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12 Attorneys for Province, LLC, solely in its capacity as
 13 the Liquidating Trustee of the Front Sight Creditors Trust

14 **UNITED STATES BANKRUPTCY COURT**
 15 **FOR THE DISTRICT OF NEVADA**

<p>16 In re:</p> <p>17 Front Sight Management LLC,</p> <p>18 Debtor.</p>	<p>19 Case No. 22-11824-abl</p> <p>20 Chapter 11</p> <p>21 Hearing Date: August 21, 2023 Hearing Time: 9:30 a.m.</p>
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22 **FIFTEENTH OMNIBUS OBJECTION (1) LIQUIDATING AND ALLOWING CERTAIN**
 23 **MEMBER CLAIMS AND (2) DISALLOWING AND EXPUNGING**
 24 **CERTAIN OTHER MEMBER CLAIMS**

25 ****IF YOU ARE RECEIVING THIS OMNIBUS OBJECTION IN THE MAIL THEN IT APPLIES**
 26 **TO YOU AND YOU SHOULD READ THIS DOCUMENT IN FULL****

27 Province, LLC, solely in its capacity as the duly authorized and acting Liquidating Trustee
 28 (the “Liquidating Trustee”)¹ of the Front Sight Creditors Trust (the “Trust”), hereby submits this
 fifteenth omnibus objection (“Omnibus Objection”) for entry of an order pursuant to Section² 502

¹ Pursuant to Front Sight Management, LLC’s (the “Debtor”) confirmed chapter 11 plan of reorganization and order thereon, the Liquidating Trustee has standing to pursue all claim objections in this case except for those relating to Las Vegas Development Fund, LLC and Michael Meacher.

² References to “Section” refer to the Bankruptcy Code (11 U.S.C. §§ 101 et seq.); references to “Bankruptcy Rule” refer to the Federal Rules of Bankruptcy Procedure; and references to “Local Rule” refer to the Local Bankruptcy Rules.

1 and Bankruptcy Rule 3007, liquidating or disallowing in their entirety the following filed claims:

2	Claimant	Claim No.	Claim Amount	Proposed Treatment
3	Anderson, Dan	527-1	No Amounts Claimed	Disallow claim in its entirety.
4	Baxter, Joan	964-1	No Amounts Claimed	Disallow claim in its entirety.
5	Bennett III, Edwin Roland	1025-1	No Amounts Claimed	Disallow claim in its entirety.
6	Birchfield, William	260-1	No Amounts Claimed	Allow as a \$1,000.00 general unsecured claim.
7	Boughan, Karen	896-1	No Amounts Claimed	Disallow claim in its entirety.
8	Boughan, Peter	897-1	No Amounts Claimed	Disallow claim in its entirety.
9	Campbell, Edward	1058-1	No Amounts Claimed	Disallow claim in its entirety.
10	Connell, James V. Jr.	881-1	No Amounts Claimed	Disallow claim in its entirety.
11	Day, Frank	518-1	No Amounts Claimed	Disallow claim in its entirety.
12	Dickerson, Kimberly Klein ³	7-1	No Amounts Claimed	Disallow claim in its entirety.
13	Douty, Christopher ⁴	163-2	\$152,434.83	Disallow claim in its entirety.
14	Duncanson, Corinne	650-1	No Amounts Claimed	Disallow claim in its entirety.
15	Duncanson, Joseph	652-1	No Amounts Claimed	Disallow claim in its entirety.
16	Duryee, Taylor	871-1	No Amounts Claimed	Disallow claim in its entirety.
17	Gartner, Rob	834-1	No Amounts Claimed	Disallow claim in its entirety.
18	Hamid, Melissa	428-1	No Amounts Claimed	Disallow claim in its entirety.

26
27 ³ The Liquidating Trustee notes that Ms. Dickerson also filed proof of claim 195-2, which has been allowed as a general unsecured claim in the amount of \$4,196.00 [ECF No. 671].

28 ⁴ The Liquidating Trustee notes that Mr. Douty filed Claim 163-2 after the Debtor filed an objection to Claim 163-1, which objection was sustained by the Court [ECF No. 577].

Claimant	Claim No.	Claim Amount	Proposed Treatment
Hamid, Saheed	427-1	No Amounts Claimed	Disallow claim in its entirety.
Jouan, Alain	984-1	No Amounts Claimed	Allow as a \$99.00 general unsecured claim.
Keese, John	237-1	No Amounts Claimed	Disallow claim in its entirety.
Lensegrav, Dennis and Leslie ⁵	309-1	No Amounts Claimed	Disallow claim in its entirety.
Lombardo, Carl	306-1	No Amounts Claimed	Disallow claim in its entirety.
Memoli, John	954-1	No Amounts Claimed	Allow as a \$339.00 general unsecured claim.
Meza, Michael	232-1	No Amounts Claimed	Disallow claim in its entirety.
Milne, Edward	1038-1	No Amounts Claimed	Disallow claim in its entirety.
Minitier, John	604-1	No Amounts Claimed	Disallow claim in its entirety.
Minton, Donna	951-1	No Amounts Claimed	Disallow claim in its entirety.
Moore, Michael E.	77-1	No Amounts Claimed	Disallow claim in its entirety.
Pusieski, John	379-1	No Amounts Claimed	Disallow claim in its entirety.
Richardson, James A. ⁶	798-1	\$32,000.00	Disallow claim in its entirety.
Roberts, Lance	489-1	No Amounts Claimed	Disallow claim in its entirety.
Roberts, Mary Jean	490-1	No Amounts Claimed	Disallow claim in its entirety.
Roberts, Wade	714-1	No Amounts Claimed	Disallow claim in its entirety.
Schilz, Bill	492-1	No Amounts Claimed	Disallow claim in its entirety.

⁵ The Liquidating Trustee notes that the Lensegravs also filed proof of claim 690-1, which has been allowed as a general unsecured claim in the amount of \$3,812.00 [ECF No. 673].

⁶ The Liquidating Trustee notes that Mr. Richardson also filed proof of claim 799-1, which has not been objected to and is allowed as a general unsecured claim in the amount of \$32,399.00.

Claimant	Claim No.	Claim Amount	Proposed Treatment
Schweber, Neal	310-1	No Amounts Claimed	Disallow claim in its entirety.
Sillanpaa, William	307-1	No Amounts Claimed	Allow as a \$6,000.00 general unsecured claim.
Smith, Karen	910-1	No Amounts Claimed	Disallow claim in its entirety.
Smith, Phillip	911-1	No Amounts Claimed	Disallow claim in its entirety.
Speight, Kevin	191-1	No Amounts Claimed	Allow as a \$18,078.00 general unsecured claim.
Stearns, Adam	587-1	No Amounts Claimed	Disallow claim in its entirety.
Vanasse, Steven	225-1	No Amounts Claimed	Allow as a \$99.00 general unsecured claim.
Whitesell, Larry	1045-1	No Amounts Claimed	Disallow claim in its entirety.
Zespy, Daniel	598-1	No Amounts Claimed	Disallow claim in its entirety.
Zespy, Kelli	600-1	No Amounts Claimed	Disallow claim in its entirety.

