

March 14, 2023

Province, LLC
c/o BG Law LLP
300 S. 4th Street, Ste 1550
Las Vegas, NV 89101

2023 MAR 16 P 4:20
U.S. BANKRUPTCY COURT
MARY A. DONOFRIO, CLERK

LLH

[submitted electronically via email on March 14, 2023, and via USPS with delivery confirmation, and CC to United States Bankruptcy Court for the District of Nevada]

**RE: Opposition to Notice of Ninth Omnibus Objection - Case No. 22-11824-abl
Front Sight Management LLC by Michael Chapman – Claim #459-1**

To whom it may concern,

My name is Michael Chapman, and I am a claimant in a Chapter 11 case in the United States Bankruptcy Court for the District of Nevada – Case No. 22-11824-abl regarding Front Sight Management LLC (“Debtor”) and I have filed claim # 459-1 on October 10, 2022 in the amount of \$8,037.00 for actual monies that I paid to the Debtor from 2008 – 2019 in exchange for various Lifetime Memberships.

I am in receipt of the Notice of Ninth Omnibus Objection (1) Reducing and allowing certain member claims and (2) disallowing and expunging certain other member claims from Province, LLC – who is serving as the Liquidating Trustee of the Front Sight Creditors Trust. The Trustee seeks relief from me as a claimant by reducing the amount of my claim from \$8,037.00 as submitted to allow \$3,592.00 as a general unsecured claim. My claim amount solely represents the actual monies paid to the Debtor for memberships and does not include any value from member benefits or rewards, whether received or promised. Hence, my original claim does not exceed the amount paid to the Debtor and is legitimate.

I OBJECT TO THE RELIEF that the Trustee has requested, as the proposed relief amount is substantially less than the monies that I as a Claimant actually paid the Debtor. The Trustee’s information on my payment history with the Debtor is partially correct, as I did make a total of \$3,952.00 in payments between 2012 – 2019. However, the Trustees’ proposed claim amount paid excludes two payments totaling \$4,445.00 that the Debtor received in 2008, but who is now claiming that they do not show receipt of payment as part of their books and records. All payments that I have remitted to the Debtor for memberships have been made directly to the Debtor’s administrative personnel either in person, via phone or website, and no payments have been made to third parties or other members.

I am providing my opposition to both the Trustee and the Court in written form to be considered as part of the hearing scheduled for April 13, 2023, as I will not be able to attend the hearing and would like my opposition to the relief and evidence that I submit to be considered.

I am including in this packet the following relevant documents as evidence of my claim, including:

- Copy of a payment receipt for \$2,450.00 on April 1, 2008 that shows the Debtor’s company name and level of lifetime membership offered, which was provided to me by Debtors’ administrative personnel upon in-person payment via credit card at Debtor’s training facility in Pahrump, NV. This document represents indisputable proof of receipt of payment directly from the Debtor itself.

- Copies of letters to Chase Bank and their response to my request for credit card statements that reflect payments to Debtor in April 1 and October 20, 2008; however, Chase Bank was unable to fulfill the statement request as the dates of the transactions are beyond their records retention policy of six years.
- Copies of Front Sight Lifetime Membership confirmation letters personally signed by Debtors' company President (Ignatius Piazza) that verify my membership purchases after Debtor received the associated payments; and some of which highlight the payment amount required to participate in the membership at the time of sale.
- Copy of letter from Claimant to the Debtor on December 21, 2013, as directed after a phone call with the Debtor's administrative personnel, requesting proper credit for the lifetime membership that I purchased on October 20, 2008 for \$1,995.00 and the associated benefits that were promised. This letter demonstrates that the Debtor has a history of inaccurate books and records both as it pertains to membership accounts and payments and my member account in particular, along with this specific transaction that ultimately was corrected.

