

Fill in this information to identify the case:

Debtor 1 Town Sports International

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of _____

Case number _____

Filed: USBC - District of Delaware
Town Sports International, LLC, et al (B10)
20-12168 (CSS)



TOT

RECEIVED

SEP 28 2020

LEGAL SERVICES

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?	<u>Dunlop Sports</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Roger Cleveland Golf DBA Dunlop Sports</u>	
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>Dunlop Sports</u> Name <u>250 Wilson Bridge road</u> Number Street <u>Fountain Inn</u> <u>SC</u> <u>29644</u> City State ZIP Code Contact phone <u>864 6054843</u> Contact email <u>donna.hanks@dunlopsports.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: 1 0 5 9

7. How much is the claim? \$ 748.80 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.
good 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 \$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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* 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 09/24/2020
MM / DD / YYYY


Signature

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

Name Donna Hanks Moore
First name Middle name Last name

Title Credit Manager

Company Dunlop Sports
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 250 Wilson Bridge Road
Number Street
Fountain Inn SC 29644
City State ZIP Code

Contact phone 864 605 4843 Email donna.hanks@dunlopsports.com



Remittance Address:
Dunlop Sports
Dept CH 10837
Palatine, IL 60055-0837

September 03, 2020

TOWN SPORTS INTERNATIONAL
P O BOX 408
ELMSFORD, NY 10523

Customer # 441059

MONTHLY STATEMENT

Future:	61 - 90:	
Current:	91 - 120:	
1 - 30:	Over 120:	\$748.80
31 - 60:	Total Due:	\$748.80
	Past Due:	\$748.80

Invoice No.	Purchase Order Number	Balance Due	Inv Date	Due Date	DBT
5897190	TBALLS 1 2020	\$748.80	02/20/2020	04/20/2020	136
TOTAL		\$748.80			

If the contact information we have on file is not current, please email me updated information. If your statement delivery preference is email, please forward me the appropriate email address information. Payments made within the last seven days may not be reflected on your account.

If there are questions concerning your account, please contact me at the number below.

Donna Hanks
Credit Manager
864-605-4843 local
864-484-8050 fax
800-768-4727 ext 4843

or # 60544193



INVOICE

250 Wilson Bridge Road
Fountain Inn, SC 29644
Phone: 888.215.1530

Page Number:	1
Invoice Date:	02/20/2020
Bill To No.:	441059
Ship To No.:	447823
Order No.:	60544193 SO
Invoice:	5897190 SO
Terms	
NET 60 DAYS	

Sold To:

TOWN SPORTS INTERNATIONAL
P O BOX 408
ELMSFORD NY 10523

Ship To:

TOWN SPORTS INTL COBBLE HILL NYSC
#00103
96 BOERUM PLACE
BROOKLYN NY 11201

Requested Date		Customer P.O.	Freight Terms		Salesrep		Shipping Instructions	
02/20/2020		TBALLS 1 2020	Freight on Board		WAHLGREN, DAVE			
Item No	Description	Ordered	Quantity Shipped	Gross Price	Disc%	Unit Net	Extended Net Price	
601348 FREIGHT	TB GRAND PRIX REGULAR DUTY 3B FDXGND 165166288033	288 1	288 1	3.05 0.00	14.75 0	2.60 0.00	748.80	

www.dunlopsports.com

REMITTANCE ADDRESS:

Please make your check payable to
DUNLOP SPORTS GROUP
AMERICAS

Dunlop Sports
Dept CH 10837
Palatine, IL 60055-0837

Invoice Summary				
Product Total	Taxes	Freight	Total	Net Due Date
748.80			748.80	04/20/2020

Tear off and return this portion with payment

TOWN SPORTS INTERNATIONAL P O BOX 408 ELMSFORD NY 10523	Bill To No.: 441059 Ship To No.: 447823 Invoice: 5897190 SO Order Net: 748.80	AMOUNT PAID \$ _____
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Pick Ticket # (s)

Pick Ticket # is located in the
Middle right hand portion of the
Packing List that accompanied the
Shipment.





September 24, 2020

Dear Customer,

The following is the proof-of-delivery for tracking number: 165166288033

Delivery Information:

Status:	Delivered	Delivered To:	
Signed for by:	MKYLE	Delivery Location:	Brooklyn, NY,
Service type:	FedEx Ground	Delivery date:	Feb 24, 2020 12:25
Special Handling:			

Shipping Information:

Tracking number:	165166288033	Ship Date:	Feb 20, 2020
		Weight:	39.0 LB/17.71 KG
Recipient:		Shipper:	
BROOKLYN, NY, US,		Simpsonville, SC, US,	

Reference 0000205630

Signature image is available. In order to view image and detailed information, the shipper or payor account number of the shipment must be provided.

Thank you for choosing FedEx

Dunlop Sports
250 Wilson Bridge Rd
Fountain Inn, SC 29644

RECEIVED
SEP 28 2020
LEGAL SERVICES

Town Sports International LLC
Claims Processing Center
C/o Epic Corporate Restructuring LLC
P.O. Box 4420
Beaverton, OR 97076-4420