The Liquidating Trustee has determined that the proofs of claim listed in the chart above (collectively, the “Claims” and each a “Claim”)⁷ filed by the claimants (collectively, the “Claimants” and each a “Claimant”) are subject to liquidation and/or disallowance. Each of the Claimants appears to be a former member of the Debtor who is asserting a Claim or Claims against the estate. Except for Claims 163-2 and 798-1, the Claims do not list the amount of the claim. The Trust and its professionals have reviewed the Claims and determined that many of the Claims are not entitled to prima facie validity because the Claims do not provide a sufficient accounting of the amounts paid by Claimants to the Debtor for their memberships and membership rewards. However, some of the Claims, specifically, Claims 260-1, 984-1, 954-1, 307-1, 191-1, and 225-1, do contain a sufficient accounting of the amounts paid by Claimants to the Debtor, and therefore, should be liquidated and allowed as general unsecured claims based on the evidence attached to each Claim.

⁷ As required by Local Rule 3007(a)(4), the first page of each of the Proofs of Claim are attached hereto as **Exhibit 1**.

1 Accordingly, by this Omnibus Objection, the Liquidating Trustee seeks to (i) disallow certain
2 claims in their entirety and (ii) liquidate the amount of certain of the Claims to the amount reflected
3 by the evidence attached to the Claim. Accordingly, the Liquidating Trustee objects to the Claims
4 and respectfully requests entry of an order substantially in the form attached hereto as **Exhibit 2**
5 liquidating certain Claims and disallowing certain Claims pursuant to section 502(b) and Bankruptcy
6 Rules 3003 and 3007.

7 **CLAIMANTS RECEIVING THIS OMNIBUS OBJECTION SHOULD LOCATE**
8 **THEIR NAMES AND CLAIMS ON PAGES 2-4 AND 9-10.**

9 This Omnibus Objection is made and based upon the following Memorandum of Points and
10 Authorities, the declaration of Amanda Demby Swift (the “Swift Decl.”) filed in support of the
11 Omnibus Objection, the papers, pleadings, and other documents on file with the clerk of the Court,
12 and judicial notice of which is respectfully requested pursuant to Federal Rule of Evidence 201, and
13 such other and further evidence as may be provided at the hearing on the Omnibus Objection.

14 **MEMORANDUM OF POINTS AND AUTHORITIES**

15 **I. JURISDICTION AND VENUE**

- 16 1. This Court has jurisdiction to consider this matter pursuant to 28 U.S.C. §§ 157 and
17 1334 and Local Rule 1001(b)(1).
- 18 2. Venue is proper before this Court pursuant to 28 U.S.C. §§ 1408 and 1409.
- 19 3. This is a core proceeding pursuant to 28 U.S.C. § 157(b)(2).
- 20 4. The statutory predicates for the relief sought herein are Section 11 U.S.C. §§ 105 and
21 502, Bankruptcy Rule 3007, and Local Rule 3007.
- 22 5. As required by Local Rule 9014.2, the Liquidating Trustee consents to the entry of
23 final orders or judgments by this Court if it is determined that this Court, absent consent of the
24 parties, cannot enter final orders or judgments consistent with Article III of the United States
25 Constitution.

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1 **II. STATEMENT OF FACTS**

2 **A. General Case Background**

3 6. On May 24, 2022, the Debtor filed a voluntary petition for relief under chapter 11 of
4 the Bankruptcy Code. On June 9, 2022, United States Trustee for Region 17 filed its *Amended*
5 *Appointment of the Official Committee of Unsecured Creditors* [ECF No. 116].

6 7. On November 29, 2022, the order confirming the Debtor’s second amended chapter
7 11 plan of reorganization was entered [ECF No. 556] (the “Conformation Order”) pursuant to which
8 the “Reorganized Debtor” has new ownership and membership on the “effective date” of the plan.
9 The “effective date” of the plan was December 2, 2022 [ECF No. 584].

10 8. Pursuant to the Confirmation Order, the Trust was created to, among other things,
11 oversee and administer general unsecured claims, objections thereto, and ultimately distributions on
12 allowed claims. Accordingly, the Liquidating Trustee is the party in interest as to this Omnibus
13 Objection.

14 **B. General History of the Debtor**

15 9. In 1998, the Debtor purchased 550 acres of raw land 45 minutes from Las Vegas,
16 acquired approximately 500 acre feet of water rights and began building the largest private firearms
17 training facility in the world (the “Front Sight Property”).

18 10. Historically, the Debtor provided firearms training courses which promoted the
19 defensive use of various firearms. Courses were offered to the general public, members of law
20 enforcement and military members.

21 11. Historically, the Debtor operated its business by selling “lifetime” memberships and
22 promotional benefits such as “Front Sight Bucks,” TBD memberships, and certificates to use for
23 training courses, plus the Debtor sold ancillary products. Pre-petition, the Debtor developed a major
24 expansion plan that contemplated the construction of a vacation and resort development to be known
25 as the “Front Sight Vacation Club & Resort,” to include vacation residences, an RV park and related
26 facilities, a retail area, and a pavilion. The Debtor envisioned creating a self-fulfilling ecosystem,
27 involving memberships and promotional benefits, that would lead to an incentivized customer base
28

1 that would take advantage of the club and resort and other offerings to redound to the Debtor's
2 benefit.

3 12. Ultimately, due to facts not relevant to this Omnibus Objection, the Debtor was
4 unable to expand its business, was facing a foreclosure of the Front Sight Property, and sought
5 protection under chapter 11 of the Bankruptcy Code to restructure its business.

6 **III. RELIEF REQUESTED**

7 13. The Liquidating Trustee has reviewed the proofs of claim filed in this case. Based on
8 that review, the Liquidating Trustee has determined that the Claims are subject to liquidation or
9 disallowance.

10 14. Each of the Claimants appears to be a former member of the Debtor who is asserting
11 a Claim or Claims against the estate based either on nothing or based on account of member benefits
12 or member rewards. Each Claimant apparently purchased or was given memberships to the Debtor
13 and subsequently purchased or was given membership rewards. These rewards currently have no
14 value.

15 15. The Liquidating Trustee seeks entry of an order, pursuant to Section 502 and
16 Bankruptcy Rule 3007, (i) disallowing certain Claims in their entirety and/or (ii) liquidating the
17 amount of certain of the Claims to the amount reflected by the evidence attached to the Claims, for
18 the reasons set forth below.