These supporting documents will validate that the total amount paid to the Debtor as listed in the Trustees' records is incorrect and that the amount that I submitted in my original claim filed with the Court is accurate. They also reflect my best efforts to provide all available documentation on my payment history despite the number of years since payment was remitted to the Debtor.

I will be satisfied with a reaffirmed claim amount of \$8,037.00 that reflects the total monies paid to the Debtor as the basis for the Chapter 11 liquidation process managed by the Trustee, and a settlement amount that is calculated based on a payout ratio from the settlement fund against this claim amount that is applied to all unsecured lifetime membership claimants per the Chapter 11 bankruptcy plan.

Claimant's Membership and Payment History with Debtor

I filed claim # 459-1 for my lifetime memberships payments to Front Sight as part of its Chapter 11 bankruptcy case # 22-11824-abl. I was a lifetime member and a continuous member in good standing since April 2008 until the recent discharge of memberships as part of the Chapter 11 proceedings.

I have paid Front Sight a total of \$8037.00 for various lifetime memberships and / or upgrades between 2008 and 2019. A listing of these payment transactions and the dates that I submitted them to Front Sight, either in person or via phone or their website as part of a marketing email, is provided below:

| | | |
|-----------------------|--------------------|-------------------------------------------------------------|
| ▪ April 1, 2008 | \$2,450.00 | Legacy First Family Lifetime Membership |
| ▪ October 20, 2008 | \$1,995.00 | Diamond Lifetime Membership Upgrade |
| ▪ November 23, 2012 | \$ 299.00* | Ambassador Lifetime Membership Upgrade |
| ▪ July 6, 2015 | \$ 298.00* | Patron Plus Lifetime Membership Upgrade |
| ▪ Jun 17, 2019 | <u>\$2,995.00*</u> | Custom President / Lifetime Private Training for two |
| Total Payments | \$8,037.00 | <i>* Note: payment amount already validated by Trustee.</i> |

For clarification on the two payments in 2008 (\$2,450.00 and \$1,995.00) that are not captured in the Debtors books and records per the Trustee, see below:

- Payment of \$2,450.00 in April 2008 was made in person at Debtor's training facility as part of a promotion where Debtor offered two Legacy First Family lifetime memberships for a single payment of \$4,900.00 – see enrollment form and receipt for confirmation of this offer.
- The Debtor allowed two training attendees to split the cost of the memberships and pay \$2,450.00 each for individual memberships only if we signed up that day and in person.

- In the Payment Method section, you can see that I paid \$2,450.00 via Mastercard ending in 9280; and another member also paid \$2,450.00 using a mix of Visa credit card and \$450.00 cash. My claim is only for the \$2,450.00 that I paid directly to the Debtor and not the entire \$4,900.00 as listed on the enrollment form / receipt.
- Payment of \$1,995.00 in October 2008 was made via phone to Debtor's administrative office as part of a promotion where Debtor offered a Diamond lifetime membership for a single payment of \$1,995.00 – see membership confirmation letter and promotional flyer for confirmation of this offer. Debtor did not accept payments via website in 2008 and all payment transactions were completed either over the phone or in person at the Pahrump NV training facility.
- Credit card statements for both payments are difficult to secure given these payments to the Debtor go back over 15 years. I attempted to secure copies of credit card statements from Chase Bank, but they also do not retain copies of statements beyond six years (see copy of Chase Bank letter). However, the receipts and confirmation letters that I provided should suffice as proof of payment since they were issued by Debtor's administrative personnel and/or signed by the President of the Debtor's company and list my name and the membership offered.

I am providing copies of my paid memberships per the letters that I received from Front Sight after making payment. You should be able to verify these memberships and payments using the attached letters and membership ID numbers, along with the supporting documentation that I provided. It is unreasonable for either the Debtor or Trustee to expect that consumers be required to retain credit card documents longer than regulated financial institutions. The fact that I was a lifetime member in good standing until bankruptcy discharge validates that all payments were received by Debtor as listed.

