

**Fill in this information to identify the case:**

Debtor Avianca Holdings S.A.

United States Bankruptcy Court for the: Southern District of New York  
(State)

Case number 20-11133

## 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.**

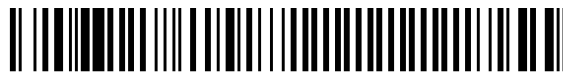
**Filers must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, 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>AmSafe Inc.</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>Avianca, S.A. Colombia</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?	<b>Where should notices to the creditor be sent?</b>  AmSafe Inc. 1043 N. 47th Ave. Phoenix, AZ 85043, U.S.A.  Contact phone <u>6028502850</u> Contact email <u>jean.marzu@amsafe.com</u>	<b>Where should payments to the creditor be sent? (if different)</b>  AmSafe Inc. c/o PNC Account no 4260591693 Swift: PNCCUS33, ABA Routing 041000124 Cleveland, OH 44114, U.S.A.  Contact phone <u>6028502850</u> Contact email <u>jean.marzu@amsafe.com</u>
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)  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: 6755 \_\_\_\_

7. How much is the claim? \$ 43,770.02 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.

product shipped per request or purchase orders

9. Is all or part of the claim secured? ☒ No  
☐ Yes. The claim is secured by a lien on property.  
**Nature or property:**  
☐ Real estate: If the claim is secured by the debtor's principle 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 amount 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 all that apply:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Amount entitled to priority

\$ \_\_\_\_\_

☐ 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.

\$ \_\_\_\_\_

\* 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.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?

☒ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ \_\_\_\_\_

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 acknowledgement 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 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 06/05/2020  
MM / DD / YYYY

/s/Sandra Lee  
Signature

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

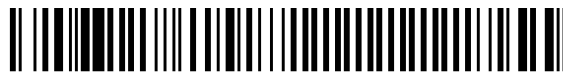
Name Sandra Lee  
First name Middle name Last name

Title Controller

Company AmSafe Inc.  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_



# KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 967-1780 | International + 1 (310) 751-2680

<b>Debtor:</b> 20-11133 - Avianca Holdings S.A. <b>District:</b> Southern District of New York, New York Division		
<b>Creditor:</b> AmSafe Inc. 1043 N. 47th Ave.  Phoenix, AZ, 85043 U.S.A. <b>Phone:</b> 6028502850 <b>Phone 2:</b> 6028502806 <b>Fax:</b> 602-278-3479 <b>Email:</b> jean.marzu@amsafe.com	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded <b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> No <b>Related Claim Filed By:</b>	
	<b>Filing Party:</b> Creditor	
<b>Disbursement/Notice Parties:</b> AmSafe Inc. c/o PNC Account no 4260591693 Swift: PNCCUS33 ABA Routing 041000124 Cleveland, OH, 44114 U.S.A <b>Phone:</b> 6028502850 <b>Phone 2:</b> 6028502806 <b>Fax:</b> 602-278-3479 <b>E-mail:</b> jean.marzu@amsafe.com <b>DISBURSEMENT ADDRESS</b>		
<b>Other Names Used with Debtor:</b> Avianca, S.A. Colombia	<b>Amends Claim:</b> No <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> product shipped per request or purchase orders	<b>Last 4 Digits:</b> Yes - 6755	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 43,770.02	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> No <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> <b>Value of Property:</b> <b>Annual Interest Rate:</b> <b>Arrearage Amount:</b> <b>Basis for Perfection:</b> <b>Amount Unsecured:</b>	

**Submitted By:**

Sandra Lee on 05-Jun-2020 5:48:31 p.m. Eastern Time

**Title:**

Controller

**Company:**

AmSafe Inc.

**Fill in this information to identify the case:**

Debtor 1 Avianca Inc.

