

Fill in this information to identify the case:

Debtor 1 WELLMADE FLOOR COVERINGS INTERNATIONAL, INC

Debtor 2 \_\_\_\_\_

(Spouse, if filing) \_\_\_\_\_

United States Bankruptcy Court for the: NORTHERN District of GEORGIA

(State)

Case number 25-58764

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

## 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>American Express National Bank</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?		Where should payments to the creditor be sent? (if different)
	<u>Becket and Lee LLP</u> Name		<u>Becket and Lee LLP</u> Name
	<u>PO Box 3001</u> Number Street		<u>PO Box 3001</u> Number Street
	<u>Malvern</u> City	<u>PA</u> State	<u>19355-0701</u> ZIP Code
	Contact phone <u>610-228-2570</u>		Contact phone <u>610-228-2570</u>
	Contact email <u>proofofclaim@becket-lee.com</u>		Contact email <u>payments@becket-lee.com</u>
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? _____	



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**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>1 0 0 3</u>
7.	How much is the claim?	\$204.13 <span style="float: right;"><b>Does this amount include interest or other charges?</b></span> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <span style="float: right;">Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).</span>	
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 healthcare information.  <u>CREDIT CARD</u>	
9.	Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes.	The claim is secured by a lien on property.  <b>Nature of property:</b> <input type="checkbox"/> Real estate. <span style="float: right;">If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this Proof of Claim.</span>  <input type="checkbox"/> Motor vehicle _____  <input type="checkbox"/> Other. Describe: _____  <b>Basis for perfection:</b> _____ 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.)  <b>Value of property:</b> \$ _____  <b>Amount of the claim that is secured:</b> \$ _____ <b>Amount of the claim that is unsecured:</b> \$ _____ <span style="float: right;">(The sum of the secured and unsecured amounts should match the amount in line 7.)</span>  <b>Amount necessary to cure any default as of the date of the petition:</b> \$ _____ <b>Annual Interest Rate (when case was filed)</b> _____ % <input 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: _____

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12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No  
☐ Yes. Check one:

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.

- ☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).  
☐ 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.

**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 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 9/17/2025

MM / DD / YYYY

Sandra K. Curtin

Signature

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

Name	Sandra Crystal	K. Jones	Curtin Oswald
	First Name	Middle Name	Last Name

Title Attorney/Agent for Creditor

Company Becket and Lee LLP

Identify the corporate servicer as the company if the authorized agent is a servicer.

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Address

PO Box 3001

Number Street

Malvern

City

PA 19355-0701

State ZIP Code

Contact phone

610-228-2570

Email proofofclaim@becket-lee.com

BECKET & LEE LLP  
ATTORNEYS AT LAW

16 GENERAL WARREN BOULEVARD  
P.O. BOX 3001  
MALVERN, PA 19355

THOMAS A. LEE, III \*D  
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KENNETH W. KLEPPINGER \*  
DAWN S. OSMAN \*  
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CRYSTAL JONES OSWALD \*  
THOMAS F. GALLAGHER \*

(610) 644-7800  
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E-MAIL: \_\_\_\_\_

ALANE A. BECKET, OF COUNSEL \*  
WILLIAM J. BECKET, OF COUNSEL

\* ALSO MEMBER NJ BAR  
D ALSO MEMBER FL BAR  
+ ALSO MEMBER CA BAR

Re: **PROOF OF CLAIM**

Enclosed please find this Proof of Claim for immediate filing. Please file stamp the extra copies provided and return them in the enclosed pre-addressed envelope(s). If there is an error in the bankruptcy number, or any other defect on the Proof of Claim, please also return the erroneous document(s) in the envelope provided.

Please do not hesitate to contact our office if we may assist you in the processing of these documents. Thank you for your cooperation.

