RECEIVED

MAY 18 2020

LEGAL SERVICES

Filed: USBC - District of Delaware
Techniplas, LLC (B10)
20-11049 (LSS)

TCP

0000000005

Fill in this information to identify the case:

Debtor 1 WEIDPLAS NORTH AMERICA

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: District of Delaware

Case number 20-11053

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 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?

ATLAS COPCO COMPRESSORS LLC
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?

☑ 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?

CHRISTINE GOODREAU
Name

92 INTERSTATE DRIVE
Number Street

SPRINGFIELD MA 01089
City State ZIP Code

Contact phone 413-493-7139

Contact email christine.goodreau@atlascopco.com

Where should payments to the creditor be sent? (if different)

SAME
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?

☑ No
☐ 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?

☑ No
☐ 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: 1 1 4 2

7. How much is the claim?

$ 4,808.05. **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.

SERVICE AND PARTS TO CUSTOMERS AIR COMPRESSORS

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:*

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

* 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.

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 05/12/2020
MM / DD / YYYY

Norine L. Auretta
Signature

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

Name: Norine L. Auretta
First name | Middle name | Last name

Title: Regional Business Controller

Company: Atlas Copco Compressors LLC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 92 Interstate Drive
Number Street

West Springfield | MA | 01089
City | State | ZIP Code

Contact phone: 413-493-7152 Email: norine.auretta@atlascopco.com

Atlas Copco

Original Service Invoice

Customer No.	Invoice No.	Invoice Date	Purchase Order No.	1/2
121142	1120027366	03/18/2020	4500586279	

Atlas Copco Compressors LLC
300 Technology Center Way Ste. 550, Rock Hill, SC 29730

WEIDPLAS NORTH AMERICA
204 ENTERPRISE DR
AUBURN, AL 36830-0503

Visit Address
WEIDMANN PLASTICS TECHNOLOGY
204 ENTERPRISE DRIVE
Auburn, AL 36830-0503

Customer's Address
WEIDPLAS NORTH AMERICA
204 ENTERPRISE DR
AUBURN, AL 36830-0503

Payer : WEIDPLAS NORTH AMERICA, 204 ENTERPRISE DR, AUBURN, AL 36830-0503

Serv. Order No. : 402314888
Serv. Exec. Date : 03/17/2020

Contact Reference
Contact : S530 MSCC
Tel No. : 866-567-0179
E-mail : southern.region@us.atlascopco.com

Customer Information
Contact : Accounts Payables
Tel No. :
E-mail : finance.auburn@weidplas.com

Dear Tobias Dorff
This is the invoice for the quoted services of your GA 37-125 AFF 460V
with serial number API571327
Thank you for your business and please do contact us
in case there are any issues with the machine.

Pos.	Material ID	Description	Qty	UOM	Price/Unit	Disc.	Total Net Price
Equipment	: 105883768	Description	: GA 37-125 AFF 460V				
Serial No.	: API571327						
10		FIXED PRICE PARTS					827.81
		LABOR AND EXPENSE					1,821.00

Subtotal	2,648.81	USD
Freight (Normal)	128.73	USD
Net / Tax base	2,777.54	USD
State Tax:AL	33.12	USD
County Tax:LEE	12.83	USD
District Tax:Auburn	33.11	USD
Total	**2,856.60**	**USD**

Atlas Copco

Original Service Invoice

Customer No.	Invoice No.	Invoice Date	Purchase Order No.	2/2
121142	1120027366	03/18/2020	4500586279	

Payment terms : Net 30 Days
Payment Due Date : 04/17/2020
Delivery terms : FOB
Delivery freight charges

Remit To:
Atlas Copco Compressors LLC
DEPT CH 19511
Palatine, IL 60055-9511

Delivery	**812082720**	Delivery Date	03/16/2020		
Forwarder Name	UPND				
Case Number	**2000336161**	Tracking Number	1Z8725FR0194253990		
Material Number	Order Number	Customer Po Number		Qty	UOM
2204107600	402314888	4500586279		1.00	PC
Forwarder Name	UPND				
Case Number	**2000336162**	Tracking Number	1Z8725FR0194253990		
Material Number	Order Number	Customer Po Number		Qty	UOM
1624962200	402314888	4500586279		1.00	PC

Atlas Copco

Original Service Invoice

Customer No.	Invoice No.	Invoice Date	Purchase Order No.	1/2
121142	1120027734	03/19/2020	4500585535	

Atlas Copco Compressors LLC
300 Technology Center Way Ste. 550, Rock Hill, SC 29730

WEIDPLAS NORTH AMERICA
204 ENTERPRISE DR
AUBURN, AL 36830-0503

Visit Address
WEIDMANN PLASTICS TECHNOLOGY
204 ENTERPRISE DRIVE
Auburn, AL 36830-0503

Customer's Address
WEIDPLAS NORTH AMERICA
204 ENTERPRISE DR
AUBURN, AL 36830-0503

Payer : WEIDPLAS NORTH AMERICA, 204 ENTERPRISE DR, AUBURN, AL 36830-0503

Serv. Order No. : 402291813
Serv. Exec. Date : 03/18/2020

Contact Reference
Contact : S530 MSCC
Tel No. : 866-567-0179
E-mail : southern.region@us.atlascopco.com

Customer Information
Contact : Accounts Payables
Tel No. :
E-mail : finance.auburn@weidplas.com

Dear Tobias Dorff
This is the invoice for the quoted services of your GA 22-125 AFF 460V
with serial number AII275581
Thank you for your business and please do contact us
in case there are any issues with the machine.

Pos.	Material ID	Description	Qty	UOM	Price/Unit	Disc.	Total Net Price
Equipment	: 105868372	Description	: GA 22-125 AFF 460V				
Serial No.	: AII275581						
10		FIXED PRICE PARTS					1,142.30
		LABOR AND EXPENSE					682.85

Subtotal	1,825.15	USD
Freight (Normal)	21.79	USD
Net / Tax base	1,846.94	USD
State Tax:AL	45.69	USD
County Tax:LEE	13.13	USD
District Tax:Auburn	45.69	USD
Total	**1,951.45**	**USD**

Atlas Copco

Original Service Invoice

Customer No.	Invoice No.	Invoice Date	Purchase Order No.	2/2
121142	1120027734	03/19/2020	4500585535	

Payment terms : Net 30 Days
Payment Due Date : 04/18/2020
Delivery terms : FOB
Delivery freight charges

Remit To:
Atlas Copco Compressors LLC
DEPT CH 19511
Palatine, IL 60055-9511

Delivery	**811993554**	Delivery Date	03/06/2020	
Forwarder Name	UPSN			
Case Number	**2000314738**	Tracking Number	1Z8725FR0396589504	
Material Number	Order Number	Customer Po Number	Qty	UOM
1310036837	402291813	4500585535	3.00	PC
1310308346	402291813	4500585535	1.00	PC
2901006900	402291813	4500585535	1.00	PC
2901099800	402291813	4500585535	1.00	PC

CHRISTINE GOODREAU
413-493-7150
ATLAS COPCO
92 INTERSTATE DR
WEST SPRINGFIELD MA 01089

0.0 LBS LTR **1 OF 1**

SHIP TO:
C/O EPIC CORPORATE RESTRUCTURING, L
TECHNIPLAS, LLC CLAIMS PROCESSING C
10300 SW ALLEN BLVD
BEAVERTON OR 97005-4833

OR 971 7-01

UPS NEXT DAY AIR **1**
TRACKING #: 1Z W65 R14 01 9685 6881

BILLING: P/P

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MAY 18 2020
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