVE
WEST CHESTER, PA 19380 4497

PLEASE RETURN THIS REMITTANCE ADVICE WITH
YOUR PAYMENT IN THE ENCLOSED ENVELOPE

IF YOU HAVE ANY QUESTIONS CONCERNING YOUR ACCOUNT, PLEASE CALL 610-966-8122

ACCOUNT SUMMARY

PAST DUE AMOUNTS MUST BE PAID IMMEDIATELY

PREVIOUS BALANCE:	\$13,906.80	CURRENT DUE:	\$0.00
CURRENT MONTH CHARGES:	\$0.00	PAST DUE 1-30 DAYS:	\$287.75
CURRENT MONTH PAYMENTS:	\$0.00	PAST DUE 31-60 DAYS:	\$13,619.05
CURRENT MONTH STORE CREDITS:	\$0.00	PAST DUE 61-90 DAYS:	\$0.00
CURRENT MONTH OTHER DEBITS:	\$0.00	PAST DUE OVER 90 DAYS:	\$0.00
CURRENT MONTH OTHER CREDITS:	\$0.00	NET AMOUNT DUE:	\$13,906.80
ACCOUNT BALANCE	\$13,906.80		

NET AMOUNT DUE: \$13,906.80

AMOUNT PAID	
CHECK NO.	

ACCOUNT DETAIL

DATE	TYPE	STORE	REF NO	P.O. NUMBER/JOB DESC	AMOUNT	SUBTOTAL	REF NO	AMOUNT	PLEASE CHECKMARK ITEMS PAID IN FULL OR ENTER AMOUNT PAID
04/29/2019	CHARGE	4323	54770	CONSUMABLE	\$1,978.31		54770	\$1,978.31	
04/29/2019	CHARGE	4323	54788	BILL OF MATERIAL	\$7,775.74		54788	\$7,775.74	
04/30/2019	CHARGE	4323	34274	BILL OF MATERIAL	\$3,414.60		34274	\$3,414.60	
04/30/2019	CHARGE	4323	34282	CONSUMABLE	\$450.40		34282	\$450.40	
05/07/2019	CHARGE	4323	57914	CONSUMABLE	\$37.49		57914	\$37.49	
05/10/2019	CHARGE	4323	59464	CONSUMABLE	\$250.26		59464	\$250.26	
					\$13,906.80				

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EXHIBIT

visit **ups.com**® or call **1-800-PICK-UPS®** (1-800-742-5877) to schedule a pickup or find a drop off location near you.

Domestic Shipments

To qualify for the Letter rate, UPS Express Envelopes may only contain correspondence, urgent documents, and/or electronic media, and must weigh 8 oz. or less. UPS Express Envelopes containing items other than those listed or weighing more than 8 oz. will be billed by weight.

UPS Ground
UPS Standard
UPS 3 Day Select®
UPS Worldwide Expeditied®

International

The UPS I
value. Ce
ups.com/

To qualify:
UPS Express

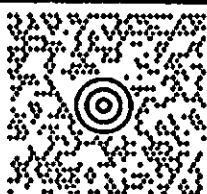
CAROL REHNER
513-489-7522 129
DEHAAN & BACH
25 WHITNEY DRIVE
MILFORD OH 45150

0.5 LBS LTR

1 OF 1

SHIP TO:

EPIQ CORPORATE RESTRUCTURING
HDR HOLDING INC. CLAIMS PROCESSING
10300 SW ALLEN BLVD.
BEAVERTON OR 97005-4833



OR 972 4-70



UPS 2ND DAY AIR

TRACKING #: 1Z 875 05X 02 9243 8398

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BILLING: P/P

Reference#1: sw-hdr/schramm

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7/18/2019

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