19 **IV. BASIS FOR RELIEF**

20 16. Bankruptcy Rule 3001(f) provides that a "proof of claim executed and filed in
21 accordance with these rules shall constitute prima facie evidence of the validity and amount of the
22 claim." It is well established in the Ninth Circuit that the initial burden of persuasion for
23 establishing the validity and amount of a proof of claim is upon the claimant. *Ashford v.*
24 *Consolidated Pioneer Mortgage (In re Consolidated Pioneer Mortgage)*, 178 B.R. 222 (9th Cir.
25 BAP 1995), *aff'd*, 91 F.3d 151 (9th Cir. 1996) (a proof of claim must have a writing attached and
26 include supporting documentation to qualify for presumptive validity). However, the prima facie
27 validity of a claim does not attach unless the claim sets forth the facts necessary to support the claim.
28 *Id.* at 226.

1 17. Section 502 authorizes a “party in interest,” such as the Liquidating Trustee, to object
 2 to claims. 11 U.S.C. § 502(a). Once the objector raises “facts tending to defeat the claim by
 3 probative force equal to that of the allegations of the proofs of claim themselves,” then the burden
 4 reverts to the claimant to prove the validity of the claim by a preponderance of evidence. *Wright v.*
 5 *Holm (In re Holm)*, 931 F.2d 620, 623 (9th Cir. 1991); *In re Consolidated Pioneer Mortgage*, 178
 6 B.R. at 226. Indeed, the ultimate burden of persuasion is always on the claimant. *In re Holm*, 931
 7 F.2d at 623; *see also In re Heath*, 331 B.R. 424 (9th Cir. BAP 2005) (explaining that a claim that
 8 fails to attach supporting documentation is not entitled to be considered as prima facie evidence of
 9 validity and amount of claim).

10 18. “If the creditor does not provide information or is unable to support its claim, then
 11 that in itself may raise an evidentiary basis to object to the unsupported aspects of the claim, or even
 12 a basis for evidentiary sanctions, thereby coming within Section 502(b)’s grounds to disallow the
 13 claim.” *In re Heath*, 331 B.R. 424, 437 (B.A.P. 9th Cir. 2005).

14 19. Section 502(b)(1) requires disallowance of a claim if “such claim is unenforceable
 15 against the debtor and property of the debtor, under any agreement or applicable law for a reason
 16 other than because such claim is contingent or unmatured. . .” 11 U.S.C. § 502(b)(1). The
 17 “applicable law” referenced in Section 502(b)(1) includes bankruptcy law as well as other federal
 18 and state laws. *See Cavaliere v. Sapir*, 208 B.R. 784, 786-787 (D. Conn. 1997) (providing that
 19 “applicable law” includes bankruptcy law). A debtor is therefore allowed to raise any federal or
 20 state law defenses to a claim. *See In re G.I. Industries, Inc.*, 204 F.3d 1276, 1281 (9th Cir. 2000)
 21 (stating that a claim cannot be allowed under Section 502(b)(1) if it is unenforceable under
 22 nonbankruptcy law); *Johnson v. Righetti*, 756 F.2d 738, 741 (9th Cir. 1985) (finding that the validity
 23 of the claim may be determined under state law); *In re Eastview Estates II*, 713 F.2d 443, 447 (9th
 24 Cir. 1983) (applying California law).

25 **V. OBJECTIONS TO CLAIMS**

26 20. First, many of the Claims are not entitled to prima facie validity because the Claims
 27 do not contain sufficient evidence to support the amount of the Claim. Claims 7-1, 232-1, 310-1,
 28 379-1, 427-1, 428-1, 489-1, 490-1, 492-1, 518-1, 587-1, 604-1, 714-1, 834-1, 881-1, 910-1, 911-1,

1 951-1, 1025-1, 1038-1, 1045-1, and 1058-1 are “face page” proofs of claim that do not set forth the
 2 facts necessary to support the amount of the Claims. Although Claims 77-1, 237-1, 306-1, 309-1,
 3 527-1, 598-1, 600-1, 650-1, 652-1, 871-1, 896-1, 897-1, and 964-1, do have attachments to the
 4 Claims, the attachments do not provide a sufficient accounting of the amounts paid by Claimants to
 5 the Debtor for their memberships and membership rewards. The burden of persuasion for
 6 establishing the validity and amount of a Claim is on the Claimant, and the Claimants have failed to
 7 meet their burden. Consequently, the Court should sustain the Omnibus Objection and disallow the
 8 above referenced Claims in their entirety.

9 21. Accordingly, the Liquidating Trustee requests that the Court disallow the following
 10 Claims in their entirety:

Claimant	Claim No.	Asserted Claim Amount	Treatment
Anderson, Dan	527-1	No Amounts Claimed	Disallowed
Baxter, Joan	964-1	No Amounts Claimed	Disallowed
Bennett III, Edwin Roland	1025-1	No Amounts Claimed	Disallowed
Boughan, Karen	896-1	No Amounts Claimed	Disallowed
Boughan, Peter	897-1	No Amounts Claimed	Disallowed
Campbell, Edward	1058-1	No Amounts Claimed	Disallowed
Connell, James V. Jr.	881-1	No Amounts Claimed	Disallowed
Day, Frank	518-1	No Amounts Claimed	Disallowed
Dickerson, Kimberly Klein ⁸	7-1	No Amounts Claimed	Disallowed
Duncanson, Corinne	650-1	No Amounts Claimed	Disallowed
Duncanson, Joseph	652-1	No Amounts Claimed	Disallowed
Duryee, Taylor	871-1	No Amounts Claimed	Disallowed
Gartner, Rob	834-1	No Amounts Claimed	Disallowed
Hamid, Melissa	428-1	No Amounts Claimed	Disallowed
Hamid, Saheed	427-1	No Amounts Claimed	Disallowed
Keese, John	237-1	No Amounts Claimed	Disallowed
Lensegrav, Dennis and Leslie ⁹	309-1	No Amounts Claimed	Disallowed

26 _____
 27 ⁸ The Liquidating Trustee notes that Ms. Dickerson also filed proof of claim 195-2, which has been
 allowed as a general unsecured claim in the amount of \$4,196.00 [ECF No. 671].

28 ⁹ The Liquidating Trustee notes that the Lensegravs also filed proof of claim 690-1, which has been
 allowed as a general unsecured claim in the amount of \$3,812.00 [ECF No. 673].

