

Fill in this information to identify the case:

Debtor Warrior Energy Services Corporation

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

Case number 20-35816

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.

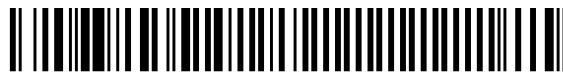
Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, 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>Action Specialties, L.L.C.</u> 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?	Where should notices to the creditor be sent? Action Specialties, L.L.C. Christi Derouen 7915 Highway 90 West New Iberia, LA 70560, USA Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should payments to the creditor be sent? (if different) Contact phone <u>337-367-1664</u> Contact email <u>CHRISTI@ACTIONSPECIALTIES.COM</u>
	Contact phone _____ 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: __ __ __ __
7. How much is the claim? \$ <u>1879.00</u>	Does this amount include interest or other charges? <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).
8. What is the basis of the claim?	<p>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.</p> <p><u>GOODS SOLD</u></p>
9. Is all or part of the claim secured?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature or property: <div><input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle 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: _____</div> Basis for perfection: _____ <small>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.)</small> 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) _____ % <div><input type="checkbox"/> Fixed <input type="checkbox"/> Variable</div></div>
10. Is this claim based on a lease?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</div>
11. Is this claim subject to a right of setoff?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Identify the property: _____</div>



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.

\$ 1879.00

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.

☐ 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 01/07/2021
MM / DD / YYYY

/s/CHRISTI DEROUEN
Signature

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

Name CHRISTI DEROUEN
First name Middle name Last name

Title ACCOUNTANT

Company ACTION SPECIALTIES, L.L.C.

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 (888) 802-7207 | International (781) 575-2107

Debtor: 20-35816 - Warrior Energy Services Corporation		
District: Southern District of Texas, Houston Division		
Creditor: Action Specialties, L.L.C. Christi Derouen 7915 Highway 90 West New Iberia, LA, 70560 USA Phone: 337-367-1664 Phone 2: Fax: 337-492-1237 Email: CHRISTI@ACTIONSPECIALTIES.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:	Amends Claim: No Acquired Claim: No	
Basis of Claim: GOODS SOLD	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 1879.00	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): Yes: 1879.00 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: CHRISTI DEROUEN on 07-Jan-2021 4:22:45 p.m. Eastern Time Title: ACCOUNTANT Company: ACTION SPECIALTIES, L.L.C.		

**Action Specialties, LLC**

7915 Hwy 90 West Ph 337-367-1664
New Iberia, LA 70560 Fax 337-367-2276
1-800-819-1664

Invoice

Invoice Number: 0685573-IN

Invoice Date: 11/10/2020

Page: 1

Sales Order: 0276710

Sold To:
WARRIOR ENERGY SERVICES
105 BERCEGEAY ROAD
ATTN: ACCOUNTS PAYABLE
BROUSSRD, LA 70518

SHIP TO:
WARRIOR ENERGY SERVICES
105 BERCEGEAY ROAD
ATTN: MICHAEL MARCEAUX
BROUSSARD, LA 70518

ORDERED B
MICHAEL MARCEAUX

Customer I.D.	Customer P.O.	Payment Terms	Core Order No
1951003	004138-WPS	Net 30	

Sales Rep I.D.	Shipping Method	Ship Date	Due Date
MEM	HAND DELIVER	11/9/2020	12/10/2020

Quantity	Item Number	Description	Unit Price	Extension
		ORDER FOR TOMMIE DAVIS		
2.00	INY7	LAPCO 7oz 100% Cotton Twill FR Uniform Shirt Navy L NAVY	64.50	129.00
2.00	INST-MONOGARMNT	GARMENT MONOGRAMMING INSTRUCTI	0.00	0.00

FR UNIFORM/T. DAVIS

Net Invoice: 129.00

Freight: 0.00

Sales Tax: 11.55

Invoice Total: \$140.55

Less Deposit: 0.00

Balance Due: \$140.55

A Finance Charge of 1.5% per month will be assessed on unpaid balances beyond established terms.

**Action Specialties, LLC**

7915 Hwy 90 West Ph 337-367-1664
New Iberia, LA 70560 Fax 337-367-2276
1-800-819-1664

Invoice

Invoice Number: 0685057-IN

Invoice Date: 11/3/2020

Page: 1

Sales Order: 0275946

Sold To:
WARRIOR ENERGY SERVICES
105 BERCEGEARY ROAD
ATTN: ACCOUNTS PAYABLE
BROUSSARD, LA 70518

SHIP TO:
WARRIOR ENERGY SERVICES
105 BERCEGEARY ROAD
FOR: RON MIGUEZ
BROUSSARD, LA 70518

ORDERED B
DAVID WILLIAMS

Customer I.D.	Customer P.O.	Payment Terms	Core Order No
1951061	009338-CTB	Net 30	

