Fill in this information to identify the case:						
Debtor 1 Amanda Manufacturing						
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: District of						
Case number						

Official Form 410

Proof of Claim

04/25

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 Cl	aim							
Who is the current creditor?	Amanda Manufacturing Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor							
Has this claim been acquired from someone else?	☑ No □ Yes. From whom?							
Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Sandra Zwayer	Where should payments to the creditor be sent? (if different)						
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1120 C.I.C. Drive	Name						
	Number Street Logan, Ohio 43138	Number Street						
RECEIVED JUN 2 4 2025	City State ZIP Code Contact phone 740-385-9380 Contact email Szwayer@amandamanufacturing.com	Contact phone Contact email						
	Uniform claim identifier (if you use one):							
Does this claim amend one already filed?	☑ No ☐ Yes. Claim number on court claims registry (if known)	Filed onMM / 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?							

Ŀ	art 2: Give Information	n 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?	\$57,529.53, Does this amount include interest or other charges?					
					t itemizing interest, fees, expenses, or other d by Bankruptcy Rule 3001(c)(2)(A).		
8.	What is the basis of the claim?				personal injury or wrongful death, or credit card.		
			h redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). disclosing information that is entitled to privacy, such as health care information.				
		goods	sold		<u> </u>		
9.	Is all or part of the claim secured?	Ø No					
	Secured	☐ Yes.	The claim is secured by a lien on property	•			
			Nature of property; Real estate. If the claim is secured by	the debtor's pri	ncipal residence, file a Mortgage Proof of Claim		
			Attachment (Official Form				
			Other. Describe:				
			Basis for perfection:	_			
			Attach redacted copies of documents, if a	ny, that show ev le, financing sta	vidence of perfection of a security interest (for tement, or other document that shows the lien has		
			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.)		
	RECEIVED JUN 2 4 2025		Amount necessary to cure any default	as of the date	of the petition: \$		
	_	n	Annual Interest Rate (when case was file	ed)%			
PERITA GLOBAL			Fixed				
			☐ Variable				
10	. Is this claim based on a	☑ No					
	lease?	☐ Yes.	Amount necessary to cure any default a	s of the date o	f the petition. \$		
11	. Is this claim subject to a	ect to a 🗹 No					
	right of setoff?	☐ Yes.	Identify the property:				
i							

12. Is all or part of the claim entitled to priority under	☐ No					Tanak salah Make Miser Sak Mikesa Assert Sa	
11 U.S.C. § 507(a)?	🔲 Yes. Check	cone:				Amount entitled to priorit	
A claim may be partly priority and partly		mestic support obligations (including alimony and child support) under U.S.C. § 507(a)(1)(A) or (a)(1)(B).				\$	
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	☐ Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use, 11 U.S.C. § 507(a)(7).				\$		
Chiado to phoney	□ Wages, salaries, or commissions (up to \$17,150*) 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).					\$	
	☐ Contrib	utions to an employee be	enefit plan. 11 U.S.C. § 507	(a)(5).		\$	
	Other.	Specify subsection of 11	U.S.C. § 507(a)() that ap	plies.		\$	
			4/01/28 and every 3 years after		es begun on or af	ter the date of adjustment.	
		aparagan sahakan meneralah peranah serian serian dianggan sebagai serian seriah di seriah di seriah di seriah d					
Part 3: Sign Below				-			
he person completing	Check the appro	opriate box:					
ign and date it.	I am the creditor.						
RBP 9011(b).	☐ I am the cr	editor's attorney or autho	rized agent.				
f you file this claim	☐ I am the tru	istee, or the debtor, or the	eir authorized agent. Bankr	uptcy Rule 3	3004.		
electronically, FRBP 5005(a)(3) authorizes courts o establish local rules	l am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
specifying what a signature is.	I understand that amount of the cl	at an authorized signature laim, the creditor gave the	e on this <i>Proof of Claim</i> sen e debtor credit for any payn	es as an ac ients receiv	knowledgment ed toward the c	that when calculating the lebt.	
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under	penalty of perjury that the	e foregoing is true and corre	ect.			
3571.	Executed on da		_				
	\wedge	MM / DD / YYYY					
	X						
	Dandry Sugar						
	Signature						
	Print the name	of the person who is co	ompleting and signing thi	s claim:			
	Name -	Sandra	С		Zwayer		
	Traino :	First name	Middle name		Last name		
	Title	Controller					
	Company	Amanda Manufac					
		Identify the corporate ser	vicer as the company if the aut	horized agent	is a servicer.		
ECEIVED IUN 24 2025 TAGLOBAL	Address	1120 C.I.C. Drive					
JUN 24 2025	UUUIESS	Number Street					
TPA POL		Logan		ОН	43138		
ia Globai		City		State	ZIP Code		
	Contact phone	740-385-9380		Email S7	waver@am	andamanufacturing.co	