Claimant	Claim No.	Asserted Claim Amount	Treatment
Lombardo, Carl	306-1	No Amounts Claimed	Disallowed
Meza, Michael	232-1	No Amounts Claimed	Disallowed
Milne, Edward	1038-1	No Amounts Claimed	Disallowed
Minitier, John	604-1	No Amounts Claimed	Disallowed
Minton, Donna	951-1	No Amounts Claimed	Disallowed
Moore, Michael E.	77-1	No Amounts Claimed	Disallowed
Pusieski, John	379-1	No Amounts Claimed	Disallowed
Roberts, Lance	489-1	No Amounts Claimed	Disallowed
Roberts, Mary Jean	490-1	No Amounts Claimed	Disallowed
Roberts, Wade	714-1	No Amounts Claimed	Disallowed
Schilz, Bill	492-1	No Amounts Claimed	Disallowed
Schweber, Neal	310-1	No Amounts Claimed	Disallowed
Smith, Karen	910-1	No Amounts Claimed	Disallowed
Smith, Phillip	911-1	No Amounts Claimed	Disallowed
Stearns, Adam	587-1	No Amounts Claimed	Disallowed
Whitesell, Larry	1045-1	No Amounts Claimed	Disallowed
Zespy, Daniel	598-1	No Amounts Claimed	Disallowed
Zespy, Kelli	600-1	No Amounts Claimed	Disallowed

22. Second, certain Claims include attachments that evidence Claimants paid amounts to the Debtor for their membership and membership upgrades/rewards. The Liquidating Trustee respectfully requests that the Court liquidate the following Claims and allow them as general unsecured claims as set forth below based on the evidence attached to each Claim:

Claimant	Claim No.	Asserted Claim Amount	Amount Allowed General Unsecured Claim
Birchfield, William	260-1	No Amounts Claimed	\$1,000.00
Jouan, Alain	984-1	No Amounts Claimed	\$99.00
Memoli, John	954-1	No Amounts Claimed	\$339.00
Sillanpaa, William	307-1	No Amounts Claimed	\$6,000.00
Speight, Kevin	191-1	No Amounts Claimed	\$18,078.00
Vanasse, Steven	225-1	No Amounts Claimed	\$99.00

1 23. Third, Claim 163-2 filed by Claimant Christopher Douty was filed after the Debtor
2 filed an objection to Claim 163-1 [ECF No. 426], which objection was sustained by the Court [ECF
3 No. 577]. Pursuant to the Court's order sustaining the Debtor's Second Omnibus Objection [ECF
4 No. 577], Mr. Douty holds a general unsecured claim in the amount of \$12,178.00, which is based
5 on the amounts Mr. Douty paid to the Debtor for his membership and membership
6 upgrades/rewards. Accordingly, the Liquidating Trustee respectfully requests that the Court
7 disallow Claim 163-2 in its entirety.

8 24. Fourth, Claimant James A. Richardson has filed two claims against the Debtor, Claim
9 798-1 and 799-1. Claim 799-1 has not been objected to because it accurately reflects the amount
10 that Mr. Richardson paid to the Debtor for his membership and membership rewards/upgrades. Mr.
11 Richardson is only entitled to one claim against the estate. Accordingly, the Liquidating Trustee
12 respectfully requests that Claim 798-1 be disallowed in its entirety.

13 **VI. RESERVATION OF RIGHTS**

14 25. The Liquidating Trustee specifically reserves the right to amend this Omnibus
15 Objection, file additional papers in support of this Omnibus Objection or take other appropriate
16 actions, including, *inter alia*, to: (a) respond to any allegation or defense that may be raised in a
17 response filed by or on behalf of any of the Claimants or other interested parties; (b) object further to
18 any Claim for which a Claimant provides (or attempts to provide) additional documentation or
19 substantiation; and (c) object further to any of the Claims addressed herein based on additional
20 information that may be discovered upon further review by the Liquidating Trustee or through
21 discovery pursuant to the Bankruptcy Rules.

22 **VII. SEPARATE CONTESTED MATTERS**

23 26. Each of the Claims and the Liquidating Trustee's objections thereto constitute a
24 separate contested matter as contemplated by Bankruptcy Rules 3007 and 9014 and Local Rule
25 3007. The Liquidating Trustee requests that any order entered by the Court with respect to a
26 particular Claim objected to in this Omnibus Objection be deemed a separate order with respect to
27 each Claim in accordance with Bankruptcy Rule 3007(1).
28

1 **VIII. NOTICE**

2 27. The Liquidating Trustee will serve copies of this Omnibus Objection upon each of the
3 Claimants identified in the chart contained herein at the addresses listed on the disputed Claims, as
4 filed.

5 **IX. CONCLUSION**

6 For the foregoing reasons, the Liquidating Trustee respectfully requests that the Court enter
7 an order substantially in the form attached hereto as **Exhibit 2**:

8 A. Sustaining the Omnibus Objection, and liquidating certain Claims and disallowing other
9 Claims (and expunging them from the Court’s claims register);

10 B. Providing that each of the Claims shall be liquidated or expunged from the official
11 claims register in the Debtor’s bankruptcy case;

12 C. Providing that for any Claim disallowed pursuant to this Omnibus Objection, the
13 Claimant forever waives such claim against the Trust, the Liquidating Trustee, the Debtor and its
14 estate;

15 D. Providing that if any Claimant files or asserts any new claim, or an amendment of any
16 other proof of claim, related to any of the Claims resolved by this Omnibus Objection, then such
17 amendment shall be deemed disallowed with prejudice and automatically expunged from the claims
18 register in the Debtor’s case, without further order of this Court;

19 E. Providing that, pursuant to Rule 54(b) of the Federal Rules of Civil Procedure, made
20 applicable in contested matters through Bankruptcy Rules 7054 and 9014, any such ruling on the
21 Omnibus Objection shall be treated as a final judgment with respect to the Claimants and their
22 Claims subject to such ruling, and determining that there is no just reason for delay in entry of a final
23 judgment on the Claims resolved herein; and

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F. Granting such other and further relief as the Court deems just and proper.

DATED: July 21, 2023

BG Law LLP

By: /s/ Susan K. Seflin
Susan K. Seflin
Jessica S. Wellington
Attorneys for Province, LLC, solely in its capacity as
the Liquidating Trustee of the Front Sight Creditors
Trust

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
 10/14/2022
 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?	Dan Anderson	
	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)
	Dan Anderson	
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name
	583 E 1475 S	583 E 1475 S
	583 E 1475 S	
	Kaysville, UT 84037	
	Contact phone 8014723056	Contact phone
Contact email 1dananderson@gmail.com	Contact email	
	Uniform claim identifier for electronic payments in chapter 13 (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?	

