

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 TX

Case number 25-33496 - Chapter 7

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 Claim**

1. Who is the current creditor?	<u>Ector CAD</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?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?  LINEBARGER GOGGAN BLAIR & SAMPSON, LLP 112 E. PECAN STREET, SUITE 2200 SAN ANTONIO, TX 78205 (210) 225-6763  sanantonio.bankruptcy@lgbs.com  Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	Where should payments to the creditor be sent? (If different)  ECTOR CAD 1301 E 8TH ST ODESSA, TX 79761-4703
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Claim number on court claims registry (if known) Amended 23 Filed On: <u>9/30/2025</u>	
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	<input type="checkbox"/> No
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Identify the debtor?	<input checked="" type="checkbox"/> Yes Last 4 digits of the debtor's account or any number you use to identify the debtor: _____ <b>SEE ATTACHED EXHIBITS</b>	
7. How much is the claim?	\$ <u>\$131.20</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?	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.  <div style="text-align: center;"><b>AD VALOREM TAXES</b></div>	
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real Estate. If claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim</i> Attachment (Official Form 410-A) with this Proof of Claim. <input type="checkbox"/> Motor Vehicle <input checked="" type="checkbox"/> Other. Describe: <u><b>SEE ATTACHED EXHIBITS</b></u> Basis for perfection: <u>Secured by Tax Lien §§ 32.01 and 32.05 of the Texas Property Tax Code. Secured claim to extent of collateral value. Unsecured Priority claim [11 U.S.C. 507 (a)(8)] to extent of any shortfall in collateral value and for personal liability.</u> 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: \$ <u><b>SEE ATTACHED EXHIBITS</b></u> Amount of the claim that is secured: \$ <u><b>\$131.20</b></u> 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: \$ <u><b>\$131.20</b></u> Annual Interest Rate (when case was filed) <u>12%</u> <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Variable	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Amount necessary to cure any default as of the date of the petition. \$ _____	
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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.	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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 \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____ <input type="checkbox"/> 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). \$ _____

<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 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

### 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 co-debtor. Bankruptcy Rule 3005.

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 November 6, 2025

/s/Don Stecker

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

Name : **Don Stecker**

Title : **Attorney TXBN 19095300**

Company : **LINEBARGER GOGGAN BLAIR & SAMPSON, LLP**  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address : **112 E. PECAN STREET, SUITE 2200  
SAN ANTONIO, TX 78205  
(210) 225-6763**

**sanantonio.bankruptcy@lgbs.com**

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF TEXAS  
DALLAS DIVISION

IN RE:	§	
	§	CASE NO. 25-33496
TRICOLOR AUTO GROUP, LLC	§	
	§	
	§	
	§	CHAPTER 7
DEBTOR(S)	§	

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DEBTOR CAD  
PROOF OF CLAIM SUMMARY OF EXHIBITS

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<u>Exhibit No.</u>	<u>Account No.</u>	<u>Tax Years included in Claim</u>	<u>Amount Due</u>
1	99200.44520.00000	2025	\$131.20
TOTAL:			\$131.20

[illegible]

100

Location 2346 E 8TH ST

Account # P10010669 /

THE UNIVERSITY OF CHICAGO PRESS

BPP	React	Attorney

	2020	Date	2019	Date	2018	Date
2020		Date	2019	Date	2018	Date

10. The following are the results of a survey of 1000 people in a city. The results are given in the table below. The first column shows the age group, the second column shows the number of people in each age group, and the third column shows the number of people in each age group who are employed. Find the probability that a person chosen at random from the city is employed, given that the person is in the 18-24 age group.

[illegible]

592.75	04/13/22	443.40	02/29/20	667.72	03/01/19
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[illegible]

Variable	Mean	SD	Min	Max	Skewness	Kurtosis	Normality
Age	34.5	12.5	18	65	0.1	3.2	0.95
Gender	1.2	0.4	1	2	0.0	3.0	0.98
Marital Status	1.5	0.5	1	3	0.2	3.1	0.96
Education	12.5	2.5	9	16	0.3	3.3	0.94
Income	15000	5000	5000	30000	0.4	3.4	0.93
Health	1.8	0.6	1	3	0.1	3.2	0.95
Stress	2.5	0.8	1	4	0.2	3.1	0.96
Depression	1.5	0.5	1	3	0.1	3.2	0.95
Life Satisfaction	3.5	1.0	1	5	0.3	3.3	0.94

[illegible]

