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UNITED STATES BANKRUPTCY COURT Northern District of Texas (Dallas Division)

PROOF OF CLAIM

Name of Debtor: Kansas Campus, LLC

Case Number: 09-37024

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property):

FRED HARTMAN

Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent:

20835747001747 HARTMAN, FRED 3 NORTHWEST 43RD ST KANSAS CITY, MO 64116

YOUR CLAIM IS SCHEDULED AS: Schedule/Claim ID: s466 AMOUNT/CLASSIFICATION \$85.00 UNSECURED

Court Claim Number: (If known)

Filed on:

Name and address where payment should be sent (if different from above):

3 N.W. 43RD ST. KANSAS CITY MO. 64116

FILED

JAN 06 2010

Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Telephone number:

(816) 453-0814

TAWANA C. MARSHALL, CLERK U.S. BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS

Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 85.00

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

Specify the priority of the claim.

2. Basis for Claim: PRESENTED AN HOUR-LONG DIGITAL TRAVELOGUE PRESENTATION 10/15/2009, ON "ENGLAND"

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

3. Last four digits of any number by which creditor identifies debtor:

Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).

3a. Debtor may have scheduled account as:

4. Secured Claim (See instruction #4 on reverse side.)

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: Real Estate Motor Vehicle Other RECEIVED

Value of Property: Annual Interest Rate %

JAN 12 2010

Amount of arrearage and other charges as of time case filed included in secured claim.

BMC GROUP

If any: Basis for perfection:

Amount of Secured Claim: Amount Unsecured:

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).

Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).

Other - Specify applicable paragraph of 11 U.S.C. §507 (a)().

Amount entitled to priority:

\$

*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. 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. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

FOR COURT USE ONLY

Date: Jan. 2, 2010

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

Fred Hartman

Erickson Ret. Comm. LLC



00412

FRED HARTMAN

Educational Slide Presentations

World Traveler/Lecturer/Photographer

3 Northwest 43rd Street Kansas City, Missouri 64116-1632 Phone: (816) 453-0814

INVOICE

January 2, 2010

TO: Tallgrass Creek
13800 Metcalf
Overland Park, KS 66223

1 - Digital Travelogue Presentation, as follows:

"Grand Tour of England"

Note: Program presented October 15, 2009.
Payment never received, and overdue.

Thank you!

Fred Hartman

Fee: \$85.00

Please make checks payable to: Fred Hartman