

**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.**

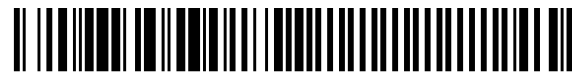
**Filers must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, 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?	<u>48Forty Solutions LLC</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?	<b>Where should notices to the creditor be sent?</b> <u>48Forty Solutions LLC</u> <u>Accounts Receivable</u> <u>11740 Katy Freeway</u> <u>Suite 1200</u> <u>Houston, TX 77079, United States</u>  Contact phone <u>346-795-7448</u> Contact email <u>julio.villalta@48forty.com</u>  Uniform claim identifier (if you use one): _____	<b>Where should payments to the creditor be sent? (if different)</b>  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 _____ 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? ☒ 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? \$ 5,791.04. 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.

Supplies: Pallets

9. Is all or part of the claim secured? ☒ No  
☐ Yes. The claim is secured by a lien on property.  
**Nature or property:**  
☐ Real estate: If the claim is secured by the debtor's principle 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:** \$ \_\_\_\_\_  
**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) \_\_\_\_\_ %  
☐ 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)?

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 10/23/2025  
MM / DD / YYYY

/s/Julio Villalta  
Signature

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

Name Julio Villalta  
First name Middle name Last name

Title Credit Manager

Company 48Forty Solutions llc  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 11740 Katy Freeway, Suite 1200, Houston, TX, 77079, United States

Contact phone 346-795-7448 Email julio.villalta@48forty.com



# Verita (KCC) ePOC Electronic Claim Filing Summary

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

<b>Debtor:</b> 25-58760 - Wellmade Industries MFR. N.A LLC <b>District:</b> Northern District of Georgia, Atlanta Division		
<b>Creditor:</b> 48Forty Solutions LLC Accounts Receivable 11740 Katy Freeway Suite 1200 Houston, TX, 77079 United States <b>Phone:</b> 346-795-7448 <b>Phone 2:</b>  <b>Fax:</b>  <b>Email:</b> julio.villalta@48forty.com	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded <b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> No <b>Related Claim Filed By:</b>	
	<b>Filing Party:</b>	
<b>Other Names Used with Debtor:</b>	<b>Amends Claim:</b> No <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> Supplies: Pallets	<b>Last 4 Digits:</b> No	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 5,791.04	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> No <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> <b>Value of Property:</b> <b>Annual Interest Rate:</b> <b>Arrearage Amount:</b> <b>Basis for Perfection:</b> <b>Amount Unsecured:</b>	
<b>Submitted By:</b> Julio Villalta on 23-Oct-2025 2:03:36 p.m. Pacific Time <b>Title:</b> Credit Manager <b>Company:</b> 48Forty Solutions llc <b>Optional Signature Address:</b> 11740 Katy Freeway Suite 1200 Houston, TX, 77079 United States <b>Telephone Number:</b> 346-795-7448 <b>Email:</b> julio.villalta@48forty.com		

**Remittance Address:****48forty Solutions, LLC**

P.O. Box 675225

Dallas, TX 75267-5225 US

Phone: 346-980-4577

[www.48forty.com](http://www.48forty.com)

# Invoice

INVOICE NO

I2110760

Date

12/19/2024

Customer ID

WEINCAR001

Order Id

303-0008848

**Bill To:**

Wellmade Industries MFR. N.A LLC

19150 SW 125th CT.

Tualatin, OR 97062-7228

**Ship To:**

Wellmade Industries MFR. N.A LLC

1 Wellmade Dr

Cartersville, GA 30121-7208

Delivery Date	Ship Via	Caller Name	Payment Terms	Service Provider
12/18/2024	Plant Truck		Net 60	303:Adairsville, GA

Line	Product	P.O. Number	Qty Ordered	Qty Shipped	UoM	Unit Price (USD)	Ext. Price
1	62x40 #683	241212-1	200	121	EA	\$17.64	\$2,134.44

Sales Total \$2,134.44

Total Tax \$0.00

**Total (USD)** \$2,134.44**ACH Payments**

FOR ACH PAYMENTS:

PNC Bank, N.A.

WIRE – 043000096

ACH – 031207607

Bank Account #: 8176698816

Remittance e-mail address for customers:

[wires@48forty.com](mailto:wires@48forty.com)**Messages**

Notice: Effective Dec. 1, 2024, our banking details have changed.



# Proof Of Delivery

**48 FORTY SOLUTIONS**  
2507 SR-140  
White, GA 30184  
Phone: 770-773-3054

**Bill of Lading**

Sales Order No. 303-0008848  
Customer ID WEINCAR001  
Payment Terms Net 60  
Order Type Delivery  
Outbound Trailer No. B4812

**Ship To:**  
Wellmade Industries MFR, N.A LLC  
1 Wellmade Dr  
Cartersville, GA 30121-7208

**Ship To:**  
Wellmade Industries MFR, N.A LLC  
1 Wellmade Dr  
Cartersville, GA 30121-7208

**Scheduled Delivery Date** 12/18/2024  
**Service Provider** Adamsville, GA  
**Account Name** Wellmade Industries MFR, N.A LLC