Very truly yours,

BY: \_\_\_\_\_

*Tom Wisk*  
**Tom Wisk**

BECKET & LEE LLP  
16 General Warren Blvd  
Malvern PA 19355  
610-228-2570  
Email: [proofofclaim@becket-lee.com](mailto:proofofclaim@becket-lee.com)

**Amazon Business Prime Card**

WELLMADE FLOORS

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Closing Date 08/22/25 Next Closing Date 09/21/25

Account Ending 003

amazon business

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Customer Care: 1-833-674-7268  
 TTY: Use Relay 711  
 Website: americanexpress.com

**Payment Options:**

**Total Balance** **\$267.03**

Pay the full balance, adjusted for payments, returns, credits and transactions since the last statement closing date. Includes Payment Terms Balance.

**Standard Balance** **\$267.03**

Pay this amount to avoid interest charges on future purchases. Standard Balance means Total Balance, excluding the current Payment Terms Balance.

**Minimum Payment Due** **\$105.00**

Amount to pay in order to keep your account in good standing. If you selected Payment Terms for any transactions you must still pay the minimum amount due. Includes the past due amount of \$35.00.

**Payment Due Date** **09/16/25**

**Amazon Rewards Points**

Earned 07/01 - 07/31 **780**

Total Available as of 07/31 **30,433**

Points Earned this period are pending until charges paid in full and all your accounts are in good standing.

For more details about Rewards, please visit [americanexpress.com/rewardsinfo](http://americanexpress.com/rewardsinfo)

**Account Summary**

Previous Balance	\$171.01
Payments/Credits	-\$67.89
New Standard Bal. Charges	+\$128.91
New Payment Terms Charges	+\$0.00
Fees	+\$35.00
Interest Charges	+\$0.00

<b>Total Balance</b>	<b>\$267.03</b>
<b>Minimum Payment Due</b>	<b>\$105.00</b>

Credit Limit	\$35,000.00
Available Credit	\$34,732.97

Cash Advance Limit	\$0.00
Available Cash	\$0.00

Days in Billing Period: 31

See page 2 for important information about your account.

Your account is cancelled.

Please refer to the **IMPORTANT NOTICES** section.

**Payment Terms Balance Summary**

Includes purchases within the Total Balance that are interest-free. Purchases are grouped by billing cycle. All Payment Terms purchases must be paid in full by their respective due dates to avoid future interest charges. After the due date, the corresponding amount will be shown in your Standard Balance.

**Total** **\$0.00**

↓ Please fold on the perforation below, detach and return with your payment ↓

**Payment Coupon**

Do not staple or use paper clips

**Pay by Computer**

[americanexpress.com/business](http://americanexpress.com/business)

**Pay by Phone**

1-800-472-9297

Account Ending 003

Enter 15 digit account # on all payments. Make check payable to American Express.

MING CHEN  
 WELLMADE FLOORS  
 19150 SW 125TH CT  
 TUALATIN OR 97062

Payment Due Date	<b>09/16/25</b>	Total Balance	<b>\$267.03</b>
		Standard Balance	<b>\$267.03</b>
		Minimum Payment Due	<b>\$105.00</b>

See reverse side for instructions on how to update your address, phone number, or email.

AMERICAN EXPRESS  
 PO BOX 60189  
 CITY OF INDUSTRY CA 91716-0189

\$ \_\_\_\_\_  
 Amount Enclosed





**Amazon Business Prime Card**  
WELLMADE FLOORS  
MING CHEN  
Closing Date 08/22/25

amazon business

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Account Ending 1003



**Customer Care & Billing Inquiries**  
International Collect  
Cash Advance at ATMs Inquiries  
Large Print & Braille Statements

1-833-674-7268  
1-623-492-3344  
1-800-CASH-NOW  
1-833-674-7268

**Hearing Impaired**  
Online chat at [americanexpress.com](https://americanexpress.com) or use Relay dial 711 and 1-833-674-7268



Website: [americanexpress.com](https://americanexpress.com)