My current contact information is listed below:

Michael Chapman
4702 Ashby CT
Ellicott City, MD 21042
(410) 730-6885 home (570) 350-2454 mobile
chapmanmac@aol.com email

Previous addresses that were associated with my Front Sight memberships include the following:

| | | |
|-----------------------------------------|----------------------------------------------|------------------------------------------|
| 7148 Iroquois St Tobyhanna, PA 18466 | 10203 Rutland Round Rd Columbia, MD 21044 | 7911 Maple Lawn Blvd Fulton, MD 20759 |
|-----------------------------------------|----------------------------------------------|------------------------------------------|

I respect the bankruptcy process and the rights and relief that the Debtor is entitled to, but it is important for both the Debtor and Trustee to respect the Consumer and accurately account for all monies received in order to achieve the proper outcomes for Claimants during bankruptcy proceedings.

Hopefully, the attached packet will provide you with sufficient proof of claim to support my objection to the Trustee's proposed relief for anything less than the total monies I paid to the Debtor. Do contact me directly if you need anything else to validate my claim amount for this bankruptcy proceeding.

Regards,



Michael Chapman

Fill in this information to identify the case:

| | |
|---------------------------------|----------------------------|
| Debtor 1 | FRONT SIGHT MANAGEMENT LLC |
| Debtor 2 (Spouse, if filing) | |
| United States Bankruptcy Court | District of Nevada |
| Case number: | 22-11824 |

FILED
 U.S. Bankruptcy Court
 District of Nevada
 10/10/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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? | Michael Chapman | |
| | 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) |
| | Michael Chapman Name 4702 Ashby Ct Ellicott City, MD 21042-6143 Contact phone 5703502454 Contact email chapmanmac@aol.com Uniform claim identifier for electronic payments in chapter 13 (if you use one): | Name 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

| | |
|-------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>6. Do you have any number you use to identify the debtor?</p> | <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____</p> |
| <p>7. How much is the claim?</p> | <p>\$ <u>8037.00</u></p> <p>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).</p> |
| <p>8. What is the basis of the claim?</p> | <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 healthcare information. Lifetime memberships and upgrades sold by debtor in exchange for credit card & cash payments</p> |
| <p>9. Is all or part of the claim secured?</p> | <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. 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 <i>Proof of Claim</i>. <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____</p> <p>Basis for perfection: _____</p> <p>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.)</p> <p>Value of property: \$ _____</p> <p>Amount of the claim that is secured: \$ _____</p> <p>Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</p> <p>Amount necessary to cure any default as of the date of the petition: \$ _____</p> <p>Annual Interest Rate (when case was filed) _____ %</p> <p><input type="checkbox"/> Fixed <input type="checkbox"/> Variable</p> |
| <p>10. Is this claim based on a lease?</p> | <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</p> |
| <p>11. Is this claim subject to a right of setoff?</p> | <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____</p> |

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| 12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)? | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply:</i> | 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. | <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 \$3,350* 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 \$15,150*) 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 4/01/25 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. | <p>Check the appropriate box:</p> <input checked="" type="checkbox"/> I am the creditor. <input type="checkbox"/> I am the creditor's attorney or authorized agent. <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. <input type="checkbox"/> I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. <p>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.</p> <p>I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date <u>10/10/2022</u> _____ MM / DD / YYYY</p> <p>/s/ Michael Chapman _____ Signature</p> <p>Print the name of the person who is completing and signing this claim:</p> <p>Name <u>Michael Chapman</u> _____ First name Middle name Last name</p> <p>Title _____</p> <p>Company _____</p> <p>Address <u>4702 Ashby Ct</u> _____ Identify the corporate servicer as the company if the authorized agent is a servicer Number Street <u>Ellicott City, MD 21042-6143</u> _____ City State ZIP Code</p> <p>Contact phone <u>5703502454</u> Email <u>chapmanmac@aol.com</u></p> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|