**Ship Via** Plant Truck  
**Caller Name**  
**Caller Phone** 503-680-1651  
**Drop-Off Trailer #**

Line	Product	PO Line	Load	UoM	Weight
303-0008848_1	New Pallet-Other than 48 x 40_52x40 #683	241212-1	200	EA	10000

**Receiving Information**  
(200-79 = 121 pcs received 12/18/2024)  
TPO IN  
12/18/24  
PHW 3

**Total Shipment Weight** 10000

**Driving Directions**

**Comments**

**Delivery Date** 12/18/24

**Date Received**

**QR Code**

**Driver Name** C. C. W. C.  
**Delivery Trailer** B4812 L  
**Picked Up Trailer**

**Customer Name/Signature**  
Print Name: *Samuel Turner*  
Sign Name: *Samuel Turner*

If you have any questions on this invoice please call the shipping location at 770-773-3054.



Remittance Address:  
**48forty Solutions, LLC**  
P O BOX 675225  
Dallas, TX 75267-5225 US  
Phone: 346-980-4577  
www.48forty.com

## Credit Memo

Credit Memo No	I2044220C1
Date	12/5/2024
Order Type	Credit Memo
Customer ID	WEINCAR001
Payment Terms	Net 60

### Bill To:

Wellmade Industries MFR. N.A LLC  
19150 SW 125th CT.  
Tualatin, OR 97062-7228

### Ship To:

Wellmade Industries MFR. N.A LLC  
1 Wellmade Dr  
Cartersville, GA 30121-7208

Original Invoice Number	Original Invoice Date	Rebill Number	Delivery Date	Site
I2044220	8/20/2024			303:Adairsville, GA

Product	P.O. Number	Product Qty	Units	Unit Price (USD)
50x40 #608	WFCIG240802	140		\$15.91

Sales Total	\$2,227.40
Total Tax	\$0.00
<b>Total (USD)</b>	<b>\$2,227.40</b>

### ACH Payments

FOR ACH PAYMENTS:  
PNC Bank, N.A.  
WIRE – 043000096  
ACH – 031207607  
Bank Account #: 8176698816  
Remittance e-mail address for customers:  
[wires@48forty.com](mailto:wires@48forty.com)

### Messages

Notice: Effective Dec. 1, 2024, our banking details have changed.



**Remittance Address:****48forty Solutions, LLC**

P.O. Box 675225

Dallas, TX 75267-5225 US

Phone: 346-980-4577

[www.48forty.com](http://www.48forty.com)

# Invoice

INVOICE NO

I1892804

Date

11/13/2023

Customer ID

WEINCAR001

Order Id

303-0003689

**Bill To:**

Wellmade Industries MFR. N.A LLC

19150 SW 125th CT.

Tualatin, OR 97062-7228

**Ship To:**

Wellmade Industries MFR. N.A LLC

1 Wellmade Dr

Cartersville, GA 30121-7208

Delivery Date	Ship Via	Caller Name	Payment Terms	Service Provider
11/10/2023	Plant Truck		Net 30	303:Adairsville, GA

Line	Product	P.O. Number	Qty Ordered	Qty Shipped	UoM	Unit Price (USD)	Ext. Price
1	50x40 Skid #322	1027230001	400	400	EA	\$14.71	\$5,884.00

Sales Total \$5,884.00

Total Tax \$0.00

**Total (USD)** \$5,884.00**ACH Payments**

FOR ACH PAYMENTS:

PNC Bank, N.A.

WIRE – 043000096

ACH – 031207607

Bank Account #: 8176698816

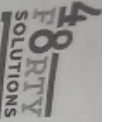
Remittance e-mail address for customers:

[wires@48forty.com](mailto:wires@48forty.com)**Messages**

Notice: Effective Dec. 1, 2024, our banking details have changed.



# Proof Of Delivery



2427 Hwy 140  
Adairsville, GA 30103  
Phone: 770-773-3054

## Bill of Lading

Sales Order No. 303-0003689  
Customer ID WEINCAR001  
Payment Terms Net 30  
Order Type Delivery  
Manual BOL No 1027230001  
Outbound Trailer No. 53-7733

### Bill To:

Wellmade Industries MFR, N.A LLC  
19150 SW 125th CT,  
Tualatin, OR 97062-7228

### Ship To:

Wellmade Industries MFR, N.A LLC  
1 Wellmade Dr  
Cartersville, GA 30121-7208

Scheduled Delivery Date	Scheduled Time	Service Provider	Account Name
11/10/2023		Adairsville, GA	Wellmade Industries MFR, N.A LLC

Ship Via	Caller Name	Caller Phone	Drop-Off Trailer #
Plant Truck		503-680-1661	537733

Line	Product	Customer PO#	PO Line	Load QTY	UoM	Weight
303-0003689-2	Other than 48 x 40, 50x40	1027230001		400	EA	0
	Skid #322					

### Receiving Information

Total Shipment Weight
0

### Driving Directions

### Comments

### Delivery Date

11/10/23

### Date Received

11/10/23



### Driver Name

Billy Boston  
Delivery Trailer 537733-1

### Customer Name/Signature

Print Name: Hannah Seals  
Sign Name: *Hannah Seals*

Picked Up Trailer:

If you have any questions on this invoice please call the shipping location at 770-773-3054.