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
 12/7/2022
 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?	Joan Baxter _____ 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)
	Joan Baxter _____ Name	_____ Name
	7848 W Ranch Ln Vacaville, CA 95688 ,	
	Contact phone _____	Contact phone _____
	Contact email _____	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 1/2/2023
 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?	Edwin Roland Bennett III 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)
	Edwin Roland Bennett III Name 6056 Kingsbriar Drive Yorba Linda, CA 92886 Contact phone 7142939299 Contact email ed.bennett3@yahoo.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? _____	

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
 8/8/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	William 'Alex' Birchfield Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor Alex Birchfield – alex.birchfield@gmail.com	
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)
	William 'Alex' Birchfield Name	_____ Name
	9750 W. Jewell PLACE Lakewood, CO 80227	
	Contact phone 970-401-3154	Contact phone _____
	Contact email w2.birchfield@gmail.com	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 11/5/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Karen Boughan Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Founder Member ID 5612196UF</u>	
2. Has this claim been acquired from someone else?	<input 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)
	Karen Boughan	_____
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name
	Name 3930 Goodwin Ave Simi Valley, CA 93063-2846	Name
	Contact phone <u>805-584-6098</u>	Contact phone _____
Contact email <u>spidermomus@yahoo.com</u>	Contact email _____	
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 11/5/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Peter Boughan Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Founder Member ID 5620295UF</u>	
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)
	Peter Boughan Name	_____ Name
	3930 Goodwin Ave Simi Valley, CA 93063-2846	
	Contact phone <u>805-584-6098</u>	Contact phone _____
	Contact email <u>spidermomus@yahoo.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

Official Form 410
Proof of Claim

04/22

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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? EDWARD M. CAMPBELL IV MD
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? No
 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)
	<p><u>EDWARD CAMPBELL</u> Name</p> <p><u>4825 False Dn</u> Number Street</p> <p><u>Metairie, LA 70006</u> City State ZIP Code</p> <p>Contact phone <u>504 616 7547</u></p> <p>Contact email <u>Doctacamp96@gmail.com</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p><u>ED CAMPBELL</u> Name</p> <p><u>4825 False Dn</u> Number Street</p> <p><u>Metairie, LA 70006</u> City State ZIP Code</p> <p>Contact phone <u>504 616 7547</u></p> <p>Contact email <u>Doctacamp96@gmail.com</u></p>

STRETTO
JAN 03 2023
RECEIVED

4. Does this claim amend one already filed? No
 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? No
 Yes. Who made the earlier filing? _____

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
 11/4/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	James V. Connell, Jr. _____ 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)
	James V. Connell, Jr. _____ Name	_____ Name
	3652 Inverness Rd Waterloo, IA 50701	
	Contact phone <u>319-230-1702</u>	Contact phone _____
	Contact email <u>conradvin@aol.com</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

Official Form 410 **Date Stamp Copy Returned**

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.

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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?
 Name of the creditor (the person or entity to be paid for this claim) FRANK I. DAY
 Other names the creditor used with the debtor N/A

2. Has this claim been acquired from someone else?
 No
 Yes. From whom? THIS IS MY FIRST TIME HEARING OF THIS SUITSO: W/O

3. Where should notices and payments to the creditor be sent?
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p>Name <u>FRANK I DAY</u></p> <p>Number Street <u>532 STARLINE FALLS AVE</u></p> <p>City State ZIP Code <u>HENDERSON NV 89011</u></p> <p>Contact phone <u>909-373-5694</u></p> <p>Contact email <u>SKIPDAY2000@GMAIL.COM</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>Name <u>SAME</u></p> <p>Number Street _____</p> <p>City State ZIP Code _____</p> <p>Contact phone _____</p> <p>Contact email _____</p>
---	---

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
 No
 Yes. Claim number on court claims registry (if known) _____

5. Do you know if anyone else has filed a proof of claim for this claim?
 No
 Yes. Who made the earlier filing? N/A

Filed on MM / DD / YYYY
 _____ / _____ / _____

STRETTO

OCT 13 2022

RECEIVED

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
 5/26/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Kimberly Klein Dickerson _____ Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Kimberly Klein</u> _____	
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)
	Kimberly Klein Dickerson _____	_____
	Name	Name
	1345 w ridge way ashland, NE 68003	
	Contact phone <u>8052599000</u>	Contact phone _____
Contact email <u>kimcklein@gmail.com</u>	Contact email _____	
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 11/14/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Christopher R. Douty Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Kristin S. Douty, Sara L. Douty</u>	
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)
	Christopher R. Douty Name	_____ Name
	526 Silver Avenue Half Moon Bay, CA 94019-1564	
	Contact phone <u>6504653305</u>	Contact phone _____
	Contact email <u>douty.chris@gmail.com</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____		
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>163</u> Filed on <u>06/22/2022</u> MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

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
 10/25/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	DUNCANSON, CORINNE 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)
	DUNCANSON, CORINNE Name 1770 KENESAW LN CLEARWATER FL 33765 Contact phone <u>727-424-9399</u> Contact email <u>Coris4Real@verizon.net</u> 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? _____	

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
 10/25/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	DUNCANSON, JOSEPH	
	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)
	DUNCANSON, JOSEPH	
	Name	Name
	1770 KENESAW LN CLEARWATER FL 33765	
	Contact phone 727-461-2110	Contact phone
	Contact email JoeDuncanson@verizon.net	Contact email
	Uniform claim identifier for electronic payments in chapter 13 (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?	

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
 11/4/2022
 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?	Taylor B Duryee	
	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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes. From whom? Thomas Carpenter	
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)
	Taylor B Duryee	
	Name	Name
	18601 North Highway One #555 FORT BRAGG, CA 95437-8759	
	Contact phone 707 357 3508	Contact phone
	Contact email taylorbduryee@gmail.com	Contact email
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 11/3/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	robert gartner _____ 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)
	robert gartner _____	_____
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name
	11 lisa dr northport, NY 11768	Name
	Contact phone (631)245-1002	Contact phone _____
Contact email hrlydvdsn03@aol.com	Contact email _____	
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/8/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Melissa Hamid 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)
	Melissa Hamid Name	_____ Name
	9834 James Cemetery Rd Franklin, TX 77856	
	Contact phone _____	Contact phone _____
	Contact email <u>paraus@yahoo.com</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/8/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Saheed Hamid 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)
	Saheed Hamid Name 9834 James Cemetery Rd Franklin, TX 77856 Contact phone _____ Contact email <u>paraus@yahoo.com</u> 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? _____	

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
 12/16/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Alain Jouan 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)
	Alain Jouan Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) Name 11805 N. Highwood Ct Spokane, WA 99218 Contact phone 509-496-4212 Contact email arpj69@comcast.net 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?	