Experiment	Time (min)	Temperature (°C)	Pressure (atm)	Flow rate (ml/min)	Concentration (g/l)	Yield (%)	Quality (%)
1	10	100	1.0	1.0	1.0	100	100
2	20	100	1.0	1.0	1.0	100	100
3	30	100	1.0	1.0	1.0	100	100
4	40	100	1.0	1.0	1.0	100	100
5	50	100	1.0	1.0	1.0	100	100
6	60	100	1.0	1.0	1.0	100	100
7	70	100	1.0	1.0	1.0	100	100
8	80	100	1.0	1.0	1.0	100	100
9	90	100	1.0	1.0	1.0	100	100
10	100	100	1.0	1.0	1.0	100	100

Figure 1. A schematic diagram of the experimental setup. The subject is seated in a chair, viewing a video screen. The screen displays a target (a small circle) and a starting point (a larger circle). The subject's hand is positioned at the starting point. The distance between the starting point and the target is labeled as  $d$ . The subject is instructed to move their hand from the starting point to the target. The video screen is connected to a computer system, which records the hand's position and movement time. The computer system is also connected to a data acquisition system, which stores the recorded data. The data acquisition system is connected to a printer, which prints out the recorded data. The printer is connected to a computer system, which processes the recorded data and generates a graph of the hand's position versus time. The graph shows the hand's trajectory from the starting point to the target. The graph is labeled with the distance  $d$  and the movement time  $t$ . The graph is also labeled with the subject's name and the date of the experiment.

1. *Journal of the American Medical Association*, 1997; 278: 1000-1005.

Author	Year	Sample Size	Sample Age	Sample Sex	Sample Location	Sample Description	Sample Source	Sample Type	Sample Method	Sample Result	Sample Conclusion
1. Smith et al.	2010	100	18-25	50% M, 50% F	USA	College students	University of California	Quantitative	Survey	75% of students reported using social media	Social media use is prevalent among college students
2. Jones et al.	2011	200	26-35	60% M, 40% F	UK	Young adults	University of Manchester	Qualitative	Interviews	80% of participants reported using social media	Social media use is prevalent among young adults
3. Brown et al.	2012	300	36-45	55% M, 45% F	Canada	Adults	University of Toronto	Quantitative	Survey	65% of participants reported using social media	Social media use is prevalent among adults
4. White et al.	2013	400	46-55	50% M, 50% F	Australia	Older adults	University of Sydney	Qualitative	Interviews	50% of participants reported using social media	Social media use is prevalent among older adults
5. Black et al.	2014	500	56-65	55% M, 45% F	Germany	Elderly	University of Berlin	Quantitative	Survey	40% of participants reported using social media	Social media use is prevalent among elderly

[illegible]

Age Group	2003	2004	2005
18-29	~85	~88	~90
30-49	~75	~78	~80
50-69	~65	~68	~70
70+	~55	~58	~60

**Mirrored**

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3:53 PM 11/5/2005

<b>Creditor:</b> (22771542) Ector CAD c/o Don Stecker 112 E. Pecan Street, Suite 2200 San Antonio, TX 78205	<b>Claim No: 23</b> <i>Original Filed</i> <i>Date: 09/23/2025</i> <i>Original Entered</i> <i>Date: 09/23/2025</i> <i>Last Amendment</i> <i>Filed: 11/06/2025</i> <i>Last Amendment</i> <i>Entered: 11/06/2025</i>	<b>Status:</b> <i>Filed by: CR</i> <i>Entered by: Don Stecker</i> <i>Modified:</i>
Amount claimed: \$131.20 Secured claimed: \$131.20		

<b>History:</b>		
<a href="#">Details</a>	<a href="#">23-1</a>	09/23/2025 Claim #23 filed by Ector CAD, Amount claimed: \$97355.59 (Stecker, Don)
<a href="#">Details</a>	<a href="#">23-2</a>	09/30/2025 Amended Claim #23 filed by Ector CAD, Amount claimed: \$144.45 (Stecker, Don)
<a href="#">Details</a>	<a href="#">23-3</a>	11/06/2025 Amended Claim #23 filed by Ector CAD, Amount claimed: \$131.20 (Stecker, Don)
<b>Description:</b> (23-1) Proof of Claim		
(23-2) Amended Proof of Claim		
(23-3) Amended Proof of Claim		
<b>Remarks:</b> (23-1) Proof of Claim		
(23-2) Amended Proof of Claim		
(23-3) Amended Proof of Claim		