

Fill in this information to identify the case:

Debtor 1	<u>United Site Services of Maryland, Inc.</u>
Debtor 2 (Spouse, if filing)	_____
United States Bankruptcy Court for the: District of New Jersey	
Case number	<u>25-23644 MBK</u>

Date Stamped Copy Returned
 No self addressed stamped envelope
 No copy to return

Official Form 410**Proof of Claim**

12/15

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>Charles County, Maryland</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? <u>Meyers, Rodbell & Rosenbaum, P.A.</u> Name <u>6801 Kenilworth Ave., Ste 400</u> Number Street <u>Riverdale Park MD 20737</u> City State ZIP Code Contact phone <u>301-699-5800</u> Contact email <u>bdept@mrrlaw.net</u>	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone _____ Contact email _____	
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 <u>MM / DD / YYYY</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 identify the debtor? No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 0 2 5 4

7. How much is the claim? \$ 1,283.66. Does this amount include interest or other charges?

No

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.

Water & Sewer Charges

9. Is all or part of the claim secured? No Yes. The claim is secured by a lien on property.

Nature of property:

Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.

Motor vehicle

Other. Describe: _____

Basis for perfection:

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: \$ _____

Amount of the claim that is secured: \$ 0.00

Amount of the claim that is unsecured: \$ 1,283.66 (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: \$ 1,283.66

RECEIVED

JAN 27 2026

VERITA GLOBAL

Annual Interest Rate (when case was filed) _____ %

Fixed

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. 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). \$ _____

Up to \$2,775* 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 \$12,475*) 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 4/01/16 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 codebtor. 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 01/22/2026
MM / DD / YYYY

/s/ Nicole C. Kenworthy

Signature



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

Name	Nicole C. Kenworthy		
	First name	Middle name	Last name
Title	Counsel for Charles County, Maryland		
Company	Meyers, Rodbell & Rosenbaum, P.A.		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	6801 Kenilworth Ave., Ste 400		
	Number	Street	
	Riverdale Park		MD 20737
	City	State	ZIP Code
Contact phone	301-699-5800		Email bdept@mrrlaw.net

RECEIVED
JAN 27 2026
VERITA GLOBAL

LAW OFFICES

**MEYERS, RODBELL
& ROSENBAUM, P.A.**

Nicole C. Kenworthy
6801 KENILWORTH AVENUE, SUITE 400
RIVERDALE PARK, MARYLAND 20737-1385
DIRECT DIAL (301) 209-2546
MAIN (301) 699-5800
FAX (301) 779-5746
EMAIL: nikenworthy@mrrlaw.net

January 22, 2026

United Site Services Claims Processing Center
c/o KCC dba Verita Global
222 N Pacific Coast Highway, Suite 300
El Segundo, CA 90245

RE: 25-23630 MBK, *United Site Services, Inc.*

Dear Sir or Madam:

Enclosed please find the following on behalf of Charles County, Maryland:

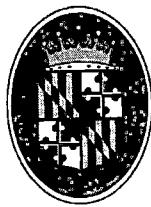
25-23630 MBK, <i>United Site Services, Inc.</i> :	One (1) Proof of Claim
25-23644 MBK, <i>United Site Services of Maryland, Inc.</i> :	Two (2) Proofs of Claim (1 Pre-Petition, 1 Administrative)

Please note that the administrative claim does not require an application of administrative expenses because it is being filed by a governmental unit pursuant to 11 U.S.C. § 503(B)(1)(D). Copies of the claims are enclosed. Please date-stamp and return the extra copies in the enclosed self-addressed stamped envelopes. Thank you for your assistance with this matter.