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

Official Form 410

Proof of Claim

04/22

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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?
JOHN STANLEY KEESE
 Name of the current creditor (the person or entity to be paid for this claim)
 Other names the creditor used with the debtor JOHN S. KEESE, JOHN KEESE

2. Has this claim been acquired from someone else?
 No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>JOHN S. KEESE</u> Name</p> <p><u>1402 BERINGER DRIVE</u> Number Street</p> <p><u>HOSCHTON GA 30548</u> City State ZIP Code</p> <p>Contact phone <u>(603) 997-1029</u></p> <p>Contact email <u>SOJURNR@COMCAST.NET</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>_____ Name</p> <p>_____ Number Street</p> <p>_____ City State ZIP Code</p> <p>Contact phone _____</p> <p>Contact email _____</p>
--	--

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
 No
 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?
 No
 Yes. Who made the earlier filing? _____

STRETTO
 AUG 05 2022
 RECEIVED

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
 (Spouse, if filing)

United States Bankruptcy Court for the: _____

Case number 22-11824-abl

RECEIVED AND FILED
 2022 AUG 16 A 10:03
 U.S. BANKRUPTCY COURT
 MARY A. SCHOTT, CLERK

Official Form 410
Proof of Claim

04/16

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.

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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? Dennis and Leslie Lensegrav
 Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor none

2. Has this claim been acquired from someone else?
 No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>Dennis and Leslie Lensegrav</u> Name</p> <p><u>33 Smith Blvd</u> Number Street</p> <p><u>Myrtle beach SC 29588</u> City State ZIP Code</p> <p>Contact phone <u>214-493-2694</u></p> <p>Contact email <u>majorpapa1@gmail.com</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>_____ Name</p> <p>_____ Number Street</p> <p>_____ City State ZIP Code</p> <p>Contact phone _____</p> <p>Contact email _____</p>
---	---

4. Does this claim amend one already filed?
 No
 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?
 No
 Yes. Who made the earlier filing? _____

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

RECEIVED AND FILED

EGP

2022 AUG 12 A 11: 04

U.S. BANKRUPTCY COURT
MARY A. SCHOTT, CLERK

Official Form 410 Proof of Claim

04/22

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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?
CARL J. LOMBARDO
 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?
 No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>CARL J. LOMBARDO</u> Name</p> <p><u>552 TURNEY ROAD</u> Number Street</p> <p><u>BEDFORD OHIO 44146</u> City State ZIP Code</p> <p>Contact phone <u>623-202-4102</u></p> <p>Contact email <u>CJLOMBARDO@LOMBARDOGELATO.COM</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>_____ Name</p> <p>_____ Number Street</p> <p>_____ City State ZIP Code</p> <p>_____ Contact phone</p> <p>_____ Contact email</p>
---	--

STRETTO
AUG 16 2022
RECEIVED

4. Does this claim amend one already filed?
 No
 Yes. Claim number on court claims registry (if known) _____

Filed on 06-18-2022
MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?
 No
 Yes. Who made the earlier filing? _____

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

Official Form 410
Proof of Claim

04/22

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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? John Memoli
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?
 No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>John Memoli</u> Name _____</p> <p><u>9 Carman Blvd</u> Number Street _____</p> <p><u>Massapequa NY 11758</u> City State ZIP Code _____</p> <p>Contact phone <u>516 359 9434</u> Contact email <u>John1761@optanl.ny.net</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>Name _____</p> <p>Number Street _____</p> <p>City State ZIP Code _____</p> <p>Contact phone _____</p> <p>Contact email _____</p>
---	---

4. Does this claim amend one already filed?
 No
 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?
 No
 Yes. Who made the earlier filing? _____

STRETTO

NOV 28 2022

RECEIVED

EXHIBIT 1

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

Official Form 410

Proof of Claim

04/22

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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 S. MEZA
 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? No
 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>Michael S. Meza</u> Name <u>1831 Caddington Dr. #58</u> Number Street <u>Rancho Palos Verdes CA 90275</u> City State ZIP Code Contact phone <u>(714) 323-0428</u> Contact email <u>mmezalaw@aol.com</u>	Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one):



4. Does this claim amend one already filed? No
 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? No
 Yes. Who made the earlier filing? _____

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
 1/3/2023
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Edward Milne 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)
	Edward Milne Name	_____ Name
	120 Corliss Lane Cheshire, CT 06410	
	Contact phone <u>2038334064</u>	Contact phone _____
	Contact email <u>edwardmilne@me.com</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/20/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	John E Minter _____ 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)
	John E Minter _____ Name	_____ Name
	PO Box 630 Ipswich, MA 01938-0630	
	Contact phone _____ 9783561132	Contact phone _____
	Contact email _____ j@miniter.us	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

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? Donna Minton
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?
 No
 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>Donna Minton</u> Name <u>9850 Sidney Rd</u> Number Street <u>Pensacola FL 32507</u> City State ZIP Code Contact phone <u>850 982 2145</u> Contact email <u>Donna.Minton@gmail.com</u>	<u>Same</u> Name _____ Number Street _____ City State ZIP Code Contact phone _____ Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
 No
 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?
 No
 Yes. Who made the earlier filing? _____



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
 6/1/2022
 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 E. Moore 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 E. Moore Name 5309 Round Prairie Street Shawnee, KS 66226 Contact phone 9137063354 Contact email michael.moore@airraidmedia.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?	

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
 10/6/2022
 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?	John Pusieski 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)
	John Pusieski	
	Name	Name
	7514 Delaware Lane Vancouver, WA 98664	
	Contact phone 3606060825	Contact phone
Contact email rum1@comcast.net	Contact email	
Uniform claim identifier for electronic payments in chapter 13 (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?	

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
 11/2/2022
 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?	2324 QUAIL RUN 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)
	2324 QUAIL RUN Name	_____ Name
	2324 QUAIL RUN BULLHEAD CITY, AZ 86442	
	Contact phone <u>9287582593</u>	Contact phone _____
	Contact email <u>wjar@citlink.net</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/12/2022
 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?	Lance Roberts	
	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)
	Lance Roberts	
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	
	Name	Name
	PO Box 83449 Fairbanks, AK 99708	
	Contact phone 907-378-8856	Contact phone
Contact email roberts.lance@gmail.com	Contact email	
Uniform claim identifier for electronic payments in chapter 13 (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?	