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 20-11133

**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**

<p><b>1. Who is the current creditor?</b></p>	<p><u>AmSafe Inc.</u></p> <p><small>Name of the current creditor (the person or entity to be paid for this claim)</small></p> <p><small>Other names the creditor used with the debtor</small> _____</p>	
<p><b>2. Has this claim been acquired from someone else?</b></p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. From whom? _____</p>	
<p><b>3. Where should notices and payments to the creditor be sent?</b></p> <p><small>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</small></p>	<p><b>Where should notices to the creditor be sent?</b></p> <p><u>Amsafe Inc.</u></p> <p><small>Name</small></p> <p><u>1043 N. 47th Ave.</u></p> <p><small>Number Street</small></p> <p><u>Phoenix</u> <u>AZ</u> <u>85043</u></p> <p><small>City State ZIP Code</small></p> <p><small>Contact phone</small> <u>602-850-2850</u></p> <p><small>Contact email</small> <u>accountsreceivable@amsafe.com</u></p>	<p><b>Where should payments to the creditor be sent? (if different)</b></p> <p><u>AmSafe Inc. c/o PNC, Account no. 4260591693</u></p> <p><small>Name</small></p> <p><u>SWIFT: PNCCUS33, ABA Routing 041000124</u></p> <p><small>Number Street</small></p> <p><u>Cleveland</u> <u>OH</u> <u>44114</u></p> <p><small>City State ZIP Code</small></p> <p><small>Contact phone</small> <u>602-850-2806</u></p> <p><small>Contact email</small> <u>jean.marzu@amsafe.com</u></p>
<p><small>Uniform claim identifier for electronic payments in chapter 13 (if you use one):</small></p> <p>_____</p>		
<p><b>4. Does this claim amend one already filed?</b></p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____</p>	
		<p><small>Filed on</small> _____</p> <p><small>MM / DD / YYYY</small></p>
<p><b>5. Do you know if anyone else has filed a proof of claim for this claim?</b></p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Who made the earlier filing? _____</p>	

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

<b>6. Do you have any number you use to identify the debtor?</b>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>6</u> <u>7</u> <u>5</u> <u>5</u>
<b>7. How much is the claim?</b>	\$ <u>43,770.02</u> <b>Does this amount include interest or other charges?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
<b>8. What is the basis of the claim?</b>	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.  <u>product shipped by purchase order November 2019- March 2020</u>
<b>9. Is all or part of the claim secured?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property.  <b>Nature of property:</b> <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____  <b>Basis for perfection:</b> _____ 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.)  <b>Value of property:</b> \$ _____ <b>Amount of the claim that is secured:</b> \$ _____ <b>Amount of the claim that is unsecured:</b> \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)  <b>Amount necessary to cure any default as of the date of the petition:</b> \$ _____  <b>Annual Interest Rate</b> (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
<b>10. Is this claim based on a lease?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
<b>11. Is this claim subject to a right of setoff?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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 \$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.

\$ \_\_\_\_\_

\* 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.

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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 05/20/2020

MM / DD / YYYY

  
Signature

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

Name Sandra Lee  
First name Middle name Last name

Title Controller

Company Amsafe Inc.  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1043 N. 47th Avenue  
Number Street

Phoenix AZ 85043  
City State ZIP Code

Contact phone 602-850-2854 Email sandra.lee@amsafe.com





PHOENIX, ARIZONA  
PHONE (602)850-2850  
FAX (602)278-3479

Questions?

Contact: Accounts Receivable Department  
[accountsreceivable@amsafe.com](mailto:accountsreceivable@amsafe.com)  
602-850-2850

AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987  
United States of America

## Statement

Please remit to:

**AmSafe, Inc.**  
**LOCKBOX 911928**  
**P.O. BOX 31001-1928**  
**PASADENA, CA 91110-1928**  
**United States of America**

