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JUL 16 2019

American Legal Claims

GOODWILL IND OF SC VA
19-61207



Claim 1005

04/19

Fill in this information to identify the case:

Debtor 1 Goodwill Industries of South Central Virginia, Inc.
Debtor 2 _____
(Spouse, if filing)
United States Bankruptcy Court for the: Western District of Virginia
Case number 19-61207

Official Form 410
Proof of Claim

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? Elliott Electric of Danville, Inc
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)
<u>Elliott Electric of Danville, Inc</u> Name	_____ Name
<u>PO Box 11081</u> Number Street	_____ Number Street
<u>Danville VA 24543</u> City State ZIP Code	_____ City State ZIP Code
Contact phone <u>434 799 3591</u>	Contact phone _____
Contact email <u>chris@elliottelec.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: _____

7. How much is the claim? \$ 338.55 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 services 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:

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

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

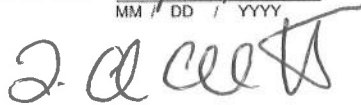
Check the appropriate box:

- 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 7/12/2019
MM / DD / YYYY


Signature

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

Name T Chris Elliott
First name Middle name Last name

Title CFO

Company Elliott Electric of Danville, Inc
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address Po Box 11081
Number Street
Danville VA 24543
City State ZIP Code

Contact phone 4347993591 Email chris@elliottelec.com

STOP PAYMENT

051401027
06/06/2019
709410562399151

This is a LEGAL COPY of your check. You can use it the same way you would use the original check.

Return Reason-C
STOP PAYMENT

709410562399151
[051401027] 06/03/2019

DOCUMENT INCLUDES VITALS, HECK, CHEMICAL, READING PROPERTIES, AND TITLED BY A 2019 MICHIGAN

Goodwill Industries of South Central Virginia, Inc.
612 WESTOVER DRIVE
DANVILLE, VIRGINIA 24541
TELEPHONE: (434) 752-2511

United Way

68-2510

45814

DATE May 28, 2019

AMOUNT *****\$228.55

PAY TO THE ELLIOTT ELECTRIC OF DANVILLE, INC.
ORDER P.O. BOX 11081
OF DANVILLE, VA 24543

Three Hundred Twenty-Eight and 55/100 Dollars

TWO SIGNATURES REQUIRED IF AMOUNT OVER \$1000

Christalight

AUTHORIZED SIGNATURE

0514581410510000201

0514581410510000201

Account 1504118201

Date 6/06/19

The deposited items listed were returned to us and debited to your account.

PAYOR	RETURN REASON	AMOUNT
Goodwill	STOP PAYMENT	328.55

Total items charged back to your account: 328.55
Fee: 10.00

Elliott Electric of Danville Inc
PO Box 11081
Danville VA 24543

JHP-C21-C5A09 CHARGE BACK



IMPORTANT INFORMATION ABOUT YOUR CHECKING ACCOUNT
Substitute checks and Your Rights

What is a substitute check?

To make check processing faster, federal law permits banks to replace original checks with "substitute checks." These checks are similar in size to original checks with a slightly reduced image of the front and back of the original check. The front of a substitute check states; "This is a legal copy of your check. You can use it the same way you would use the original check." You may use a substitute check as proof of payment just like the original check.

Some or all of the checks that you receive back from us may be substituted checks. This notice describes rights you have when you receive substitute checks from us. The rights in this notice do not apply to original checks or to electronic debits to your account. However, you have rights under other law with respect to those transactions.

What are my rights regarding substitute checks?

In certain cases, federal law provides a special procedure that allows you to request a refund for losses you suffer if a substitute check is posted to your account (for example, if you think that we withdrew the wrong amount from your account or that we withdrew money from your account more than once for the same check). The losses you may attempt to recover under this procedure may include the amount that was withdrawn from your account and fees that were charged as a result of the withdrawal (for example, bounced check fees).

The amount of your refund under this procedure is limited to the amount of your loss or the amount of the substitute check, whichever is less. You also are entitled to interest of the amount of your refund if your account is an interest-bearing account. If your loss exceeds the amount of the substitute check, you may be able to recover additional amounts under other law.

If you use this procedure, you may receive up to \$2500.00 of your refund (plus interest if your account earns interest) within 10 business days after we received your claim and the remainder of your refund (plus interest if your account earns interest) not later than 45 calendar days after we received your claim.

We may reverse the refund (including any interest on the refund) if we later are able to demonstrate that the substitute check was correctly posted to your account.

How do I make a claim for a refund?

If you believe that you have suffered a loss relating to a substitute check that you received and that was posted to your account, please contact us at American National Bank, PO Box 191, Danville, VA 24543. You must contact us within 40 calendar days of the date we mailed (or otherwise delivered by a means to which you agreed) the substitute check in question or the account statement showing that the substitute check was posted to your account, whichever is later. We will extend this time period if you were not able to make a timely claim because of extraordinary circumstances.

Your claim must include-

- ❖ A description of why you have suffered a loss (for example, you think the amount withdrawn was incorrect);
- ❖ An estimate of the amount of your loss;
- ❖ An explanation of why the substitute check you received is insufficient to confirm that you suffered a loss; and
- ❖ A copy of the substitute check and/or the following information to help us identify the substitute check: identifying information, for example the check number, name of person to whom you wrote the check and the amount of the check.



Elliott Electric of Danville, Inc.
P.O. Box 11081
Danville, VA 24543

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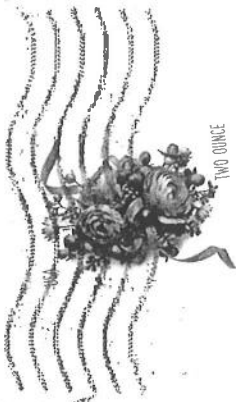
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GREENSBORO NC 274
PIEDMONT TRIAD AREA
12 JUL 2019 PM 1.1



Goodwill Claims
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8021 Philips Hwy STE 1
Jacksonville, FL 32256