Thank you,

Nicole C. Kenworthy

Enclosures



CHARLES COUNTY GOVERNMENT
Department of Fiscal & Administrative Services

Jenifer Ellin
 Director

Phone 301-645-0570
 Fax 301-645-0505
 Email DFS@CharlesCountyMD.gov

Account Number: 5822
 Customer Number: 130254
 Name: UNITED SITE SERVICE OF MD INC
 Service Address: 4460 PRINTERS CT
Current Balance: 1283.66
Pending Payments: 0.00
Pending Adjustments: 0.00

Type	Date	Amount	Due Date	Balance
BILL	12/18/2025	1088.90	01/20/2026	1283.66
PAY	10/17/2025	-1947.65		194.76
PEN	10/16/2025	194.76		2142.41
BILL	09/12/2025	1947.65	10/14/2025	1947.65
PAY	07/02/2025	-1581.54		0.00
BILL	06/10/2025	1581.54	07/10/2025	1581.54
PAY	03/25/2025	-1636.96		0.00
BILL	03/11/2025	1478.74	04/10/2025	1636.96
PAY	01/15/2025	-1582.14		158.22
PEN	01/14/2025	158.22		1740.36
BILL	12/11/2024	1582.14	01/10/2025	1582.14
PAY	10/01/2024	-1773.27		0.00
BILL	09/10/2024	1773.27	10/10/2024	1773.27
PAY	07/02/2024	-372.62		0.00
BILL	06/10/2024	372.62	07/10/2024	372.62
PAY	04/02/2024	-91.86		0.00
BILL	03/11/2024	91.86	04/10/2024	91.86
PAY	01/10/2024	-92.56		0.00
BILL	12/11/2023	92.56	01/10/2024	92.56
PAY	09/26/2023	-376.72		0.00
BILL	09/08/2023	376.72	10/10/2023	376.72
PAY	07/06/2023	-257.22		0.00

Water & Sewer Billing Inquiry

BILL	06/06/2023	257.22	07/06/2023	257.22
PAY	03/29/2023	-64.19		0.00
BILL	03/06/2023	64.19	04/05/2023	64.19
PAY	01/11/2023	-134.26		0.00
BILL	12/06/2022	134.26	01/09/2023	134.26
PAY	09/21/2022	-79.55		0.00
BILL	09/02/2022	79.55	10/03/2022	79.55
PAY	06/22/2022	-322.04		0.00
BILL	06/02/2022	322.04	07/05/2022	322.04
PAY	03/29/2022	-518.36		0.00
BILL	03/02/2022	518.36	04/01/2022	518.36
PAY	12/30/2021	-617.87		0.00
BILL	12/07/2021	617.87	01/07/2022	617.87
PAY	09/30/2021	-706.54		0.00
BILL	09/01/2021	706.54	10/01/2021	706.54
PAY	06/23/2021	-3048.40		0.00
BILL	05/28/2021	3048.40	07/13/2021	3048.40
PAY	03/29/2021	-5914.90		0.00
BILL	03/05/2021	5914.90	04/20/2021	5914.90
PAY	01/12/2021	-4413.55		0.00
BILL	12/03/2020	4413.55	01/06/2021	4413.55
PAY	10/01/2020	-3972.60		0.00
BILL	09/02/2020	3972.60	10/02/2020	3972.60
PAY	07/13/2020	-3356.03		0.00
BILL	06/11/2020	3356.03	07/13/2020	3356.03
PAY	04/08/2020	-2801.94		0.00
BILL	03/06/2020	2801.94	04/08/2020	2801.94
PAY	01/14/2020	-3820.90		0.00
BILL	12/11/2019	3820.90	01/13/2020	3820.90
PAY	09/30/2019	-4147.27		0.00
BILL	09/09/2019	4147.27	10/09/2019	4147.27
PAY	07/02/2019	-3213.46		0.00
BILL	06/05/2019	3213.46	07/05/2019	3213.46
PAY	04/29/2019	-1708.09		0.00
PEN	04/05/2019	154.83		1708.09
BILL	03/05/2019	1548.25	04/04/2019	1553.26
PAY	01/23/2019	-50.08		5.01
PEN	01/15/2019	5.01		55.09

1/21/26, 3:58 PM

Water & Sewer Billing Inquiry

ADJ	01/14/2019	-5.01	50.08	
PEN	01/14/2019	5.01	55.09	
BILL	12/13/2018	50.08	01/14/2019	50.08
PAY	09/29/2018	-781.32	0.00	
BILL	09/13/2018	781.32	10/16/2018	781.32