Sales Rep I.D.	Shipping Method	Ship Date	Due Date
CGL	HAND DELIVER	11/2/2020	12/3/2020

Quantity	Item Number	Description	Unit Price	Extension
5.00	INY7	020-LAPCO 7oz 100% Cotton Twill FR Uniform Shirt Navy L NAVY	58.50	292.50
5.00	INST-MONOGARMNT	GARMENT MONOGRAMMING INSTRUCTI	0.00	0.00
5.00	PEW2NV	Bulwark Mens' 9oz Excel FR Work Pant Navy 34/32NAVY	54.00	270.00
5.00	INST-ALTERATION	ALTERATION INSTRUCTIONS	0.00	0.00

FR: RON MIGUEZ

Net Invoice: 562.50

Freight: 0.00

Sales Tax: 50.34

Invoice Total: \$612.84

Less Deposit: 0.00

Balance Due: \$612.84

A Finance Charge of 1.5% per month will be assessed on unpaid balances beyond established terms.

**Action Specialties, LLC**

7915 Hwy 90 West Ph 337-367-1664
New Iberia, LA 70560 Fax 337-367-2276
1-800-819-1664

Invoice

Invoice Number: 0685953-IN

Invoice Date: 11/16/2020

Page: 1

Sales Order: 0277064

Sold To:
WARRIOR ENERGY SERVICES
105 BERCEGEARY ROAD
ATTN: ACCOUNTS PAYABLE
BROUSSARD, LA 70518

SHIP TO:
WARRIOR ENERGY SERVICES
CUSTOMER PICKUP
TERRANCE EVANS

ORDERED B
DAVID WILLIAMS

Customer I.D.	Customer P.O.	Payment Terms	Core Order No
1951061	9431CTB	Net 30	

Sales Rep I.D.	Shipping Method	Ship Date	Due Date
CGL	CUST PICKUP	11/13/2020	12/16/2020

Quantity	Item Number	Description	Unit Price	Extension
		ITEMS PICKED UP IN COMPANY STORE 11-13-20		
1.00	IXXX7	020- LAPCO 7oz 100% Cotton Twill FR Uniform Shirt	42.50	42.50
		BLANK ITEM XLR NAVY		
1.00	P-XXXX	030-LAPCO 7oz. 100% Cotton Twill FR UNIFORM PANTS	40.50	40.50
		36X32NAVY		

FR: TERRANCE EVANS

Net Invoice: 83.00

Freight: 0.00

Sales Tax: 7.22

Invoice Total: \$90.22

Less Deposit: 0.00

Balance Due: \$90.22

A Finance Charge of 1.5% per month will be assessed on unpaid balances beyond established terms.

**Action Specialties, LLC**

7915 Hwy 90 West Ph 337-367-1664
New Iberia, LA 70560 Fax 337-367-2276
1-800-819-1664

Invoice

Invoice Number: 0685056-IN

Invoice Date: 11/3/2020

Page: 1

Sales Order: 0276021

Sold To:
WARRIOR ENERGY SERVICES
WELL SERVICES
1209 PETERS ROAD
HARVEY, LA 70058

SHIP TO:
WARRIOR ENERGY SERVICES
WELL SERVICES
1209 PETERS ROAD
ATT: DION HORN
HARVEY, LA 70058

ORDERED B
DION HORN

Customer I.D.	Customer P.O.	Payment Terms	Core Order No
2803000	012627-PAH	Net 30	

Sales Rep I.D.	Shipping Method	Ship Date	Due Date
CGL	DROP SHIP	11/2/2020	12/3/2020

Quantity	Item Number	Description	Unit Price	Extension
20.00	CMISC OC771CAMO	KRYPTTEK CAMO CAP	6.50	130.00
20.00	CMISC OC771CAMO	KRYPTTEK CAMO CAP	6.50	130.00
40.00	INST-MONOGARMNT	GARMENT MONOGRAMMING INSTRUCTI	4.00	160.00
20.00	PC54	Port & Company 5.4Oz 100% Cotton Tee Shirt	4.75	95.00
		XL SAND		
20.00	INST-SCREEN	SCREEN PRINTING INSTRUCTIONS:	6.25	125.00
20.00	AMISC PC54LS	Port & Company 5.4Oz 100% Cotton Long Sleeve Tee Shirt	7.75	155.00
20.00	INST-SCREEN	SCREEN PRINTING INSTRUCTIONS:	6.25	125.00
1.00	/OF	OUTGOING FREIGHT	30.75	30.75

CAPS & T-SHIRTS

Net Invoice: 950.75

Freight: 0.00

Sales Tax: 84.64

Invoice Total: \$1,035.39

Less Deposit: 0.00

Balance Due: \$1,035.39

A Finance Charge of 1.5% per month will be assessed on unpaid balances beyond established terms.