

Fill in this information to identify the case:Debtor Wellmade Industries MFR. N.A LLCUnited States Bankruptcy Court for the: Northern District of Georgia
(State)Case number 25-58760**Modified 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 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. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1. Who is the current creditor?	Coosa Steel Corporation	
	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?	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Coosa Steel Corporation 98 Darlington Dr SW Rome, GA 30161	
	Contact phone	Contact phone
	Contact email <u>Dawn.Taylor@coosasteel.com</u>	Contact email
	Uniform claim identifier (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 MM / DD / YYYY	
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?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>8825</u> <u> </u> <u> </u>
7. How much is the claim? \$ <u>5115.84</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?	<p>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.</p> <p><u>Steel Sold</u></p>
9. Is all or part of the claim secured?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature or property: <div><input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>. <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____</div> Basis for perfection: _____ <small>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.)</small> Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount 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) _____ % <div><input type="checkbox"/> Fixed <input type="checkbox"/> Variable</div></div>
10. Is this claim based on a lease?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</div>
11. Is this claim subject to a right of setoff?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Identify the property: _____</div>



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.

☒ 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).

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).

\$ _____

☐ 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).

\$ _____

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

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?

☒ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ _____

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.

☐ 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 acknowledgement 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 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 11/06/2025
MM / DD / YYYY

/s/Earl Dean Saville
Signature

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

Name Earl Dean Saville
First name Middle name Last name

Title Owner, President

Company Coosa Steel Corporation
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Contact phone _____ Email _____



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 812-2297 | International (781) 575-4050

Debtor: 25-58760 - Wellmade Industries MFR. N.A LLC District: Northern District of Georgia, Atlanta Division		
Creditor: Coosa Steel Corporation 98 Darlington Dr SW Rome, GA, 30161 Phone: Phone 2: Fax: Email: Dawn.Taylor@coosasteel.com	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party: Creditor	
	Other Names Used with Debtor:	
Amends Claim: No Acquired Claim: No		
Basis of Claim: Steel Sold	Last 4 Digits: Yes - 8825	Uniform Claim Identifier:
Total Amount of Claim: 5115.84	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): No Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Earl Dean Saville on 06-Nov-2025 8:46:38 a.m. Pacific Time Title: Owner, President Company: Coosa Steel Corporation		

Coosa Steel



P.O. Box 187
Rome, GA 30162-0187
Ph: (706) 235-7011
Fax: (706) 232-1049

INVOICE

Invoice #: 505646
Invoice Date: 05/07/25
Delivery #: 0465017
Page: 1

Bill to:
WELLMADE INDUSTRIES MFR NA LLC
1 WELLMADE DR
CARTERSVILLE,, GA 30121

Ship to:
WELLMADE INDUSTRIES MFR N
1 WELLMADE DR
CARTERSVILLE,, GA 30121

Customer #	Customer Purchase Order #	Terms	Taxable	Salesperson	5	
358825	250501-31	1/2% 10/N 30	N	STEPHEN		
Ship Date	Ordered By	Carrier				
05/07/25	Michael Detherage	COOSA STEEL				
Ln#	Quantity	Description	Weight	Unit Price	U	Extended Price
1	2	C 10 X 20 240"	800	375.0000	EA	750.00
2	2	C 10 X 20 480"	1600	750.0000	EA	1500.00
Total Lbs:			2400			
Comments: Discount of 11.25 if paid by 05/17/25				Subtotal:		2250.00
				Fuel Surcharge:		21.60
				7.000% Tax:		0.00
				TOTAL:		2271.60

I (We) agree to pay reasonable collection fees & interest should it become necessary to collect payment. 1 1/2% per month service and carrying charge shall be charged on all balances over 30 days old. Annual percentage rate 18%.

Original Invoice

Payments other than cash, check, ACH, wire transfer will incur a 4% convenience fee.



Coosa

Steel

P.O. Box 187
Rome, GA 30182-0187
Ph: (706) 235-7011
Fax: (706) 232-1049

Ship to:

WELLMADE INDUSTRIES MFR NA LLC
1 WELLMADE DR
CARTERSVILLE, GA 30121

Bill to:

WELLMADE INDUSTRIES MFR NA LLC
1 WELLMADE DR
CARTERSVILLE, GA 30121

Signature by customer verifies material delivered is correct and in good condition. Claims or shortages must be reported within 48 hours of receipt. This material cannot be returned without our written permission. Returned material subject to handling charge. Listed articles are received as shown unless otherwise noted.

