

Station 1
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AUG 04 2017

American Legal
Claim Services

177 Beaulieu Group
17-41677



Claim 1004

Fill in this information to identify the case:

Debtor 1 Beaulieu Group
Debtor 2 _____
(Spouse, if filing)
United States Bankruptcy Court for the: Northern District of Georgia
Case number 17-41677-mgd

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? ESHCO, 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?	Where should payments to the creditor be sent? (if different)
Name <u>ESHCO, LLC</u>	Name _____
Number Street <u>P.O. Box 1769</u>	Number Street _____
City State ZIP Code <u>Dalton GA 30722</u>	City State ZIP Code _____
Contact phone <u>706-278-6536</u>	Contact phone _____
Contact email <u>swiley@eshco.com</u>	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: BEASAM

7. How much is the claim? \$ 7,744.43 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)?

No

Yes. Check one:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the 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 \$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. \$ _____

* 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 08/04/2017
MM / DD / YYYY

Stephanie W. Thress
Signature

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

Name Stephanie Wilely Thress
First name Middle name Last name

Title Operations Administrator

Company ESHCO, LLC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address P.O. Box 17609
Number Street

Dalton GA 30722
City State ZIP Code

Contact phone 706-278-6536 Email swilely@eshco.com

AGED AS OF 08/03/17

CUSTOMERS BEASAM

TO BEASAM

* Indicates an adjusted invoice balance All A/R Account Numbers Reported

Customer#	Name	Contact	Telephone#	Terms	Customer Type	Limit					
Document#	Type	Apply To#	Doc Date	Due Date	Days	Reference	Total	1-30 Days	31-60 Days	61-90 Days	Over 90 Days
BEASAM	BEAULIEU OF AMERICA	ANN	800-227-7211	NET 60 DAYS	OPEN ITEM	7500 -OVER					
289719	INVC		04/14/17	06/13/17	111	PO:17004090-OP ORD:288741					1748.34
289830	INVC		04/19/17	06/18/17	106	PO:17004508-OP ORD:289046					194.25
289855	INVC		04/20/17	06/19/17	105	PO:17004090-OP ORD:288741					194.26
289856	INVC		04/20/17	06/19/17	105	PO:17004526-OP ORD:289088					628.10
289893	INVC		04/21/17	06/20/17	104	PO:17004526-OP ORD:289088					666.96
289894	INVC		04/21/17	06/20/17	104	PO:17004526-OP ORD:289115					259.01
290256	INVC		05/04/17	07/03/17	91	PO:17005203-OP ORD:289491					1210.88
290335	INVC		05/08/17	07/07/17	87	PO:17005203-OP ORD:289491				19.43	
290403	INVC		05/10/17	07/09/17	85	PO:17005397-OP ORD:289661				116.55	
290450	INVC		05/11/17	07/10/17	84	PO:17005384-OP ORD:289660				777.03	
290547	INVC		05/16/17	07/15/17	79	PO:17005513-OP ORD:289774				259.01	
290723	INVC		05/23/17	07/22/17	72	PO:17005797-OP ORD:289985				259.01	
291091	INVC		06/08/17	08/07/17	56	PO:17018499-03 ORD:290180			1295.05		
291126	INVC		06/09/17	08/08/17	55	PO:17006270-OP ORD:290337			116.55		
CUSTOMER TOTALS----->							7,744.43	.00	1411.60	1431.03	4901.80

GRAND TOTALS-----> 7,744.43 .00 1411.60 1431.03 4901.80

Proof of Claim

UPS Ground
 UPS Standard
 UPS 3 Day SelectSM
 UPS Worldwide ExpeditedSM

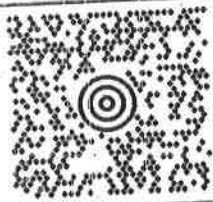
LAMAR MCCLURE
 (706) 278-6536
 ESHCO, LLC
 1907 HWY SOUTH
 DALTON GA 30720

0.2 LBS LTR 1 OF 1

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SHIP TO:
 C/O ALCES
 BEAULIEU GROUP, LLC ET AL. CLAIMS
 SUITE 3
 5985 RICHARD ST.
 JACKSONVILLE FL 32216

AUG 04 2017
 American Legal Claims



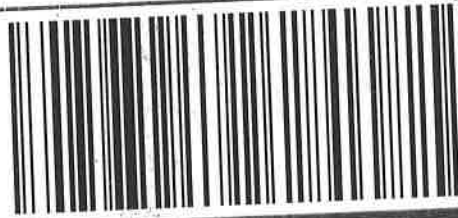
FL 322 9-23



UPS NEXT DAY AIR

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BILLING: P/P

US 20.0.20

LP2844 90.0A 07/2017

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BEAULIEU GROUP ET AL CLAIMS
 5985 RICHARD ST
 STE 3
 JACKSONVILLE FL 32216 - 5926

P: METRO S: BOTGRE I: ME8
 TING - 1806 X
 12326575016409 4673 1030
 HH052XD FLJRC217 AUG 04 08:42:31 2017
 US 3223 H1P 17.03.03 ZP455

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