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
 10/12/2022
 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?	Mary Jean Roberts _____ 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)
	Mary Jean Roberts _____	_____
	Name	Name
	PO Box 83449 Fairbanks, AK 99708	
	Contact phone 201-906-1061	Contact phone _____
Contact email mjdagdag@gmail.com	Contact email _____	
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/30/2022
 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?	Wade Roberts 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)
	Wade Roberts Name	_____ Name
	2872 Cape Canyon Ave Tulare, CA 93274	
	Contact phone <u>5593032848</u>	Contact phone _____
	Contact email <u>wade@wade-roberts.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

Official Form 410
Proof of Claim

04/22

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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? Bill Schilz
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?
 No
 Yes. From whom? _____

<p>3. Where should notices and payments to the creditor be sent?</p> <p>Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</p>	<p>Where should notices to the creditor be sent?</p> <p><u>Bill Schilz</u> Name</p> <p><u>P.O. Box 317</u> Number Street</p> <p><u>Genoa</u> <u>NV</u> <u>89411-0317</u> City State ZIP Code</p> <p>Contact phone <u>530-304-4297</u></p> <p>Contact email <u>bill_s_online@comcast.net</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p><u>Same</u> Name</p> <p>Number Street</p> <p>City State ZIP Code</p> <p>Contact phone _____</p> <p>Contact email _____</p>
---	--	---

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

STRETTO
OCT 12 2022
RECEIVED

4. Does this claim amend one already filed?
 No
 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?
 No
 Yes. Who made the earlier filing? _____

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

Official Form 410

Proof of Claim

04/22

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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? Neal Schweber
 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?
 No
 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)
	<p><u>Neal Schweber</u> Name <u>35 Horseshoe Lane</u> Number Street <u>Newtown Pa 190</u> City State ZIP Code</p> <p>Contact phone <u>Neal Schweber</u> Contact email <u>NSPSYCH@aol.com</u></p>	<p><u>Neal Schweber</u> Name <u>35 Horseshoe Way</u> Number Street <u>Newtown Square Pa 19</u> City State ZIP Code</p> <p>Contact phone _____ Contact email _____</p>

STRETTO
AUG 19 2022
Received!

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
 No
 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?
 No
 Yes. Who made the earlier filing? _____

EXHIBIT 1

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: District of Nevada

Case number 22-11824-abl

**Official Form 410
Proof of Claim**

Front Sight Management LLC has listed your claim on Schedule EF, Part 2 as a General Unsecured claim in the amount of \$6,000.00. If you agree with the characterization and claim amount, you do not need to submit this claim form. If you disagree, you must timely file a proof of claim form or be forever barred from further recovery.

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?
William SILLANPAA
 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?
 No
 Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>William SILLANPAA</u> Name</p> <p><u>9143 Edward St. Apt 108</u> Number Street</p> <p><u>Chilliwack BC CA 928405</u> City State ZIP Code</p> <p>Contact phone <u>604-792-2214</u></p> <p>Contact email <u>gaaler3573@gmail.com</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>_____ Name</p> <p>_____ Number Street</p> <p>_____ City State ZIP Code</p> <p>Contact phone _____</p> <p>Contact email _____</p>
---	---

4. Does this claim amend one already filed?
 No
 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?
 No
 Yes. Who made the earlier filing? _____



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
 11/8/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Karen Smith _____ 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)
	Karen Smith _____	_____
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name
	Name 16566 Jones Rd Grand Lodge, MI 48837-9618	Name
	Contact phone 517-204-9282 _____	Contact phone _____
Contact email sewthere5669@gmail.com _____	Contact email _____	
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 11/8/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Phillip Smith 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)
	Phillip Smith Name	_____ Name
	16566 Jones Rd Grand Lodge, MI 48837-9618	
	Contact phone 517-204-9282	Contact phone _____
	Contact email sewthere5669@gmail.com	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 7/17/2022
 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?	Kevin Speight	
	Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor	Kevin L Speight, Kevin Lewis Speight
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)
	Kevin Speight	
	Name	Name
	753 Medinah Drive Winston Salem, NC 27107	
	Contact phone 3364426798	Contact phone _____
	Contact email kspeight8@yahoo.com	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/19/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Adam Stearns 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)
	Adam Stearns Name 4391 Remsen Road Medina, OH 44256	_____ Name
	Contact phone 3308080294	Contact phone _____
	Contact email adamstearns@adcalinc.com	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

Fill in this information to identify the case:

Debtor 1 Front Sight Management LLC
 Debtor 2 (Spouse, if filing) _____
 United States Bankruptcy Court for the: District of Nevada
 Case number 22-11824-abl

Official Form 410

Proof of Claim

04/22

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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?

Steven Vanasse
 Name of the current creditor (the person or entity to be paid for this claim)
 Other names the creditor used with the debtor N/A

2. Has this claim been acquired from someone else?

No
 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? <u>Steven Vanasse</u> Name <u>2740 Hackberry Ln</u> Number Street <u>Brownsville TX 78521</u> City State ZIP Code Contact phone <u>956 399-3075</u> Contact email <u>STEVEN-VANASSE@COX.INTERNET.COM</u>	Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____
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STRETTO
AUG 02 2022
Received

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?

No
 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?

No
 Yes. Who made the earlier filing? _____

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
 1/3/2023
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Larry Whitesell 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)
	Larry Whitesell Name P.O. Box 4124 Gypsum, CO 81637-4124	_____ Name
	Contact phone 970-376-1509	Contact phone _____
	Contact email lwhitesell@yahoo.com	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/19/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Daniel Zespy Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Dan Zespy</u>	
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)
	Daniel Zespy Name	_____ Name
	870 E Linda Vista Blvd Oro Valley, AZ 85704-7676	
	Contact phone <u>520-237-2966</u>	Contact phone _____
	Contact email <u>dazespy@comcast.net</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (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? _____	

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
 10/19/2022
 Mary A. Schott, Clerk

**Official Form 410
 Proof of Claim**

04/22

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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?	Kelli Zespy Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Kelli M Zespy</u>	
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)
	Kelli Zespy Name 870 E Linda Vista Blvd Oro Valley, AZ 85704-7676	_____ Name
	Contact phone <u>520-333-0543</u>	Contact phone _____
	Contact email <u>kelligz@comcast.net</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (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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STEVEN T. GUBNER – NV Bar No. 4624
SUSAN K. SEFLIN – CA Bar No. 213865 – Admitted *Pro Hac Vice*
JESSICA S. WELLINGTON – CA Bar No. 324477 – Admitted *Pro Hac Vice*
BG LAW LLP
300 S. 4th Street, Suite 1550
Las Vegas, NV 89101
Telephone: (702) 835-0800
Facsimile: (866) 995-0215
Email: sgubner@bg.law
sseflin@bg.law
jwellington@bg.law

Attorneys for Province, LLC, solely in its capacity as
the Liquidating Trustee of the Front Sight Creditors Trust

**UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF NEVADA**

In re:

Front Sight Management LLC,

Debtor.

Case No. 22-11824-abl

Chapter 11

Hearing Date: August 21, 2023
Hearing Time: 9:30 a.m.