Customer Number	Statement Date	PAGE
10016755	05/19/20	1 of 1

TRANS. DATE	REFERENCE NUMBER	PURCHASE ORDER NUMBER	TRANS. TYPE	DUE DATE	AMOUNT OPEN
11/13/19	I561666	B0200419	Invoice	12/13/19	1,706.25
11/14/19	I561810	P1605419	Invoice	12/14/19	3,793.26
12/04/19	I563854	P1807619	Invoice	01/03/20	2,319.94
12/06/19	I564279	P2535319	Invoice	01/05/20	1,973.85
12/10/19	I564659	R5276419	Invoice	01/09/20	2,584.96
12/10/19	I564677	P1794519	Invoice	01/09/20	438.37
03/06/20	I573460	P0134420	Invoice	04/05/20	722.15
03/23/20	I575550	P0563220	Invoice	04/22/20	3,220.20
03/24/20	I575575	BF0000120	Invoice	04/23/20	16,515.36
03/24/20	I575576	BF0000220	Invoice	04/23/20	6,652.02
03/26/20	I575728	R0727420	Invoice	04/25/20	3,843.66

### AmSafe, Inc.

Current	1-30 Days	31-60 Days	Over 60 Days		TOTAL AMOUNT DUE
0.00	30,231.24	722.15	12,816.63		43,770.02
PAST DUE				FINANCE CHARGES	USD

PLEASE CHECK ITEMS YOU ARE PAYING



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

**INVOICE**

Please remit to:  
AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.
10016755

Invoice Date
11/13/19

Sales Order Number
S417614

Invoice Number
I561666

Purchase Order Number
B0200419

Page No.
1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** AVIANCA  
1950 NW 66TH AVE BLDG 708  
DOORS 71 TO 79  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
0331-46590

Shipper No.
000562729

Freight
COLLECT

**COMMENTS:**

PLEASE REFERENCE CUSTOMER PO# B0200419  
ON AWB, PACKING SLIP, RELATED CORRESPONDENCES,  
EACH PACKAGE, WEIGHTS AND DIMS.  
DO NOT DECLARE VALUE CHARGES & FULL TRACEABILITY REQUIRED  
IF IT IS DANGEROUS GOODS, ALL SPECIFIC DOCUMENTS MUST BE  
INCLUDED INSIDE THE BOX AND IT MUST BE MARKED OUTSIDE PROPERLY.  
>>>>CRITICAL; INCLUDE PO NUMBER ON FEDEX REFERENCE FIELD<<  
AVIANCA BUYER EMAIL:

TERMS	ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	FedEx Ground	FOB POINT
NET30	08/26/19	PANAIR	11/13/19	TRACKING #	123054531029	ORIGIN

LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY	T	UNIT PRICE	EXTENDED AMOUNT
			LOT	BACK ORD.	SHIPPED		

1	7089-1-051-8190	DRAWING: 7089 REV: R INFL LAP BELT ASSY	EA	S417614-8	0.0	3.0 N	568.75 USD	1,706.25 USD
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Non-Taxable: 1,706.25 USD Line Total: 1,706.25 USD

**Total Taxable:**

The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phoenix, Arizona, USA

Sales Tax: \_\_\_\_\_  
Total: 1,706.25 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

**INVOICE**

Please remit to:  
AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	11/14/19	S416181	I561810	P1605419	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** AVIANCA  
1950 NW 66TH AVE BLDG 708  
DOORS 71 TO 79  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
0331-46590

**COMMENTS:**

PLEASE REFERENCE CUSTOMER PO# P1605419  
ON AWB, PACKING SLIP, RELATED CORRESPONDENCES,  
EACH PACKAGE, WEIGHTS AND DIMS.  
DO NOT DECLARE VALUE CHARGES & FULL TRACEABILITY REQUIRED  
IF IT IS DANGEROUS GOODS, ALL SPECIFIC DOCUMENTS MUST BE  
INCLUDED INSIDE THE BOX AND IT MUST BE MARKED OUTSIDE PROPERLY.  
>>>>CRITICAL; INCLUDE PO NUMBER ON FEDEX REFERENCE FIELD<<<  
AVIANCA BUYER EMAIL:

