

Fill in this information to identify the case:

Debtor 1 VER Technologies Holding, LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Delaware

Case number 18-10834 (KG)

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MAY 21 2018

Official Form 410
Proof of Claim

KURTZMAN CARSON CONSULTANTS

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? 4Wall Entertainment, 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>4Wall Entertainment, Inc.</u>		Name _____	
Number <u>400 N. Berry St.</u> Street _____		Number <u>3165 West Sunset Rd. Ste 100</u> Street _____	
<u>Brea</u> City	<u>CA</u> State	<u>Las Vegas</u> City	<u>NV</u> State
<u>92821</u> ZIP Code		<u>89118</u> ZIP Code	
Contact phone <u>702-263-3858</u>		Contact phone <u>Erin Leone</u>	
Contact email <u>eleone@4wall.com</u>		Contact email <u>eleone@4Wall.com</u>	

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? \$ 391.00. 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.
Rental of Theatrical Lighting equipment

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.)

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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:

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).

Amount entitled to priority

\$ _____

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 05/14/2018
MM / DD / YYYY



Signature

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

Name Erin Leone
First name Middle name Last name

Title Credit Manager

Company 4Wall Entertainment, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 3165 West Sunset Rd., Suite 100
Number Street

Las Vegas, NV 89118
City State ZIP Code

Contact phone 702-263-3858 Email eleone@4Wall.com



*Large Enough to Service...
Small Enough to Care.®*

To whom it may concern,

I'm not sure if these forms are all correct. I had six locations to file.

If you have any problems, please feel free to contact me at any time.

Sincerely,

Erin Leone

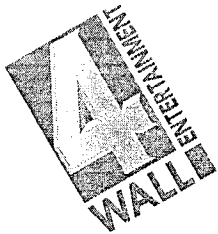
C/O 4Wall Entertainment. Inc.

3165 West Sunset Rd.

Suite 100

Las Vegas, NV 89118

702-263-3858



Billing Statement

Date: 05/14/2018

400 N BERRY ST
BREA, CA 92821 USA
Phone: (714) 674-0148

Issued To

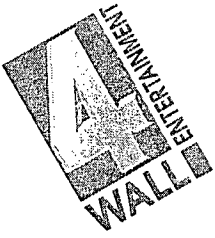
Statement Period: 04/04/2018 - 04/04/2018

VER LV
757 W. CALIFORNIA AVE., BUILDING 4
GLENDALE, CA 91203

Total Balance: 391.00

Date	Invoice No.	P.O. Number / Order Description	Amount	Credits	Balance
12/28/2017	B102075	P.O. No: P1343530 5' OMNI PIN GT	391.00	0.00	391.00

Total	Current	31-60	61-90	Over 90
391.00	0.00	0.00	0.00	391.00



400 N BERRY ST
BREA, CA 92821 USA
Phone: (714) 674-0148

Invoice

Invoice No: **B102075**
Invoice Date: 12/28/2017

Billed To

VER LV
757 W. CALIFORNIA AVE., BUILDING 4
GLENDALE, CA 91203

Order Details

Agent:	COLLIN OC BARNES	Phone:
Email:	cbarnes@4wall.com	
Order:	B103389 5' OMNI PIN GT	
Usage:	11/30/2017 - 12/06/2017	
Customer:	L10626-VER LV	
Deal:	P10102-VER LV	
Location:		
PO No:	P1343530	Ref No:
Ordered By:		
Phone No:	(702) 895-9777	Fax:
Terms:	NET 25 DAYS	

RENTAL

Description	From	To	Qty.
TRUSS GT+ 5' BLACK STRAIGHT OMNI PIN	11/30/17	12/06/17	4

RENTAL TOTAL:	391.00
GRAND TOTAL:	391.00