**Customer Care  
& Billing Inquiries**  
P.O. BOX 981535  
EL PASO, TX  
79998-1535

**Payments**  
PO BOX 60189  
CITY OF INDUSTRY  
CA  
91716-0189

## Payments and Credits

### Summary

	Total
Payments	\$0.00
Credits	-\$67.89
<b>Total Payments and Credits</b>	<b>-\$67.89</b>

### Detail

\*Indicates posting date

Credits	Amount
08/08/25* AMAZON SHOP WITH POINTS CREDIT	-\$67.89

## New Charges

### Summary

	Standard Balance Charges	Payment Terms Charges	Total
<b>Total New Charges</b>	<b>\$128.91</b>	<b>\$0.00</b>	<b>\$128.91</b>

### Detail



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Card Ending 1003

			Amount
07/31/25	AMAZON MARKETPLACE NA PA AMZN.COM/BILL	AMZN.COM/BILL WA	\$40.18
08/06/25	AMAZON.COM GENERAL MERCHANDISE	AMZN.COM/BILL WA	\$15.87
08/06/25	AMAZON.COM GENERAL MERCHANDISE	AMZN.COM/BILL WA	\$4.97
08/08/25	AMAZON MARKETPLACE PAYMENTS AMZN.COM/BILL	AMZN.COM/BILL WA	\$67.89

## Fees

	Amount
08/16/25 Late Payment Fee	\$35.00
<b>Total Fees for this Period</b>	<b>\$35.00</b>

Continued on reverse

**Interest Charged**

	Amount
<b>Total Interest Charged for this Period</b>	<b>\$0.00</b>

**About Trailing Interest**

You may see interest on your next statement even if you pay the new balance in full and on time and make no new charges. This is called "trailing interest". Trailing interest is the interest charged when, for example, you didn't pay your previous balance in full. When that happens, we charge interest from the first day of the billing period until we receive your payment in full. You can avoid paying interest on purchases by paying your balance in full and on time each month. Please see the "When we charge interest" sub-section in your Cardmember Agreement for details.

**2025 Fees and Interest Totals Year-to-Date**

	Amount
Total Fees in 2025	\$35.00
Total Interest in 2025	\$0.00

**Interest Charge Calculation**

Your Annual Percentage Rate (APR) is the annual interest rate on your account.  
Variable APRs will not exceed 29.99%.

	Annual Percentage Rate	Balance Subject to Interest Rate	Interest Charge
Purchases	29.99% (v)	\$0.00	\$0.00
Cash Advances	29.99% (v)	\$0.00	\$0.00
<b>Total</b>			<b>\$0.00</b>
(v) Variable Rate			

**American Express National Bank****c/o Becket and Lee LLP  
Attorneys/Agent for Creditor****PO Box 3001  
Malvern , PA 19355-0701**

Bankruptcy Information	
Case Number:	25-58764
District:	NORTHERN DISTRICT OF GEORGIA ATLANTA DIVISION
Chapter:	11
Petition Date:	08/04/2025
Debtor(s) Name:	WELLMAD FLOOR COVERINGS INTERNATIONAL, INC
Claim Balance Itemization	
Debtor(s) Name:	WELLMAD FLOOR COVERINGS INTERNATIONAL, INC
Debtor(s) SSN:	***-**-8425
Debtor Address:	19150 SW 125TH CT TUALATIN, OR 97062
Account Number:	*****1003
Name of entity from whom the creditor purchased the account : N/A	
Name of entity to whom the debt was owed at the time of the last transaction by the account holder: American Express	
Account Type:	CREDIT CARD
Open Date:	09/24/2024
Charge Off Date:	08/2025
Last Payment Date:	07/2025
Last Transaction Date:	08/2025
Principal:	\$211.19
Interest:	\$0.00
Fees:	\$0.00
Total:	\$211.19
The attached statement(s) of account was generated from the American Express billing system and reflects the current pre-petition balance. The statement(s) may not have been sent to the debtor.	