Claim #25 Date Filed: 12/21/2023

Fill in this information to	
Debtor 1 4 Vicc	fram with.
Debtor 2 (Spouse, if filing)	<u> </u>
	nt for the: Ather V District of 12 Kas
Case number 72	
	✓ Date Stamped Copy Returned
Official Form 41	O No self addressed stamped envelope
Proof of Cla	□ No copy to return  04/22
make a request for payme Filers must leave out or re documents that support the mortgages, and security agr explain in an attachment.	ore filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to not of an administrative expense. Make such a request according to 11 U.S.C. § 503.  Idact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, reements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, ent 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 a	bout 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 C	laim
Who is the current creditor?	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 Pres. From whom?
Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  Where should payments to the creditor be sent? (if different)  OLIVE Relative Helices La
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 315 CHOVE PL 315 CHOVE PL
	Number Street  Hopkins MW 55343  City State ZIP Code  Number Street  Hopkins MW 55343  City State ZIP Code
RECEIVED	Contact phone 6/2-79/-3249 Contact phone 12-79/-3249
DEC 2 1 2023	regular email contact email Mechan @ Mike weeken w. con
TZMAN CARSON CONSULTANT	Conform claim identifier for electronic payments in chapter 13 (if you use one):
4. Does this claim amend one already filed?	Yes. Claim number on court claims registry (if known) 12 Filed on 11 to 2023
5. Do you know if anyone else has filed a proof	Type Who made the earlier filling?
of claim for this claim?	

Part 2: Give Informatio	n About the Claim as of the Date the Case Was Filed
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
. How much is the claim?	\$ 24, 207, 48 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).
. 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.
6	Coods Bold
,	
9. Is all or part of the claim secured?	No Q 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: \$ 24, 707.4 The sum of the secured and unsecured amounts should match the amount in line 7.
RECEIVED	Amount necessary to cure any default as of the date of the petition: \$ 24,707.48
DEC 2 1 2023	ب الاست. الاست.
, DEO & ROSE	Annual Interest Rate (when case was filed)%  □ Fixed
KURTZINAN CARSON CONSULTAN	
10. Is this claim based on a	Q No
lease?	Yes. Amount necessary to cure any default as of the date of the petition.
11. Is this claim subject to a	SI No
right of setoff?	Yes. Identify the property:
•	

12. Is all or part of the claim	.♥ No	•
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly	☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use, 11 U.S.C. § 507(a)(7).	\$
епшеа ю риолку.	Wages, salaries, or commissions (up to \$15,150*) 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 4/01/25 and every 3 years after that for cases begun on or af	ter the date of adjustment.
Part 3: Sign Below		
The person completing this proof of claim must	Check the appropriate box:	·.
sign and date it.	I am the creditor.	
FRBP 9011(b).	I am the creditor's attorney or authorized agent.	
If you file this claim electronically, FRBP	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.	
5005(a)(2) authorizes courts to establish local rules	Tam a guarantor, surety, enturiser, or other occurrence of the control of the con	
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment	that when calculating the
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the c	
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the infand correct.	formation is true
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.	
3571.	Executed on date 12/2/2023	
	MM / DD / YYYY	
	/ Ceen Hul	
	Signature	
	Print the name of the person who is completing and signing this claim:	
	Name Thomas Patricul Weehau First name Middle name Last name	<u> </u>
	Title CEO	
	company Creative Restriction Dovices	ital
DEPENIER	Identify the corporate servicer as the company if the authorized agent is a servicer.	
WEGENACA	215 PM PL	
DEC 2 1 2023	Address Street	
	Hopkins MN S	<u> \$343</u>
KURTZMAN CARSON CONSUL	""" / 10 LDQ ( L Z S T 10	, <del>19</del> 14.
	Contact phone Lol La 1711 3049 Email	

#### 315 Grove Place Hopkins, MN 55343

## Invoice

Date	Invoice #
10/10/2023	10042

Bill To	 
Anagram International, Inc Accounts Payable 7700 Anagram Drive Minneapolis MN 55344	

Ship To

Anagram International
5501 W Old Shakopee Rd
Bloomington, MN 55437
Docks 8-12

Balance Due

\$8,909.92

	P.O. Number	Terms	Due Date	Rep	Ship	Project
	107438	Net 30	11/9/2023		10/10/2023	
Quantity	Item Code		Description		Price Each	Amount
24	FM16172	60-Peg Blk Panel K FM16172	Cit - PO #107438		54.18	1,300.3
96	FM16173	Single Blk Spinner FM16173	Stand - PO #107438	29.61	2,842.5	
32	FM17138	Dual 48/60 Blk Sta FM17138	nd - PO #107438	:	68.11	2,179.5
52	FM17139	72-Peg Blk Panel I FM17139	Cit - PO #107438		49.70	2,587.5
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	<u> </u>		· · · · · · · · · · · · · · · · · · ·	То		\$8,909.