Shipper No.	Freight
000562874	COLLECT

TERMS	ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	FedEx P1 10:30 AM	FOB POINT			
NET30	07/31/19	PANAIR	11/14/19	TRACKING #	123054531187	ORIGIN			
LINE	ITEM	DESCRIPTION	UM	QUANTITY			T	UNIT PRICE	EXTENDED AMOUNT
NO.				LOT	BACK ORD.	SHIPPED	A X		
1	7094-2021218061	DRAWING: 7094 REV: J INFL BUCKLE HALF ASSY AVIANCA S416181-1 6.0 TOP ASSY: 7094-1-121-8061	EA		0.0	6.0	N	160.58 USD	963.48 USD
2	7215-530121B	DRAWING: 7215 REV: K INFL BUCKLE HALF ASSY WEBER CIRBUS AVIANCA TAC  TOP ASSY: 7215-1-30111E21	EA	S416181-3	0.0	3.0	N	108.83 USD	326.49 USD
3	7215-570121B	DRAWING: 7215 REV: K INFL BUCKLE HALF ASSY  TOP ASSY: 7215-1-70111E21	EA	S416181-4	0.0	20.0	N	108.84 USD	2,176.80 USD
4	7215-640121B	DRAWING: 7215 REV: K INFL BUCKLE HALF ASSY WEBER CIRBUS AVIANCA TAC  TOP ASSY: 7215-1-40111E21	EA	S416181-5	0.0	3.0	N	108.83 USD	326.49 USD

Non-Taxable:	3,793.26 USD	Line Total:	3,793.26 USD
Total Taxable:			
The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.			
Signature:	Date:	Phoenix, Arizona, USA	Sales Tax:
			Total:
			3,793.26 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

**INVOICE**

Please remit to:  
AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	12/04/19	S417340	I563854	P1807619	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** AVIANCA  
1950 NW 66TH AVE BLDG 708  
DOORS 71 TO 79  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
0331-46590

Shipper No.	Freight
000564929	COLLECT

**COMMENTS:**

PLEASE REFERENCE CUSTOMER PO# P1807619  
ON AWB, PACKING SLIP, RELATED CORRESPONDENCES,  
EACH PACKAGE, WEIGHTS AND DIMS.  
DO NOT DECLARE VALUE CHARGES & FULL TRACEABILITY REQUIRED  
IF IT IS DANGEROUS GOODS, ALL SPECIFIC DOCUMENTS MUST BE  
INCLUDED INSIDE THE BOX AND IT MUST BE MARKED OUTSIDE PROPERLY.  
>>>>CRITICAL; INCLUDE PO NUMBER ON FEDEX REFERENCE FIELD<<  
AVIANCA BUYER EMAIL:

TERMS	ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	FedEx Ground	FOB POINT
NET30	08/20/19	PANAIR	12/04/19	TRACKING #	131491329830	ORIGIN

LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY	T	UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD.	SHIPPED	

1	2010-2-011-2267	DRAWING: 2010 REV: DU EXT ASSY	EA	S417340-1	0.0	1.0 N	44.94 USD	44.94 USD
2	7089-1-051-8190	DRAWING: 7089 REV: R INFL LAP BELT ASSY	EA	S417340-2	0.0	4.0 N	568.75 USD	2,275.00 USD

Non-Taxable: 2,319.94 USD

Line Total: 2,319.94 USD

Total Taxable:

The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phoenix, Arizona, USA

Sales Tax:  
Total: 2,319.94 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

## INVOICE

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AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	12/06/19	S423611	I564279	P2535319	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** AVIANCA  
1950 NW 66TH AVE BLDG 708  
DOORS 71 TO 79  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
0331-46590