**ORDER SUSTAINING FIFTEENTH OMNIBUS OBJECTION (1) LIQUIDATING AND
ALLOWING CERTAIN MEMBER CLAIMS AND (2) DISALLOWING AND EXPUNGING
CERTAIN OTHER MEMBER CLAIMS**

On August 21, 2023 at 9:30 a.m., a hearing was held before the Honorable August Landis,
Chief United States Bankruptcy Judge for the District of Nevada, for the Court to consider the

1 *Fifteenth Omnibus Objection (1) Liquidating and Allowing Certain Members Claims and (2)*
 2 *Disallowing and Expunging Certain Other Member Claims* [ECF No. ____] (the “Omnibus
 3 Objection”) ¹ filed by Province, LLC, solely in its capacity as the duly authorized and acting
 4 Liquidating Trustee (the “Liquidating Trustee”) ² of the Front Sight Creditors Trust (the “Liquidating
 5 Trust”). Appearances were as duly noted on the record at the hearing.

6 The Court, having read and considered the Omnibus Objection and all evidence filed in
 7 support of the Omnibus Objection; the Court having considered the arguments and representations of
 8 counsel at the hearing and other matters which the Court may properly take judicial notice,
 9 including, without limitation, the record in this case as reflected on the docket; the Court having set
 10 forth its findings and conclusions on the record pursuant to Rule 52 of the Federal Rules of Civil
 11 Procedure and Rule 7052 of the Federal Rules of Bankruptcy Procedure; the Court having found that
 12 notice of the Omnibus Objection was sufficient under the circumstances and no other or further
 13 notice is required; the Court having determined that the legal and factual bases set forth in the
 14 Omnibus Objection establish just cause for the relief sought therein; and after due deliberation and
 15 sufficient cause appearing therefor,

16 **IT IS HEREBY ORDERED** that the Omnibus Objection is sustained.

17 **IT IS HEREBY FURTHER ORDERED** that the following Proofs of Claim shall be
 18 allowed as GENERAL UNSECURED CLAIMS as set forth below in the column heading “Allowed
 19 General Unsecured Claim Amount” and shall be disallowed to the extent they assert an amount over
 20 their respective allowed amount:

Claimant	Claim No.	Filed Claim Amount	Allowed General Unsecured Claim Amount
Birchfield, William	260-1	No Amounts Claimed	\$1,000.00
Jouan, Alain	984-1	No Amounts Claimed	\$99.00
Memoli, John	954-1	No Amounts Claimed	\$339.00

26 ¹ All initial capitalized terms not defined herein shall have the same meaning ascribed to them in the
 Omnibus Objection.

27 ² Pursuant to Front Sight Management, LLC’s (the “Debtor”) confirmed chapter 11 plan of
 28 reorganization and order thereon, the Liquidating Trustee has standing to pursue all claim objections
 in this case except for those relating to Las Vegas Development Fund, LLC and Michael Meacher.

Claimant	Claim No.	Filed Claim Amount	Allowed General Unsecured Claim Amount
Sillanpaa, William	307-1	No Amounts Claimed	\$6,000.00
Speight, Kevin	191-1	No Amounts Claimed	\$18,078.00
Vanasse, Steven	225-1	No Amounts Claimed	\$99.00

IT IS HEREBY FURTHER ORDERED that the following Proofs of Claim shall be
DISALLOWED in their entirety:

Claimant	Claim No.	Filed Claim Amount	Treatment
Anderson, Dan	527-1	No Amounts Claimed	Disallowed
Baxter, Joan	964-1	No Amounts Claimed	Disallowed
Bennett III, Edwin Roland	1025-1	No Amounts Claimed	Disallowed
Boughan, Karen	896-1	No Amounts Claimed	Disallowed
Boughan, Peter	897-1	No Amounts Claimed	Disallowed
Campbell, Edward	1058-1	No Amounts Claimed	Disallowed
Connell, James V. Jr.	881-1	No Amounts Claimed	Disallowed
Day, Frank	518-1	No Amounts Claimed	Disallowed
Dickerson, Kimberly Klein	7-1	No Amounts Claimed	Disallowed
Douty, Christopher	163-2	\$152,434.83	Disallowed
Duncanson, Corinne	650-1	No Amounts Claimed	Disallowed
Duncanson, Joseph	652-1	No Amounts Claimed	Disallowed
Duryee, Taylor	871-1	No Amounts Claimed	Disallowed
Gartner, Rob	834-1	No Amounts Claimed	Disallowed
Hamid, Melissa	428-1	No Amounts Claimed	Disallowed
Hamid, Saheed	427-1	No Amounts Claimed	Disallowed
Keese, John	237-1	No Amounts Claimed	Disallowed
Lensegrav, Dennis and Leslie	309-1	No Amounts Claimed	Disallowed
Lombardo, Carl	306-1	No Amounts Claimed	Disallowed
Meza, Michael	232-1	No Amounts Claimed	Disallowed
Milne, Edward	1038-1	No Amounts Claimed	Disallowed
Miniter, John	604-1	No Amounts Claimed	Disallowed
Minton, Donna	951-1	No Amounts Claimed	Disallowed
Moore, Michael E.	77-1	No Amounts Claimed	Disallowed
Pusieski, John	379-1	No Amounts Claimed	Disallowed

Claimant	Claim No.	Filed Claim Amount	Treatment
Richardson, James A.	798-1	\$32,000.00	Disallowed
Roberts, Lance	489-1	No Amounts Claimed	Disallowed
Roberts, Mary Jean	490-1	No Amounts Claimed	Disallowed
Roberts, Wade	714-1	No Amounts Claimed	Disallowed
Schilz, Bill	492-1	No Amounts Claimed	Disallowed
Schweber, Neal	310-1	No Amounts Claimed	Disallowed
Smith, Karen	910-1	No Amounts Claimed	Disallowed
Smith, Phillip	911-1	No Amounts Claimed	Disallowed
Stearns, Adam	587-1	No Amounts Claimed	Disallowed
Whitesell, Larry	1045-1	No Amounts Claimed	Disallowed
Zespy, Daniel	598-1	No Amounts Claimed	Disallowed
Zespy, Kelli	600-1	No Amounts Claimed	Disallowed

IT IS HEREBY FURTHER ORDERED that for any Claim disallowed pursuant to this Order, Claimant forever waives such Claim against the Debtor, its estate, the Liquidating Trustee and the Liquidating Trust.

IT IS HEREBY FURTHER ORDERED that any further claims filed or asserted by the Claimants, including any amendments, shall be deemed disallowed without further Court order.

IT IS HEREBY FURTHER ORDERED that pursuant to Civil Rule 54(b), made applicable in contested matters through Bankruptcy Rules 7054 and 9014, this Order shall be treated as a final judgment with respect to Claimants and their Claims.

IT IS SO ORDERED.

Prepared and Submitted By:

BG Law LLP

By: /s/ Susan K. Seflin

Susan K. Seflin

Jessica S. Wellington

Attorneys for Province, LLC, solely in its capacity as
the Liquidating Trustee of the Front Sight Creditors
Trust