

Your claim can be filed electronically on KCC's website at <https://epoc.kccllc.net/Vista>.

United States Bankruptcy Court for the Northern District of Texas, Fort Worth Division

Indicate Debtor against which you assert a claim by checking the appropriate box below. **(Check only one Debtor per claim form.)**

- Vista Proppants and Logistics, LLC (Case No. 20-42002)
- Lonestar Prospects, Ltd. (Case No. 20-42006)
- VPROP Operating, LLC (Case No. 20-42003)
- Denetz Logistics, LLC (Case No. 20-42007)
- Lonestar Prospects Management, L.L.C. (Case No. 20-42004)
- MAALT, LP (Case No. 20-42008)
- MAALT Specialized Bulk, LLC (Case No. 20-42005)

## 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. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

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.

### Part 1: Identify the Claim

1. Who is the current creditor?	<u>Access Information Management of Georgia, LLC</u> <small>Name of the current creditor (the person or entity to be paid for this claim)</small>	
	Other names the creditor used with the debtor <u>Tindall Record Storage</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?	Where should notices to the creditor be sent? <u>Access Information Management</u> <small>Name</small> <u>500 Unicorn Pk. Dr., Ste 503</u> <small>Number Street</small> <u>Woburn MA 01801</u> <small>City State ZIP Code</small> <u>USA</u> <small>Country</small> Contact phone <u>978-882-2010</u> Contact email <u>Margaret.Applie@accesscorp.com</u>	Where should payments to the creditor be sent? (if different) <small>Name</small> _____ <small>Number Street</small> _____ <small>City State ZIP Code</small> _____ <small>Country</small> _____ 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 _____ <small>MM / DD / YYYY</small>	
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? _____	

KURTZMAN CARSON CONSULTANTS

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