

Fill in this information to identify the case:

Debtor 1 TRICOLOR AUTO GROUP, LLC

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: **Northern District of Texas**

Case number 25-33496-SWE

Official Form 410
Proof of Claim

04/16

Part 1: Identify the Claim

1. Who is the current creditor? CASTLEBERRY INDEPENDENT SCHOOL DISTRICT
 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)
	Elizabeth Banda Calvo Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>500 EAST BORDER ST, SUITE 640</u> Number Street <u>ARLINGTON TX 76010</u> City State ZIP Code Contact phone <u>(817) 461-3344</u> Contact email <u>ebcalvo@pbfc.com</u>	CASTLEBERRY INDEPENDENT SCHOOL DISTRICT Name <u>C/O PERDUE BRANDON FIELDER ET AL</u> <u>500 EAST BORDER, SUITE 640</u> Number Street <u>ARLINGTON TX 76010</u> City State ZIP Code Contact phone _____ Contact email _____

Uniform claim identifier (if you use one): None

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? _____



253349625100700000000012

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:
 Please see attached statement.

7. How much is the claim? \$136.22
 Does this amount include interest or other charges?
 No
 Yes. Tax statements on which this claim is founded are attached.

8. What is the basis of the claim?
Ad Valorem Property Taxes

9. Is all or part of the claim secured?
 No
 Yes. Claim secured by statutory tax lien provided by Sections 32.01 and 32.05 of the Texas Property Tax Code and Art. 8, Section 15 of the Texas Constitution.

Nature of property:
 Real estate.
 Motor vehicle
 Other. Describe: Personal Property
The debt is incurred January 1st of each year pursuant to Sections 32.01, 32.05, and 32.07 of the Texas Property Tax Code and is automatically perfected as a matter of law.

Basis for perfection: _____

Value of property: Fully Secured
Amount of the claim that is secured: \$136.22
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) 12 %
 Fixed Pursuant to 11 U.S.C. § 511, the rate determined under applicable nonbankruptcy law is set out in Texas Property Tax Code § 33.01
 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.

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Taxes or penalties owed to governmental units, 11 U.S.C. § 507(a)(8), to the extent of any shortfall in collateral value, and for personal liability. \$0.00

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)(3) 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:

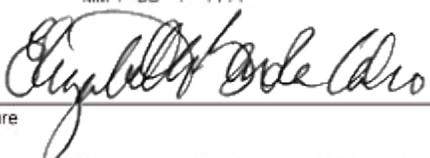
I am the creditor's attorney or authorized agent.

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 9/15/2025
MM / DD / YYYY



Signature

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

Name Elizabeth Banda Calvo
First name Middle name Last name

Title Attorney for Claimant

Company Perdue, Brandon, Fielder, Collins & Mott, L.L.P.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 500 EAST BORDER ST, SUITE 640
Number Street

ARLINGTON TX 76010
City State ZIP Code

Contact phone (817) 461-3344 Email ebcalvo@pbfc.com

Tax Statement

CASTLEBERRY INDEPENDENT SCHOOL DISTRICT

500 EAST BORDER, SUITE 640
ARLINGTON, TX 76010

TRICOLOR AUTO GROUP LLC
TAX DEPT
6021 CONNECTION DR 4TH FLOOR
IRVING, TX 75039

Taxpayer ID: 143152

IF YOU ARE 65 YEARS OF AGE OR OLDER OR ARE DISABLED AND YOU OCCUPY THE PROPERTY DESCRIBED IN THIS DOCUMENT AS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE APPRAISAL DISTRICT REGARDING ANY ENTITLEMENT YOU MAY HAVE TO A POSTPONEMENT IN THE PAYMENT OF THESE TAXES.

	Tax Year	Tax Due	P and I	Total Due
CASTLEBERRY INDEPENDENT SCHOOL DISTRICT				
Legal: PERSONAL PROPERTY TANGIBLE COMMERCIAL				
2135 JACKSBORO HWY				
GEO Code: 15078817 Client Property Code:				
	2025	\$136.22	\$0.00	\$136.22 ^{est}
CASTLEBERRY INDEPENDENT SCHOOL DISTRICT TOTAL -->				\$136.22
Total If Paid By 9/30/2025				\$136.22