Phone #	Fax#	
763/475-1449	763/475-1671	

#### 315 Grove Place Hopkins, MN 55343

# Invoice

	<u> </u>
Date ·	- Invoice#
10/10/2023	10043

Bill To	
Anagram International, Inc Accounts Payable 7700 Anagram Drive Minneapolis MN 55344	

			P.O. Number	Terms	Due Date	Rep	Ship	Project
			108704	Net 30	11/9/2023		10/10/2023	
	Quantity		Item Code	1	Description		Price Each	Amount
		52	FM17139	72-Peg Blk Panel I FM17139	Kit - PO #108704		49.78	2,588.56
		48	FM16171	48-Peg Blk Panel l FM16171	Kit - PO #108704		36.71	1,762.08
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				·		W <sup>5</sup> /		
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	•			1				
				·				
	·					Tot	al	\$4,350.6
L_	<del></del>		_,.,	<del> </del>		Ва	lance Due	\$4,350.6

Phone#	Fax#
763/475-1449	763/475-1671

315 Grove Place Hopkins, MN 55343

## Invoice

Date	Invoice#
10/24/2023	10046

ВШТо	
Anagram International, Inc Accounts Payable 7700 Anagram Drive	
Minneapolis MN 55344	

	P.O. Number	Terms	Due Date	Rep	Ship	Project
	108704	Net 30	11/23/2023		10/24/2023	
Quantity	Item Code		Description		Price Each	Amount
·古希腊教育的第三人称	FM16171	48-Peg Blk Panel FFM16171			36.71	2,643.12
				Tota	al lance Due	\$2,643.1

Phone #	Fax#
763/475-1449	763/475-1671

#### 315 Grove Place Hopkins, MN 55343

## Invoice

Date	Invoice#
10/24/2023	10045

ВШТо			in in the second se
Accounts Pay 7700 Anegra	m Drive MN 553		- 100 mg / 1

en e v	P.O. Number	Terms	Due Date	Rep	Ship	Project
	108704	Net 30	11/23/2023		10/24/2023	
Quantity	ltem Code		Description		Price Each	Amount
3	6 FM17139	72-Peg Blk Panel Kit FM17139	: - PO #108704		49.78	1,792.08
4	8 FM16171	48-Peg Blk Panel Kit FM16171	: - PO #108704		36.71	1,762-08
1. ·.	6 FM17138	Dual 48/60 Blk Stand FM17138	1 - PO #108704		68.11	1,089.76
	,					
				*		
				.*.		
			1 14 - 14 <u>14 1</u>	or .		
		1,86,20		Tot	di	\$4,643.92
				Ba	lance Due	

1965	疾病。等 医扩节		Contraction of the contraction of
Phone#		Fax	#
			5. 46 LAND TO
763/475-1449		763/475	-1671

# 315 Grove Place Hopkins, MN 55343

## Invoice

Date	Invoice #
10/24/2023	10044

Bill Tö	
Anagram International, Inc Accounts Payable 7700 Anagram Drive	
Minneapolis MN 55344	

• •	P.O. Number	Terms	Due Date	Rep	Ship	Project
	107438	Net 30	11/23/2023		10/24/2023	
Quantity	Item Code		Description		Price Each	Amount
	12 FM17138	Dual 48/60 Blk Stan FM17138	d - PO #107438		68.1	817.32
					r	
			i			
			•	·		
				ŝe <b>j</b> e je		
				Tot	al	\$817.32
				Ва	lance Due	\$817.32

763/475-1449	1580-	763/475-1671	
Phone #	Ť	Fax#	元代は

#### 315 Grove Place Hopkins, MN 55343

## Invoice

Date	Invoice #
10/25/2023	10047

Bill To	<i>:</i>	
Anagram International, Inc Accounts Payable 7700 Anagram Drive Minneapolis MN 55344		

Ship To

Anagram International
5501 W Old Shakopee Rd
Bloomington, MN 55437
Docks 8-12

	P.O. Number	P.O. Number Terms Due Date Rep	Rep	Ship	Project	
	107438	Net 30	11/24/2023		10/25/2023	
Quantity	Quantity Item Code		Description		Price Each	Amount
	P6 FM16173	Single Blk Spinner FM16173	Stand - PO #107438		29.61	
				Tota	al	\$2,842.56
				Ва	lance Due	\$2,842.56

Phone # Fax # 763/475-1449 763/475-1671