

Fill in this information to identify the case:

Debtor Avianca, Inc.

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

Case number 20-11132

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>AAF SPARES LLC</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, INC</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? 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>AAF SPARES LLC</u> <u>AYMERIC DE WARREN</u> <u>1900 nw 97th avenue</u> <u>DORAL, FL 33172, USA</u>	
	Contact phone <u>3053239022</u>	Contact phone _____
	Contact email <u>AYMERIC.DEWARREN@AAFSPARES.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?	<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: ____ _

7. How much is the claim? \$ 51652.08. 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.
GOOD SOLD, SERVICES PERFORMED

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:

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> 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 09/11/2020
MM / DD / YYYY

/s/AYMERIC DE WARREN
Signature

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

Name AYMERIC DE WARREN
First name Middle name Last name

Title MANAGING DIRECTOR

Company AAF SPARES LLC
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

Debtor: 20-11132 - Avianca, Inc.		
District: Southern District of New York, New York Division		
Creditor: AAF SPARES LLC AYMERIC DE WARREN 1900 nw 97th avenue DORAL, FL, 33172 USA Phone: 3053239022 Phone 2: Fax: Email: AYMERIC.DEWARREN@AAFSPARES.COM	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party: Creditor	
Other Names Used with Debtor: AVIANCA, INC	Amends Claim: No Acquired Claim: No	
Basis of Claim: GOOD SOLD, SERVICES PERFORMED	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 51652.08	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): No Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: AYMERIC DE WARREN on 11-Sep-2020 12:22:48 p.m. Eastern Time Title: MANAGING DIRECTOR Company: AAF SPARES LLC		



AAF SPARES LLC
 1900 NW 97th Avenue
 Doral
 FL 33172
 USA
 Tel: +1-786-319-9440

Invoice		Original
Email: contact@aafspares.com	Invoice Number:	15831
EIN 80-0963150	Invoice Date:	13/03/2020
	No. of Items:	2
	Page:	1

To:
 AVIANCA INC
 131868573
 P O BOX 523987
 MIAMI, FL 33152
 USA

Ship To:
 AVIANCA HOLDING / TACA INTERNATIONAL
 1950 NW 66TH AVE, BUILDING 708
 DOORS 71 TO 79
 MIAMI, FL 33126
 USA

ATTENTION: Luis Angel Rodriguez **PHONE NUMBER:** +571-5877700 X3541 **EMAIL ADDRESS:** luisangel.rodriguez@avianca.com

Customer: 9	Incoterms: EXW DORAL	Ship Via: FEDEX INTL P1
Terms: NET 60	Packages:	Ship Via Acc: 101138135
Cust. PO: Y0160319	Weight:	Ship Order:
Sales Order: S14329	AWB:	212424
Contact: Luis Angel Rodriguez	Dimensions:	

Item	Part Number/Description	Shipped	BackOrd	Type	Cond	Unit Price	Total Amt
2	REPAIR CHARGES CORE UNIT Commodity Code: NONE Country of Origin: Part Number: R815505-6 Description: Label46	1.00	0.00	Charge		17,814.79 EA	17,814.79
3	FREIGHT FREIGHT COST Commodity Code: NONE Country of Origin: Part Number: R815505-6 Description: Label46 Serial Number: FR201406142RT This is to recharge you the costs incurred to repair your core part number R815505-6 serial number FR201412074RT This relates to order Y0160319	1.00	0.00	Freight		823.77 EA	823.77

<p>PLEASE WIRE TRANSFER TO: Bank: Wells Fargo Bank, NA, 420 Montgomery, San Francisco, CA 94104 USA ABA: 121000248 Swift: WFBIUS6S ACCOUNT NAME: AAF SPARES LLC Account Number: 412 658 5447</p> <p>If paying by Check, please remit to: AAF SPARES LLC, 1900 NW 97th Avenue, Doral FL 33172</p> <p>TO REQUEST OTHER METHODS OF PAYMENT, PLEASE EMAIL: CONTACT@AAFSPARES.COM</p>	SubTotal:	
	TAX:	
	Misc Charge:	17,814.79
	Freight:	823.77
	Total:	18,638.56
	Payment Amt:	
	Payment Type:	
	Payment Owed:	18,638.56
		Payable in USD



AAF SPARES LLC
 1900 NW 97th Avenue
 Doral
 FL 33172
 USA
 Tel: +1-786-319-9440

Invoice		Original
Email: contact@aafspares.com	Invoice Number:	15911
EIN 80-0963150	Invoice Date:	17/04/2020
	No. of Items:	2
	Page:	1

