Fill in this info	ormation to	identify t	he case:
-------------------	-------------	------------	----------

Debior 1

Grupo Famsa, S.A.B. de C.V.

Debtor 2 (Spouse, 8 filing)

United States Bankruptcy Court for the: Southern District of New York Case number 20-11505

2 ¹ 3

Official Form 410

Proof of Claim

	RECEIVED
	JUL 1 0 2020
L	EGAL SERVICES
	outhern District of New York A.B. de C.V. (B10)

04/16

í

Part 1: Identify the Claim

1.	Who is the current creditor?	LA JOYA INDEPENDENT SCHOOL DISTRICT Name of the current creditor (the person or entity to be paid for this claim)						
ŀ								
		Other names the	e creditor used with the debtor					
2.	Has this claim been acquired from someone else?	X No Ves. From	n whom?				<u> </u>	
3.	Where should notices and payments to the		d notices to the creditor I		Where shoul different)	Id payments to the credito	r be sent? (if	
	creditor be sent?		ndon, Fielder, Collins &		La Joyá Independent School District			
	Federal Rule of	C/O Hiram Gutierrez C/O Perdue, Brandon, Fielder, Collins & Mott, I Name Name				& Mott, LLP		
ŀ	Bankruptcy Procedure (FRBP) 2002(o)	2805 Fountain Plaza Blvd., Suite B			P.O. Box 2916			
	(i noi) cooc(gi		Street			Street		
		Edinburg	тх	78539	McAllen	тх	78502	
		City	State	ZIP Code	Сцу	State	ZIP Code	
		Contact phone	(956) 631-4026		Conlact phone	·		
		Contact email	edinburgbankruptcy@j	obfcm.com	Contact email	edinburgbankruptcy@p	bfcm.com	
		Uniform claim identifier for electronic payments in chepter 13 (if you use one): None						
4	Does this claim amend one already filed?	XI No CI Yes, Clair	ה number on court claims	registry (if known)		Filed on MM / D	ייזייי סי	
5.	Do you know if anyone else has filed a proof of claim for this claim?	X No Ves. Who	o made the earlier filing?					

6.	Do you have any number you use to identify the debtor?	 No Yes. Last 4 digits of the debtor's Please see attached statem 	s account of any numb nent.	you use to identify the debtor:		
7.	How much is the claim?	\$44.73	O No	unt include interest or other charges?		
\$.	What is the basis of the claim?		<u>an ann an stainn an stainn an stainn a</u>			
		Ad Valorem Property Taxes		•		
9.	is all or part of the claim secured?	No Claim secured by statutory Yes. Art. 8, Section 15 of the T Nature of property:	y tax lien provided by exas Constitution.	Sections 32.01 and 32.05 of the Texas Property Tax Code as		
		Motor vehicle				
		X Other, Describe:	Personal Property	ed January 1st of each year pursuant to Sections 32.01,		
		Basis for perfection:	32.05, and 32.07 c perfected as a mat	of the Texas Property Tax Code and is automatically		
		Value of property: Amount of the claim tha	-	7 Secured		
		Amount of the claim tha	it is unsecured:	(The sum of the secured and unsecured amounts should match the emount in line		
		Amount necessary to cu	ire any default as of	the date of the petition:		
		Annual Interest Rate (with Fixed Pursuant to Variable nonbankrup	11 U.S.C. § 511, the	12 % rate determined under applicable exas Property Tax Code § 33.01		
	is this claim based on a	X No				
	lease?	Yes. Amount necessary to cure any default as of the date of the potition.				
11.	Is this claim subject to a	X No				
	right of setoff?	*		· · · · · · · · · · · · · · · · · · ·		

*

12. Is all or part of the claim	Ň No				
entitled to priority under 11 U.S.C. § 507(a)?	🖸 Yes.				Amount entitled to
A claim may be partly priority and partly nonpriority. For example, in some categories, tho law limits the amount entitled to priority.			nental units. 11 U.S.C. § 507 lateral value, and for person:		\$0.00
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NY MILE CON JOINT COMPANY AND AND	New Web Advanced and a second seco		NAN TATION DISTANCE DISTANCE DIST	۱۹۹۹ میکور بر ویکو میکور در ویکو میکو مرکز در ویکو میکور می
Part 3: Sign Below					· · · · · · · · · · · · · · · · · · ·
The person completing this proof of claim must sign and date iL FRBP 9011(b).	Check the appro	priste box: ditor's attorney or authorize	d agent.		
If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.	l understand the	l an authorized signature or	this <i>Proof of Claim</i> serves a ablor credit for any payments	is an acknowledgm	ent that when calculatir
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.	I have examined and correct.	the information in this Proc	f of <i>Claim</i> and have a reason		
18 U.S.C. §§ 152, 157, and 3571.		enalty of perjury that the fo e 07/06/2020	regoing is true and correct.		
	Executed on dat	MM / BD / YYYY			
		u a. Sul	5	<u>,</u>	
	Signature Print the name	of the person who is com	pleting and signing this cla	alm.	
	Name	Hiram A. Gutierrez			
		First name Attorney for Claimant	Middle name	Last nam	e
	Title		der, Collins & Mott, L.L.P.		
	Company		as the company if the authorize		
	Address	P.O. BOX 2916 Number Street			
		MCALLEN	тх	<	78502
		City (956) 631-4026		late ZIP Code	

.

•

Tax Statement

HIDALGO COUNTY TAX OFFICE

C/O PERDUE, BRANDON, FIELDER, COLLINS&MOTT P.O. BOX 2916 MCALLEN, TX 78502 Telephone: (956) 631-4026

FAMSA LOANS (GRUPO FAMSA) 9311 SAN PEDRO AVE STE 1420 SAN ANTONIO, TX 78216

IF YOU ARE 65 YEARS OF AGE OR OLDER OR ARE DISABLED AND YOU OCCUPY THE PROPERTY DESCRIBED IN THIS DOCUMENT AS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE APPRAISAL DISTRICT REGARDING ANY ENTITLEMENT YOU MAY HAVE TO A POSTPONEMENT IN THE PAYMENT OF THESE TAXES.

	Tax Year	Tax Due	P and I	Total Due
LA JOYA INDEPENDENT SCHOOL DISTRICT				
Legal: FURNITURE FIXTURES EQUIPMENT A GEO Code: L605099000026526	T 204 E INTERS Client Property	STATE HWY 2 S v Code: 1182789	TE 3 / NEW AC	CT 2019
	2020	\$44.73	\$0.00	\$44.73
LA JOYA INDE	PENDENT SCH	IOOL DISTRICT	TOTAL>	\$44.73
_		Total If Paid By	6/30/2020	\$44.73

Page 1

.

Taxpayer ID: 221934

PerdueBrandonFielderCollins&MottLLP

P.O. BOX 2916 MCALLEN, TEXAS 78502

c

Return Service Requested

JUL 1 0 2020

Grupo Aeromexico, S.A.B. de C.V Claims Processing Center c/o Epiq Corporate Restructuring, LLC P.O. Box 4421 Beaverton, OR 97076-4421





ZIP 78539 041L10409360

. .

9707620421 8900

st ecco լիկերիվերիյիներիոլիիվիլիրեներներին