Shipper No.	Freight
000565357	COLLECT

**COMMENTS:**

PLEASE REFERENCE CUSTOMER PO# P2535319  
ON AWB, PACKING SLIP, RELATED CORRESPONDENCES,  
EACH PACKAGE, WEIGHTS AND DIMS.  
DO NOT DECLARE VALUE CHARGES & FULL TRACEABILITY REQUIRED  
IF IT IS DANGEROUS GOODS, ALL SPECIFIC DOCUMENTS MUST BE  
INCLUDED INSIDE THE BOX AND IT MUST BE MARKED OUTSIDE PROPERLY.  
>>>>CRITICAL; INCLUDE PO NUMBER ON FEDEX REFERENCE FIELD<<<<  
AVIANCA BUYER EMAIL:

TERMS NET30	ORDER DATE 11/27/19	SALESPERSON PANAIR	SHIP DATE 12/06/19	SHIP VIA FedEx Ground	TRACKING # 134173506284	FOB POINT ORIGIN			
LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY			T A X	UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD.	SHIPPED			
1	2188-1-141-8008	DRAWING: 2188 REV: AT LAP BELT ASSY	EA	S423611-2	0.0	15.0	N	131.59 USD	1,973.85 USD

Non-Taxable: 1,973.85 USD

Line Total: 1,973.85 USD

Total Taxable:

The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phoenix, Arizona, USA

Sales Tax:  
Total: 1,973.85 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

## INVOICE

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AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	12/10/19	179356	1564659	R5276419	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** MIAMI LOGISTIC CENTER  
1950 NW 66TH AVE  
BUILDING 708, DOORS 70 - 77  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO BOX 523987  
MIAMI, FL 331 52-3987

**REMARKS:**  
0331-46590

Shipper No.	Freight
000565745	COLLECT

**COMMENTS:**

EASA REQUIRED

\*\*\*\*\*

### SHIPPING INSTRUCTIONS:

PACKAGES 1-150 LBS. - SHIP FEDEX GROUND ACCT# 0331-4659-0

IF THE PACKAGE IS LARGER THAN 150LBS OR URGENT/AOG PLEASE CONTACT CARLOS GONZALES AT CARLOSALBERTO.GONZALEZ@AVIANCA.COM FOR SHIPPING INSTRUCTIONS.

CONSOLIDATE ORDERS. NO PARTIAL SHIPMENTS ALLOWED. ONLY 1 INVOICE PER PO.

TERMS	ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	Freight Forwarder	FOB POINT			
NET30	12/03/19	PANAIR	12/10/19	TRACKING #	131491331461	ORIGIN			
LINE	ITEM	DESCRIPTION	UM	QUANTITY			T	UNIT PRICE	EXTENDED AMOUNT
NO.				LOT	BACK ORD.	SHIPPED	A X		
1	5000-1-01A-2396	DRAWING: 5000 REV: AV REST SYS ASSY W/IR  CRO# 179356	EA	179356-1	0.0	1.0	N	2,584.96 USD	2,584.96 USD

Non-Taxable:	2,584.96 USD	Line Total:	2,584.96 USD
Total Taxable:			
The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.			
Signature:	Date:	Phoenix, Arizona, USA	Sales Tax:
			Total:
			2,584.96 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

**INVOICE**

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AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	12/10/19	S417457	I564677	P1794519	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** AVIANCA  
1950 NW 66TH AVE BLDG 708  
DOORS 71 TO 79  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
0331-46590

**COMMENTS:**

Shipper No.	Freight
000565762	COLLECT

PLEASE REFERENCE CUSTOMER PO# P1794519  
ON AWB, PACKING SLIP, RELATED CORRESPONDENCES,  
EACH PACKAGE, WEIGHTS AND DIMS.  
DO NOT DECLARE VALUE CHARGES & FULL TRACEABILITY REQUIRED  
IF IT IS DANGEROUS GOODS, ALL SPECIFIC DOCUMENTS MUST BE  
INCLUDED INSIDE THE BOX AND IT MUST BE MARKED OUTSIDE PROPERLY.  
>>>>CRITICAL; INCLUDE PO NUMBER ON FEDEX REFERENCE FIELD<<  
AVIANCA BUYER EMAIL:

TERMS NET30	ORDER DATE 08/21/19	SALESPERSON PANAIR	SHIP DATE 12/10/19	SHIP VIA FedEx Ground	TRACKING # 110951362793	FOB POINT ORIGIN			
LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY			T A X	UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD.	SHIPPED			
1	2188-1-141-8008	DRAWING: 2188 REV: AT LAP BELT ASSY	EA	S417457-1	0.0	5.0	N	131.59 USD	657.95 USD

Non-Taxable: 657.95 USD

Line Total: 657.95 USD

Total Taxable:

The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phoenix, Arizona, USA

Sales Tax: \_\_\_\_\_  
Total: 657.95 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

**INVOICE**

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AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	03/06/20	S427320	I573460	P0134420	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** AVIANCA  
1950 NW 66TH AVE BLDG 708  
DOORS 71 TO 79  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
686552756

**COMMENTS:**

Shipper No.	Freight
000574644	COLLECT

PLEASE REFERENCE CUSTOMER PO# P0134420  
ON AWB, PACKING SLIP, RELATED CORRESPONDENCES,  
EACH PACKAGE, WEIGHTS AND DIMS.  
DO NOT DECLARE VALUE CHARGES & FULL TRACEABILITY REQUIRED  
IF IT IS DANGEROUS GOODS, ALL SPECIFIC DOCUMENTS MUST BE  
INCLUDED INSIDE THE BOX AND IT MUST BE MARKED OUTSIDE PROPERLY.  
>>>>CRITICAL; INCLUDE PO NUMBER ON FEDEX REFERENCE FIELD<<<<  
AVIANCA BUYER EMAIL:

TERMS	ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	FedEx P2 Std Ovrnt	FOB POINT
NET30	01/30/20	PANAIR	03/06/20	TRACKING #	134173521917	ORIGIN

LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY			UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD.	SHIPPED		
1	7196-330121B	DRAWING: 7196 REV: J INFL BUCKLE HALF ASSY ZSUS AVIANCA OCEANAIR S427320-1 5.0 TOP ASSY: 7196-1-30111E21	EA	0.0	5.0	N	144.43 USD	722.15 USD

Non-Taxable:	722.15 USD	Line Total:	722.15 USD
Total Taxable:			
The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.			
Signature:	Date:	Phoenix, Arizona, USA	Sales Tax:
			Total:
			722.15 USD



# AmSafe

1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

## INVOICE

Please remit to:  
AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	03/23/20	S430498	I575550	P0563220	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** AVIANCA  
1950 NW 66TH AVE BLDG 708  
DOORS 71 TO 79  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
686552756

**COMMENTS:**

Shipper No.	Freight
000576753	COLLECT

PLEASE REFERENCE CUSTOMER PO#P0563220  
ON AWB, PACKING SLIP, RELATED CORRESPONDENCES,  
EACH PACKAGE, WEIGHTS AND DIMS.  
DO NOT DECLARE VALUE CHARGES & FULL TRACEABILITY REQUIRED  
>>>>CRITICAL; INCLUDE PO NUMBER ON FEDEX REFERENCE FIELD<<  
AVIANCA BUYER EMAIL: AOGDESK@avianca.com

TERMS		ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	FedEx P1 10:30 AM	FOB POINT		
NET30		03/19/20	PANAIR	03/23/20	TRACKING # 123054570975		ORIGIN		
LINE	ITEM	DESCRIPTION	UM	QUANTITY			T	UNIT PRICE	EXTENDED AMOUNT
NO.				LOT	BACK ORD.	SHIPPED	A		
							X		

