

Fill in this information to identify the case:

Debtor 1 CBC RESTAURANT CORP

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the District of Delaware

Case number 23-10245-KBO

- ☒ Date Stamped Copy Returned
☐ No self addressed stamped envelope
☐ No copy to return

Official Form 410
Proof of Claim

04/16

Part 1: Identify the Claim

1. Who is the current creditor?	CITY OF UNIVERSITY PARK 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?	<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? Eboney Cobb Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>500 EAST BORDER ST, SUITE 640</u> Number _____ Street _____ ARLINGTON TX 76010 City _____ State _____ ZIP Code _____ Contact phone <u>(817) 461-3344</u> Contact email <u>emccain@pbfc.com</u>	Where should payments to the creditor be sent? (if different) CITY OF UNIVERSITY PARK Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>500 EAST BORDER STREET, SUITE 640</u> Number _____ Street _____ ARLINGTON TX 76010 City _____ State _____ ZIP Code _____ Contact phone _____ Contact email _____
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Uniform claim identifier for electronic payments in chapter 13 (if you use one): None		
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? _____	



231024523030300000000004

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:
Please see attached statement.

7. How much is the claim?

\$2,458.44

Does this amount include interest or other charges?

☐ No

☒ Yes. Tax statements on which this claim is founded are attached.

8. What is the basis of the claim?

Ad Valorem Property Taxes

9. Is all or part of the claim secured?

☐ No

☒ Yes. Claim secured by statutory tax lien provided by Sections 32.01 and 32.05 of the Texas Property Tax Code and Art. 8, Section 15 of the Texas Constitution.

Nature of property:

☐ Real estate.

☐ Motor vehicle

☒ Other. Describe:

Personal Property

Basis for perfection:

The debt is incurred January 1st of each year pursuant to Sections 32.01, 32.05, and 32.07 of the Texas Property Tax Code and is automatically perfected as a matter of law.

Value of property:

Fully Secured

Amount of the claim that is secured: \$2,458.44

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) 12 %

☒ Fixed Pursuant to 11 U.S.C. § 511, the rate determined under applicable

☐ Variable nonbankruptcy law is set out in Texas Property Tax Code § 33.01

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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.

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.

☐ Taxes or penalties owed to governmental units, 11 U.S.C. § 507(a)(8), to the extent of any shortfall in collateral value, and for personal liability.

\$0.00

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:

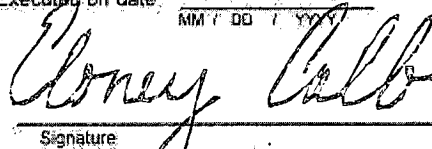
☒ I am the creditor's attorney or authorized agent.

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 2/23/2023


Signature

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

Name	Eboney Cobb		
	First name	Middle name	Last name
Title	Attorney for Claimant		
Company	Perdue, Brandon, Fielder, Collins & Mott, L.L.P.		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	500 EAST BORDER ST, SUITE 640		
	Number	Street	
	ARLINGTON		TX 76010
	City	State	ZIP Code
	(817) 461-3344		
Contact phone		Email	emccain@pbfc.com

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Tax Statement

CITY OF UNIVERSITY PARK

500 EAST BORDER STREET, SUITE 640
ARLINGTON, TX 76010
Telephone: (214) 653-7811

CBC RESTAURANT CORP
ATTN ACCOUNTS PAYABLE
SUITE 1300
12700 PARK CENTRAL
DALLAS, TX 75251

Taxpayer ID: 64154

IF YOU ARE 65 YEARS OF AGE OR OLDER OR ARE DISABLED AND YOU OCCUPY THE PROPERTY DESCRIBED IN THIS DOCUMENT AS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE APPRAISAL DISTRICT REGARDING ANY ENTITLEMENT YOU MAY HAVE TO A POSTPONEMENT IN THE PAYMENT OF THESE TAXES.

		Tax Year	Tax Due	P and I	Total Due
CITY OF UNIVERSITY PARK					
Legal: PERSONAL PROPERTY		CORNER BAKERY #95			
GEO Code: 99982160000060550		Client Property Code: 99982160000060550			
		2021	\$693.15	\$303.26	\$996.41
		2022	\$673.75	\$47.16	\$720.91
		2023	\$741.12	\$0.00	\$741.12
CITY OF UNIVERSITY PARK TOTAL -->					\$2,458.44
Total If Paid By 2/28/2023					\$2,458.44

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