Enrollment Form Lifetime Legacy First Family Membership

I understand that as a Lifetime Legacy Member I receive the following benefits:

- Attend the following courses Free of Charge and As Many Times As You Wish for the REST OF YOUR LIFE: Two Day Empty Hand Defense; Two Day Edged Weapons; Two Day Defensive Handgun; Two Day Tactical Shotgun; Two Day Practical Rifle; Four Day Defensive Handgun; Four Day Tactical Shotgun; Four Day Practical Rifle; Two Day Handgun Skill Builder; Two Day Advanced Tactical Handgun; Four Day Handgun Combat Master Prep.
- **Guaranteed placement** in the courses listed above with two-weeks advanced notice.
- **Four First Family Certificates**, (current value of \$2,000/certificate) that you can sell or transfer to anyone who has not previously attended a course at Front Sight. Certificate good for one person to attend a Four-Day Defensive Handgun or Four-Day Tactical Shotgun or Four-Day Practical Rifle course. Certificate good for two people to attend the same Two-Day Defensive Handgun or Two-Day Tactical Shotgun or Two-Day Practical Rifle course together. Certificates are fully transferable and have no expiration date.
- **Invitation to our Annual July 4th First Family Reunion**
- **Name etched in First Family Monument**
- **Password to access exclusive First Family areas of website and e-mail forum.**
- **First Family Card and First Family Hat**

Name as you wish it to appear on your membership: Michael Chapman
 Address: 7148 Iroquois Street
 City: Tobyhanna State: PA Zip: 18466
 Home Phone: 570 894 8111 Work Phone: 917 452 4913
 Cell Phone: _____ E-mail: chapmanmac@aol.com

Payment Method (check one):

- 90 monthly credit card payments of \$99 for Total Cost of \$8,910
- 36 monthly credit card payments of \$199 for Total Cost of \$7,164 (Save \$1,764!)
- Single Payment of \$4,900 (Save \$4,010!)

Flashlight
Flashlight Pouch
Knife & Mat
\$2,450.00

Credit Card Number: 5524 7510 0006 9280 Expires: 02/10
 (VISA MasterCard Discover, American Express or combination of cards)

Bonus Membership for Enrollment Today:

Name: Will Pulliam Address: 123 Paseo Dr
 City: Carbondale State: CO Zip: 81623
 Home Phone: (970) 963-3106 Work Phone: (970) 963-2300
 Cell Phone: (209) 404-0891 E-mail: wepulliam@gmail

Bonus for Single Payment Today:

2000 on card \$450 cash
 Visa
4323 7277 6133 9506
 KD .40 cal, HOLS & MAG POUCH
 Hat, shirt, belt
 Dry Practice
 2/10



November 16, 2008

Dear Michael Chapman, number 10332D Diamond,

Thank you again for your support through participation in Front Sight's Diamond Lifetime Membership. Your Diamond Membership gives you the following benefits:

- Attend Any Course Held at Front Sight Las Vega **FREE OF CHARGE** and as Many Time as You Wish for the Rest of Your Life.
- Attend Annual, Two-Day Secrets of the Ultra Successful Event free of charge.
- Guaranteed Placement in any course with two weeks advance enrollment.
- 40% Savings On Any Products Purchased from Pro Shop, Gunsmith, and Armory.
- Free Use of Front Sight's Private First Family Ranges.
- Free Locker Rental in Front Sight's Armory.
- Invitation to annual *July 4th Lifetime Members' Reunion Celebration*.
- Name etched in First Family Monument.
- Password to access exclusive and restricted First Family areas of web site and e-mail forum.
- First Family Card, (enclosed) First Family Hat (sent with your previous membership)

When you attend a course that is free of charge under your First Family membership, please mail or fax or e-mail, via the web site application process, an *Application for Training* with your First Family number listed in the course cost section. The first course you attend requires that the *Application for Training* be fully completed including the *Statement of No Criminal History* and *Character Witness Statement*. Once you have attended a course, subsequent courses only require completion of the application down to the *Statement of No Criminal History*. A criminal background check is required once per year. The current charge for the annual criminal background check is \$50 each year.