1	4275-1-011-8110	DRAWING: 4275 REV: K REST SYS ASSY W/IR	EA	S430498-1	0.0	1.0 N	2,120.20 USD	2,120.20 USD
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Non-Taxable:	3,220.20 USD	Line Total:	2,120.20 USD
Total Taxable:			
The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.			
Signature:	Date:	Phoenix, Arizona, USA	3DAY AOG Sales Tax: 1,100.00 USD
Total:			3,220.20 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

**INVOICE**

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AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	03/24/20	S428023	1575575	BF0000120	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE P.O.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** RECARO AIRCRAFT SEATING  
NO. 771 HUADONG ROAD HIGH  
TECHNOLOGY AND DEVELOPMENT  
ZONE  
QINGDAO 266109  
China, People's Rep. of

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE P.O.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**

**COMMENTS:**

Shipper No.	Freight
000576778	COLLECT

PLEASE ADVISE WEIGHTS AND DIMS  
SO CUSTOMER CAN SELECT APPROPRIATE  
FREIGHT FORWARDER

TERMS		ORDER DATE	SALESPERSON	SHIP DATE	SHIP VIA	Freight Forwarder		FOB POINT	
NET30		02/07/20	PANAIR	03/24/20	TRACKING #	000576778		ORIGIN	
LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY			T A	UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD.	SHIPPED	X		
1	2224-1-131-8061	DRAWING: 2224 REV: BL LAP BELT ASSY  LINE 3 OF AMENDED PO	EA	S428023-4	0.0	216.0	N	38.23 USD	8,257.68 USD
2	2224-1-131-8061	DRAWING: 2224 REV: BL LAP BELT ASSY  LINE 4 OF AMENDED PO	EA	S428023-5	0.0	216.0	N	38.23 USD	8,257.68 USD

Non-Taxable:	16,515.36 USD	Line Total:	16,515.36 USD
Total Taxable:			
The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.			
Signature:	Date:	Phoenix, Arizona, USA	Sales Tax:
			Total:
			16,515.36 USD



1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

**INVOICE**

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AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	03/24/20	S428025	I575576	BF0000220	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** RECARO AIRCRAFT SEATING  
NO. 771 HUADONG ROAD HIGH  
TECHNOLOGY AND DEVELOPMENT  
ZONE  
QINGDAO 266109  
China, People's Rep. of

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**

**COMMENTS:**

PLEASE ADVISE WEIGHTS AND DIMS  
SO CUSTOMER CAN SELECT APPROPRIATE  
FREIGHT FORWARDER

Shipper No.	Freight
000576780	COLLECT

TERMS NET30		ORDER DATE 02/07/20	SALESPERSON PANAIR	SHIP DATE 03/24/20	SHIP VIA      Freight Forwarder TRACKING #    000576780		FOB POINT ORIGIN		
LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY			T A X	UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD.	SHIPPED			
1	2224-1-131-8061	DRAWING: 2224 REV:        BL LAP BELT ASSY  LINE 5 of Amended PO	EA	S428025-6	0.0	174.0	N	38.23 USD	6,652.02 USD

Non-Taxable:	6,652.02 USD	Line Total:	6,652.02 USD
Total Taxable:			
The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.			
Signature:	Date:	Phoenix, Arizona, USA	Sales Tax:
			Total:
			6,652.02 USD

# AmSafe

1043 North 47th Avenue  
PHOENIX, AZ 85043  
PH (602)850-2850 FAX (602)278-3479

## INVOICE

Please remit to:  
AmSafe, Inc.  
Lockbox 911928  
P.O. Box 31001-1928  
Pasadena, CA 91110-1928

\*\*\*DUPLICATE\*\*\*

Customer No.	Invoice Date	Sales Order Number	Invoice Number	Purchase Order Number	Page No.
10016755	03/26/20	185033	1575728	R0727420	1