To:
 AVIANCA INC
 P O BOX 523987
 MIAMI, FL 33152
 USA

Ship To:
 AVIANCA HOLDING MIAMI LOGISTIC CENTER
 1950 NW 66TH AVE, BUILDING 708
 DOORS 71 TO 79
 REF# Y0164519
 MIAMI, FL 33126
 USA

ATTENTION: DANIELA ALVAREZ **PHONE NUMBER:** +571-5877700 X3541 **EMAIL ADDRESS:** daniela.alvarezgonzalez@avianca.cc

Customer: 9	Incoterms: EXW DORAL	Ship Via: FEDEX PRIORITY O/N
Terms: NET 60	Packages:	Ship Via Acc: 101 138 135
Cust. PO: Y0164519	Weight:	Ship Order:
Sales Order: S14364	AWB:	212424
Contact: DANIELA ALVAREZ	Dimensions:	

Item	Part Number/Description	Shipped	BackOrd	Type	Cond	Unit Price	Total Amt
2	EVT3454J01 FAN Commodity Code: 88033000 Country of Origin: Part Number: EVT3454J01 Description: Label46 (Repair Charge)	1.00	0.00	Repair		2,798.87 EA	2,798.87
3	FREIGHT FREIGHT COST Commodity Code: NONE Country of Origin: Part Number: EVT3454J01 Description: Label46 This is to recharge you the costs incurred to repair your core part number EVT3454J01 serial number 137600549 This relates to order Y0164519	1.00	0.00	Freight		50 EA	50

PLEASE WIRE TRANSFER TO: Bank: Wells Fargo Bank, NA, 420 Montgomery, San Francisco, CA 94104 USA ABA: 121000248 Swift: WFBIUS6S ACCOUNT NAME: AAF SPARES LLC Account Number: 412 658 5447 If paying by Check, please remit to: AAF SPARES LLC, 1900 NW 97th Avenue, Doral FL 33172 TO REQUEST OTHER METHODS OF PAYMENT, PLEASE EMAIL: CONTACT@AAFSPARES.COM	
	SubTotal: 2,798.87
	TAX:
	Misc Charge:
	Freight: 50
	Total: 2,848.87
	Payment Amt:
Payment Type:	
Payment Owed: 2,848.87	
Payable in USD	



AAF SPARES LLC
 1900 NW 97th Avenue
 Doral
 FL 33172
 USA
 Tel: +1-786-319-9440

Invoice		Original
Email: contact@aafspares.com	Invoice Number:	15955
EIN 80-0963150	Invoice Date:	30/04/2020
	No. of Items:	2
	Page:	1

To:
 AVIANCA INC
 131868573
 P O BOX 523987
 MIAMI, FL 33152
 USA

Ship To:
 AVIANCA HOLDING / TACA INTERNATIONAL
 1950 NW 66TH AVE, BUILDING 708
 DOORS 71 TO 79
 MIAMI, FL 33126
 USA

ATTENTION: DANIELA ALVAREZ **PHONE NUMBER:** +571-5877700 X3541 **EMAIL ADDRESS:** daniela.alvarezgonzalez@avianca.cc

Customer: 9	Incoterms: EXW UK	Ship Via: COLLECTION
Terms: NET 60	Packages:	Ship Via Acc:
Cust. PO: Y0012820	Weight:	Ship Order:
Sales Order: S14512	AWB:	212424
Contact: DANIELA ALVAREZ	Dimensions:	

Item	Part Number/Description	Shipped	BackOrd	Type	Cond	Unit Price	Total Amt
1	R815505-6 PROP BLADE Commodity Code: 84119100 Country of Origin: Part Number: R815505-6 Description: Label46 (Repair Charge)	1.00	0.00	Repair		25,164.65 EA	25,164.65
2	FREIGHT FREIGHT COST Commodity Code: NONE Country of Origin: Part Number: R815505-6 Description: Label46 This is to recharge you the costs incurred to repair your core part number R815505-6 serial number FR201403083RT This relates to order Y0012820	1.00	0.00	Freight		2,000 EA	2,000

PLEASE WIRE TRANSFER TO: Bank: Wells Fargo Bank, NA, 420 Montgomery, San Francisco, CA 94104 USA ABA: 121000248 Swift: WFBIUS6S ACCOUNT NAME: AAF SPARES LLC Account Number: 412 658 5447 If paying by Check, please remit to: AAF SPARES LLC, 1900 NW 97th Avenue, Doral FL 33172 TO REQUEST OTHER METHODS OF PAYMENT, PLEASE EMAIL: CONTACT@AAFSPARES.COM	SubTotal:	25,164.65
	TAX:	
	Misc Charge:	
	Freight:	2,000
	Total:	27,164.65
	Payment Amt:	
	Payment Type:	
	Payment Owed:	27,164.65
	Payable in USD	