IN ADDITION:

Your previous membership remains in your name as "To Be Determined." Simply contact us with the name and address of the person you would like it assigned to and we will mail it to them immediately.

A non-refundable \$2,000 Pro Shop Credit has been placed in your name at Front Sight's Pro Shop. You may use up to \$200 Per Year, starting January 2009, for your own purchases when attending Front Sight's courses.

Once again, thank you for your support. I look forward to training you and those you refer to Front Sight. If you have any questions or need any assistance please feel free to contact me.

Sincerely,


IGNATIUS A. PIAZZA, PRESIDENT

P.O. BOX 2619, APTOS, CALIFORNIA 95001 • TELEPHONE 1.800.987.7719 • FAX 831.684.2137



November 27, 2012

Dear Michael Chapman, number A7828 Ambassador,

Thank you again for your support through participation in Front Sight's **Ambassador Lifetime Membership**. Your Ambassador Membership gives you the following benefits:

- ATTEND ANY AND ALL COURSES OFFERED OR CREATED NOW OR IN THE FUTURE HELD AT Front Sight Las Vegas ,Front Sight Alaska or ANY Training Location or Facilities FREE OF CHARGE AND AS MANY TIMES AS YOU WISH FOR THE REST OF YOUR LIFE.**
- Attend exclusive courses, customized for you as part of the Ambassador membership.**
- Guaranteed Placement in any course with two weeks advance enrollment.**
Go to www.myfrontsight.com to Register for a course.
- 40% Savings On Any Products Purchased from Pro Shop, Gunsmith, and Armory.**
- Invitation to annual July 4th Lifetime Members' Reunion Celebration.** In Addition receive a special reunion and event EXCLUSIVELY for Front Sight Ambassadors each year.
- Name etched in First Family Monument.**
- Access to exclusive and restricted First Family Forum after Registering at:**
<https://www.frontsight.com/bbs>
- Receive HALF of the course fee from students attending Front Sight's 1 Day Introduction to Front Sight Courses, in your home town, when you host the course.**

Enclosed you will find your new Ambassador Lifetime Membership card and Voucher for Front Sight Ambassador Shirt, Hat and Pin.

When you attend a course that is free of charge under your First Family membership, please mail or fax or e-mail, via the web site application process, an *Application for Training* with your First Family number listed in the course cost section. The first course you attend requires that the *Application for Training* be fully completed including the *Statement of No Criminal History* and *Character Witness Statement*. Once you have attended a course, subsequent courses only require completion of the application down to the *Statement of No Criminal History*. A criminal background check is required once per year. The current charge for the annual criminal background check is \$50 each year.

Once again, thank you for your support. I look forward to training you and those you refer to Front Sight.

If you have any questions or need any assistance please feel free to contact me.

Sincerely,

Ignatius Piazza

IGNATIUS A. PIAZZA, PRESIDENT

7975 CAMERON DRIVE #900, WINDSOR, CA 95492 • 800.987.7719 • INTERNATIONAL 707.837.0131 • FAX 707.837.0694 • E-MAIL Info@FrontSight.com • WEBSITE www.frontsight.com



August 5, 2015

Dear Michael Chapman, number PA7828 Patron Plus,

Thank you again for your support by becoming a Patron. Your **Patron Plus Lifetime Membership** gives you the following benefits:

- **ATTEND ANY AND ALL COURSES OFFERED OR CREATED NOW OR IN THE FUTURE HELD AT *Front Sight Las Vegas, Front Sight Alaska or ANY Front Sight Training Location or Facilities FREE OF CHARGE AND AS MANY TIMES AS YOU WISH FOR THE REST OF YOUR LIFE.***
- **Guaranteed Placement in any course with two weeks advance enrollment.**
- **40% Savings On Any Products at the Pro Shop at any Front Sight Facility.**
- **invitation to annual *July 4th Lifetime Members' Reunion Celebration and special Patron Advisory Board Meeting* .**
- **Name etched in First Family Monument with a special designation as a Patron Plus.**
- **Front Sight Patron Plus Membership Card and Benefits Letter.**
- **Exclusive access to the future Patron's Clubhouse.**
- **20% over cost from Stockpile Defense our ammo vendor shipped direct to your door.**
- **Membership on the Front Sight Advisory Board.**
- **Patron Plus memberships allows you to trade in any credits, certificates, & memberships at a higher value than any other membership level in future special offers.**
- **Patrons of Front Sight will receive a Front Sight Patron Plus Hat and Pin.**
- **Ability to Will Patron Plus Membership to an heir on my passing with perpetuity.**

Enclosed you will find your new Patron Plus Membership card and Pin. Please see your MyFrontSight.com account for the additional certificates, memberships, and credits which were added as bonuses for becoming a Patron Plus lifetime member.

When you attend a course that is free of charge under your First Family membership, please mail, fax or e-mail, via the web site application process, an *Application for Training* with your First Family number listed in the course cost section. The first course you attend requires that the *Application for Training* be fully completed including the *Statement of No Criminal History* and *Character Witness Statement*. Once you have attended a course, subsequent courses only require completion of the application down to the *Statement of No Criminal History*. Each calendar year that you take a course there is a required \$50 criminal background check. That check is good for all courses taken during that calendar year. There is no charge for years in which you do not take a course.

Once again, thank you for your support. I look forward to training you and those you refer to Front Sight. If you have any questions or need any assistance please feel free to contact me.

Sincerely,

Ignatius Piazza

IGNATIUS A. PIAZZA, PRESIDENT



6/17/2019

Dear Michael Chapman, number 2President7828 Custom President Membership,

Thank you again for your support by becoming a Custom President Member. Your Custom President Membership gives you the following benefits:

- ATTEND ANY AND ALL COURSES OFFERED OR CREATED NOW OR IN THE FUTURE Held AT Front Sight Las Vegas, Front Sight Alaska or ANY Front Sight Training Location or Facilities FREE OF CHARGE AND AS MANY TIMES AS YOU WISH FOR THE REST OF YOUR LIFE.
- Guaranteed Placement in any course with two weeks advance enrollment.
- Custom President Membership may enroll in Private Training (at the Nevada Facility) any time you wish with 1 month's advance notice and bring up to the number on your persons on your President Membership Card.
- 40% Savings On Any Products at the Pro Shop at any Front Sight Facility.
- Invitation to annual July 4th Lifetime Members' Reunion Celebration
- Name etched in First Family Monument with a special designation as a President Member.
- Front Sight President Membership Card and Benefits Letter.
- First in, First out privileges.
- 20% over cost from the Ammo Bunker shipped direct to your door.
- Membership on the Front Sight Advisory Board.
- Custom President Membership allows you to trade in any credits, certificates, & memberships at a higher value than any other membership level in future special offers.
- Custom President Membership will receive a Front Sight President Hat and Pin.
- Ability to Will Custom President Membership to an heir on my passing.
- Access to purchase GUNS at cost from our Guns at Cost program for life.

Enclosed you will find your new Custom President Membership Card, and Benefits Letter. Please see your MyFrontSight.com account for the additional certificates, memberships, and credits which were added as bonuses for becoming a Custom President lifetime member. The President Hat and Pin will be mailed separately.

When you attend a course that is free of charge under your First Family membership, please mail, fax or e-mail, via the web site application process, an Application for Training with your First Family number listed in the course cost section. The first course you attend requires that the Application for Training be fully completed including the Statement of No Criminal History and Character Witness Statement. Once you have attended a course, subsequent courses only require completion of the application down to the Statement of No Criminal History. Each calendar year that you take a course there is a required \$50 criminal background check. That check is good for all courses taken during that calendar year. There is no charge for years in which you do not take a course.