**BILL TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO.BOX 523987  
MIAMI, FL 33152-3987

**SHIP TO:** MIAMI LOGISTIC CENTER  
1950 NW 66TH AVE  
BUILDING 708, DOORS 70 - 77  
MIAMI, FL 33126

**SOLD TO:** AVIANCA INC  
AVIANCA, S.A COLOMBIA  
ACCT PAYABLE PO BOX 523987  
MIAMI, FL 33152-3987

**REMARKS:**  
0331-46590

Shipper No.	Freight
000576931	COLLECT

**COMMENTS:**

EASA REQUIRED

\*\*\*\*\*

**SHIPPING INSTRUCTIONS:**

PACKAGES 1-150 LBS. - SHIP FEDEX GROUND ACCT# 0331-4659-0

IF THE PACKAGE IS LARGER THAN 150LBS OR URGENT/AOG PLEASE CONTACT CARLOS GONZALES AT CARLOSALBERTO.GONZALEZ@AVIANCA.COM FOR SHIPPING INSTRUCTIONS.  
CONSOLIDATE ORDERS. NO PARTIAL SHIPMENTS ALLOWED. ONLY 1 INVOICE PER PO.

TERMS NET30	ORDER DATE 03/10/20	SALESPERSON PANAIR	SHIP DATE 03/26/20	SHIP VIA Freight Forwarder	TRACKING # 125479560401	FOB POINT ORIGIN			
LINE NO.	ITEM	DESCRIPTION	UM	QUANTITY			T A X	UNIT PRICE	EXTENDED AMOUNT
				LOT	BACK ORD.	SHIPPED			
1	2006-1-961-8061	DRAWING: 2006 REV: CV LAP BELT ASSY  CRO# 185033	EA	185033-1	0.0	47.0	N	81.78 USD	3,843.66 USD

Non-Taxable:	3,843.66 USD	Line Total:	3,843.66 USD
Total Taxable:			
The undersigned, exporter/supplier of goods listed in this invoice/document, declares that according to the rule being valid in the European Union, the origin of these goods is the United States of America.			
Signature:	Date:	Phoenix, Arizona, USA	Sales Tax:
			Total:
			3,843.66 USD

## Official Form 410

# Instructions for Proof of Claim

United States Bankruptcy Court

12/15

These instructions and definitions generally explain the law. In certain circumstances, such as bankruptcy cases that debtors do not file voluntarily, exceptions to these general rules may apply. You should consider obtaining the advice of an attorney, especially if you are unfamiliar with the bankruptcy process and privacy regulations.

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.

### How to fill out this form

- Fill in all of the information about the claim as of the date the case was filed.
- Fill in the caption at the top of the form.
- If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.
- Attach any supporting documents to this form.  
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *redaction* on the next page.)  
Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).
- Do not attach original documents because attachments may be destroyed after scanning.
- If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.

- A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth. See Bankruptcy Rule 9037.
- For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian. For example, write *A.B., a minor child (John Doe, parent, 123 Main St., City, State)*. See Bankruptcy Rule 9037.

### Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, either enclose a stamped self-addressed envelope and a copy of this form or go to the court's PACER system ([www.pacer.psc.uscourts.gov](http://www.pacer.psc.uscourts.gov)) to view the filed form.

### Understand the terms used in this form

**Administrative expense:** Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate.  
11 U.S.C. § 503.

**Claim:** A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. §101 (5). A claim may be secured or unsecured.

**Creditor:** A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. §101 (10).

**Debtor:** A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

**Evidence of perfection:** Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

**Information that is entitled to privacy:** A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

**Priority claim:** A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

**Proof of claim:** A form that shows the amount of debt the debtor owed to a creditor on the date of the bankruptcy filing. The form must be filed in the district where the case is pending.

**Redaction of information:** Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to **privacy** on the *Proof of Claim* form and any attached documents.

**Secured claim under 11 U.S.C. §506(a):** A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

**Setoff:** Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

**Uniform claim identifier:** An optional 24-character identifier that some creditors use to facilitate electronic payment.

**Unsecured claim:** A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

### Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

**Do not file these instructions with your form.**