Contact
Phone
Ship Terms

Michael Detherage
503 680 1661

Ship Via COOSA STEEL

Delivery Receipt

Order #: 0465017
Order Date: 05/02/25
Page: 1

Customer #	Customer Purchase Order #	Date Required	Terms	Taxable	FOB Point	Salesperson	
358825	250501-31	05/02/25	1/2% 10/N 30	N		STEPHEN	
Ln #	Quantity	UM	Description	Weight	Unit Price	UM	Extended Price
	2	EA	CHANNEL 10 X 20 X 240" (WHITE)	800			
	2	EA	CHANNEL 10 X 20 X 480" (WHITE)	1600			
				Total Lbs:	2400		
Special Instructions:							
Subtotal:							0.00
Fuel Surcharge:							0.00
7.000% Tax:							0.00
Total:							0.00

Payments other than cash, check, ACH, wire transfer will incur a 4% convenience fee.
I (We) agree to pay reasonable collection fees & interest should it become necessary to collect payment.
1-1/2% per month service and carrying charge shall be charged on all balances over 30 days old. Annual percentage rate 18%.

Print Name

FLORIAN SIVDAI

Signature

[Signature]

Coosa Steel



P.O. Box 187
Rome, GA 30162-0187
Ph: (706) 235-7011
Fax: (706) 232-1049

INVOICE

Invoice #: 506246
Invoice Date: 05/20/25
Delivery #: 0465688
Page: 1

Bill to:

WELLMAC INDUSTRIES MFR NA LLC
1 WELLMAC DR
CARTERSVILLE,, GA 30121

Ship to:

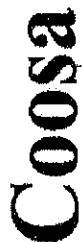
WELLMAC INDUSTRIES MFR N
1 WELLMAC DR
CARTERSVILLE,, GA 30121

Customer #	Customer Purchase Order #	Terms	Taxable	Salesperson	8	
358825	250515-32	1/2% 10/N 30	N	DANIEL		
Ship Date	Ordered By	Carrier				
05/20/25	SCOTT T	COOSA STEEL				
Ln#	Quantity	Description	Weight	Unit Price	U	Extended Price
1	24	RT 3 X 1-1/2 X 11 GA 288"	2004	88.0000	EA	2112.00
2	24	SQUARE TUBE 1" X 11 GA X 240"	689	29.5000	EA	708.00
Total Lbs:			2693			
Comments: Discount of 14.10 if paid by 05/30/25				Subtotal:		2820.00
				Fuel Surcharge:		24.24
				7.000% Tax:		0.00
				TOTAL:		2844.24

I (We) agree to pay reasonable collection fees & interest should it become necessary to collect payment. 1 1/2% per month service and carrying charge shall be charged on all balances over 30 days old. Annual percentage rate 18%.

Original Invoice

Payments other than cash, check, ACH, wire transfer will incur a 4% convenience fee.



Steel

**P.O. Box 187
Rome, GA 30162-0187
Ph: (706) 235-7011
Fax: (706) 232-1049**

Ship to:

1 WELLMADE DR
CARTERSVILLE, GA 30121

WELLMAN INDUSTRIES, INC.
1 WELLMAN DR
CARTERSVILLE, GA 30121

Signature by customer verifies material delivered is correct and in good condition. Claims or shortages must be reported within 48 hours of receipt. This material cannot be returned without our written permission. Returned material subject to handling charge. Listed articles are received in good order unless marked otherwise.

Delivery Receipt

Order #: 0465688
Order Date: 05/16/25
Page: 1

Contact SCOTT T
phone 503 680 1661

Ship Via COOSA STEEL

Customer #		Customer Purchase Order #		Date Required		Terms		Taxable		FOB Point		Ship Via		COOSA FIELD		Salesperson		8				
358825		250515-32		05/16/25		1/2%		N								DANIEL						
Ln #	Quantity	UM	Description															Weight	Unit Price	UM	Extended Price	
24	EA	RECT TUBE 3 X 1-1/2 X 11 GA X 288"	/cc															2004				
		BLUE																				
24	EA	SQUARE TUBE 1" X 11 GA X 240"	D															689				
		BLUE																				
Total Lbs:													2693									
																						0.00

Special Instructions:

Subtotal:	
Fuel Surcharge:	
7.000% Tax:	
Total:	

Total:

ACH wire transfer will incur a 4% convenience fee.

Payments other than cash, check, ACH, wire transfer will incur a 4% convenience fee.
 I (We) agree to pay reasonable collection fees & interest should it become necessary to collect payment.
 1-1/2% per month service and carrying charge shall be charged on all balances over 30 days old. Annual
 percentage rate 18%.

Print Name _____

Signature