Once again, thank you for your support. I look forward to training you and those you refer to Front Sight. If you have any questions or need any assistance please feel free to contact me.

Sincerely,


Ignatius Piazza

IGNATIUS A. PIAZZA, PRESIDENT

1 FRONT SIGHT ROAD, PAHRUMP, NV 89061 • 800.987.7719 • INTERNATIONAL 707.837.0131 • FAX 855.271.0852 • E-MAIL Info@FrontSight.com • WEBSITE www.frontsight.com

February 21, 2023

Credit Card Statement Request – Michael Chapman

Chase Card Services – via fax at (888) 643-9628

To Whom It May Concern:

I am requesting archived credit card statements from two separate Chase credit cards as proofs of payment that I need to submit to a bankruptcy court as part of Chapter 11 claim that I am involved with. The information on the specific credit cards, statement dates, payees and amounts are listed below:

Chase United Presidential Plus Mastercard – Account # [REDACTED] 9280

- Payee: Front Sight Firearms or Front Sight Mgmt.
- Estimated Statement Date: April 2008
- Amount: \$2,450.00 (April 1, 2008)

Chase Marriott Visa – Account # [REDACTED] 0475

- Payee: Front Sight Firearms or Front Sight Mgmt.
- Estimated Statement Date: October 2008
- Amount: \$1,995.00 (October 20, 2008)

Please confirm that these two specific transactions are listed on the statements that you send to me.

If these two statements can be sent to me ASAP via email in PDF file format, that would be preferred and is more efficient. If they have to be mailed in hard copy, then please expedite this request. My contact information is listed below:

Michael Chapman
4702 Ashby Ct
Ellicott City, MD 21042
(410) 730-6885 phone
chapmanmac@aol.com email

Let me know if you have any questions, thanks.



Michael Chapman

Cardmember Service

PO Box 15298
Wilmington, DE 19850-5298
1-800-436-7937; We accept operator relay calls
Visit us at chase.com



03/02/2023

MICHAEL CHAPMAN
4702 ASHBY CT
ELLCOTT CITY MD 21042-614302

Your accounts ending in 9280, 0475

Dear Michael Chapman:

Thank you for your recent inquiry about your UnitedSM Presidential PlusSM credit card account.

We are unable to comply with your request for statement copies as Chase's document retention policy states that we retain statement copies for a period of six years. We are unable to process any request for statement copies over six years of age. We regret for any inconvenience this may have caused you.

If you have any questions about your credit card, please send us a secure message at chase.com or call us at 1-800-436-7937. We're here to assist you anytime. We appreciate your business.

Sincerely,

Card Services

December 21, 2013

Front Sight Firearms Training Institute
7975 Cameron Drive #900
Windsor, CA 95492
Attn: Mack

My name is Michael Chapman and I am a Front Sight Ambassador lifetime member # A7828.

I was speaking with Jim via phone and he mentioned that your office did not have records of select course certificates and the Pro Shop credit that is was awarded when I upgraded to a Diamond membership (#10332D). He advised me to send in the original documents to your offices and that you would post them to your systems so

Enclosed are the original documents signed by Dr. Piazza as follows:

- One (1) Front Sight Diamond membership upgrade with \$2,000 Pro Shop credit
- Three (3) Expanded First Family Front Sight Course certificates

Please post a record of these certificates, membership and associated Pro Shop credit to your systems so I can utilize them in the future. My information is listed below:

Michael Chapman
7911 Maple Lawn Blvd
Fulton, MD 20759
(410) 730-6885
chapmanmac@aol.com email
Ambassador # A7828

Let me know if you have any questions and please confirm receipt and processing via email.

Regards,

A handwritten signature in black ink, appearing to read "Michael Chapman", with a long horizontal flourish extending to the right.

Michael Chapman