B10 (Official Form 10) (04/13)

UNITED STATES BANKR	UPTCY COURT Western Distr	ict of Missouri	PROOF OF CLAIM		
Name of Debtor: Gas-Mart USA, Inc.		Case Number: 15-41915	FILED		
	ke a claim for an administrative expense that arises or payment of an administrative expense according to		U.S. Bankruptcy Court Western District of Missouri		
Name of Creditor (the person or other entity to	whom the debtor owes money or property):		7/16/2015		
Midwest Equipment Company			Paige Wymore-Wynn, Clerk COURT USE ONLY		
Name and address where notices should be sen	nt:		Check this box if this claim amends a previously filed		
Midwest Equipment Company 2511 Cassens Drive			claim.		
Fenton, MO 63026			Court Claim Number:		
, onion, nio 33323			Filed on:		
Telephone number: 636-343-0664	email: cberger@taylormidwest.com		Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.		
Name and address where payment should be so	ent (if different from above):		or statement groung particulars.		
	•				
			r		
_ 4					
Telephone number: email:					
1. Amount of Claim as of Date Case Filed:	\$ 2394.18 ete item 4. If all or part of the claim is entitled to	priority complete item 5			
	erest or other charges in addition to the principa		statement that itemizes interest or charges.		
	services rendered (See instruction				
Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as:	3b. Uniform Claim Identifier (optional):		
	(See instruction #3a)	(See instruction #3b)	1		
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secu setoff, attach required redacted documents, and	ared by a lien on property or a right of d provide the requested information.	Amount of arrearage an included in secured claim	d other charges, as of the time case was filed, n, if any: S		
Nature of property or right of setoff: C R Describe:		Basis for perfection: _			
Value of Property: \$	N D Finds B Will	Amount of Secured Cl	alm: \$		
Annual Interest Rate (when case was filed)	% LI FIXEG OF LI Variable	Amount Unsecured:	\$		
5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.					
Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	Wages, salaries, or commissions (up to \$12 earned within 180 days before the case was or the debtor's business ceased, whichever i \$507(a)(4).	filed empl	ributions to an Amount entitled to priority: S.C. §507(a)(5).		
Up to \$2,775° 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 un §507(a)(8).	applie applie	r - Specify suble paragraph of S.C. §507(a)(_).		
*Amounts are subject to adjustment on 4/01/16 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	s claim has been credited for the purpose of making	this proof of claim. (See instruction	n #6)		

Gas-Mart USA, Inc. POC

Case 15-41915-abf11 Claim 8-1 Filed 07/16/15 Desc Main Document Page 2 of 2

mortgages, security agreements, or, in the case of	f a claim based on an open-end or revolving con redacted copies of documents providing evidence ent is being filed with this claim. (See instruction TACHED DOCUMENTS MAY BE DESTROY	assumer credit agreement, a statement providing the of perfection of a security interest are attached in #7, and the definition of "redacted".)	zed statements of running accounts, contracts, judgments, ne information required by FRBP 3001(c)(3)(A). If the d. If the claim is secured by the debtor's principal
8. Signature: (See instruction #8) Check the appr	ropriate box.		
✓ I am the creditor.	☐ I am the creditor's authorized agent.	☐ I am the trustee, or the debtor, or their authorized agent. (See Bankruptcy Rule 3004.)	☐ I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)
I declare under penalty of perjury that the inform	ation provided in this claim is true and correct to	the best of my knowledge, information, and rea	asonable belief.
Print Name: Clare Berger			
Title: Controller			
Company: Midwest Equipment			
Company			
Address and telephone number (if	different from notice address above	e):	
		/s/ Clare Berger	<u>7/16/2015</u>
		(Signature)	(Date)
Telephone number: _	email: _		

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

www.taylormidwest.com







INVOICE

of 12

Bill To:

GASMART USA / GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Ship To:

GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Invoice # Date	Customer #	Customer P.O	Terms	Salesperson
722479 03/11/15	35550	JORDAN	NET 10 DAYS	
				NM

****** DUPLICATE COPY ******		
1 EA MEU-20 200Z MIX EM UP CUPS MX3900-57-PP-MIXEMUP 1000/CS - 18 PER SKID	124.00	124.00
1 EA MDL-1620 12/16/200Z DOME LIDS MX4000-18-APET-PDL 1000/CS - 40 PER SKID	53.00	53.00
BP-1238205 MIX EM UP 320Z PLASTIC CUPS 720/CS 24 PER SKID	136.80	136.80
1 EA BP-1238212 32oz DOME LIDS 1000/CS 45 PER SKID	60.00	60.00
1 EA SPOON STRAWS LARGE-WRAPPED SPOON STRAWS-RED 10-1/4" WRAPPED STRAW VENDOR#-1822-1/ 25/300 PACK	36.00	36.00
1 EA FLA023SH GRAPE SHAKE SYRUP (Continued on Page 2)	36.00	36.00

2511 Cassens Drive Fenton, MO 63026

636-343-0664 Fax: 636-343-4084

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INVOICE

of 12

Bill To:

GASMART USA / GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Ship To:

GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Invoice # Date	Customer #	Customer P.O	Terms		Salesperson
722479 03/11/15	35550	JORDAN	NET 10	DAYS	
					MM

Quantity	U/M	Description	DSC	Unit Price	Amount
1	EA	(Page 2) FLA026SH BANANA RIPPLE SHAKE SYRUP		36.00	36.00
1	EA	FLA040SH CLASSIC CHERRY		.00	.00
1	EA	FLA043SH BLUE RASPBERRY-SHAKE SYRUP		36.00	36.00
1	EA	FLA009SH GREEN APPLE SHAKE SYRUP		36.00	36.00
1	EA	FLA008SH PINA COLADA SHAKE SYRUP		36.00	36.00
6	GAL	FCB NEUT BASE FCB NEUTRAL BASE-BAG IN BOX CODE#-(31-06628-CX28155) SOLD BY THE GALLON ONLY Tracking Numbers: 1Z6665590364138624		14.00	84.00
		Subtotal Sales Tax Total Due On 03/21/15			673.80 51.30 725.10

Returned parts are subject to a 20% restocking fee. Returns are not allowed on electrical parts. TRY OUR NEW LIQUID NO RINSE SANITIZER. IT COSTS LESS & MIXES EASIER THAN POWDER! CALL FOR DETAILS

2511 Cassens Drive Fenton, MO 63026

636-343-0664 Fax: 636-343-4084

www.taylormidwest.com







Declinit Dries Amount

INVOICE

of 12

Bill To:

GASMART USA / GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Ship To:

GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Invoice # Date	Customer #	Customer P.O	Terms		Salesperson
727588 04/09/15	35550		NET 10	DAYS	
				*****	NM

****** DUPLICATE COPY ***** ******************************	Quantity	U/M	Description	DSC	Unit	Price	Amount
Wed Apr 08 12:15 - Wed Apr 08 14:00 Upon arrival found unit off. Mgr said that some one on the night shift keeps putting unit in clean mode and some how got chemicals into barrel 2 and they're not to sure about barrel 1 either. This is a flavor burst on barrel 2. Drained barrels and rinsed. Took apart and cleaned out barrels. Found cleaner in water rinse tank for the flavor burst. This is how the cleaner got into the barrel. Rinsed out spray pump for the water and refilled with water only. Purged water line on flavor burst till it was only water. Changed out water filter to unit because the one installed was way out of date for 2013. Checked brix at 13 and primed barrels. Let unit freeze down. All ok now.			***** DUPLICATE COPY *****				
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(Continued on Page 2)							

2511 Cassens Drive Fenton, MO 63026

636-343-0664 Fax: 636-343-4084

www.taylormidwest.com







INVOICE

of 12

Bill To:

GASMART USA / GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Ship To:

GASMART #1 4101 N BELT HWY ST JOSEPH MO 64506

Invoice # Date	Customer #	Customer P.O Terms		Salesperson
727588 04/09/15	35550	NET 1	0 DAYS	,
				NM

Quantity	U/M	Description	DSC	Unit Price	Amount
		(Page 2) S/O:00100457883 Date:04/08/15 Tech:185 PETER LEEDY UNIVERSAL #: 0010457883 Equ#:C30027C000 Ser#:K5115654 SVC TEXT Worked Performed		.00	.00
1	EA	ILWFILTER INLINE WATER FILTER-10" W/ FITTINGS		29.50	29.50
		CUST AUTH ********************** Certified By: Nikki Strong ***********************************		.00	.00
1	Hrs	004 ZONE CHARGE		73.00	73.00
1.75	Hrs	001 LABOR		120.00	210.00
		Subtotal Sales Tax Total Due On 04/19/15			312.50 2.25 314.75

Returned parts are subject to a 20% restocking fee. Returns are not allowed on electrical parts. ENTER OUR DRAWING FOR A \$25 GIFT CARD BY SIGNING UP TO RECEIVE EMAILED INVOICES. CALL 636-680-0810!

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

www.taylormidwest.com







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INVOICE

Bill To:

GASMART USA / GASMART #59 10303 LEAVENWORTH RD KANSAS CITY KS 66109 Ship To:

GASMART #59 10303 LEAVENWORTH RD KANSAS CITY KS 66109

Invoice # Date	Customer # Customer	P.O Terms	Salesperson
724920 03/25/15	35521 JOE	NET 10 DAYS	
			NM

Quantity U/	M Description	DSC	Unit Price	Amount
6 GA	****** DUPLICATE COPY ***** L FCB NEUT BASE FCB NEUTRAL BASE-BAG IN BOX CODE#-(31-06628-CX28155) SOLD BY THE GALLON ONLY		14.00	84.00
3 GA	L 3076-384 FRIDGEE-COLA FCB 3 GAL BIB		14.00	42.00
1 EA	FLA043SH BLUE RASPBERRY-SHAKE SYRUP		36.00	36.00
1 EA	FLA009SH GREEN APPLE SHAKE SYRUP		36.00	36.00
1 EA	FLA029SH WATERMELON SHAKE SYRUP		36.00	36.00
1 EA	FLA017SH ORANGE SHAKE SYRUP		36.00	36.00
1 EA	FLA008SH PINA COLADA SHAKE SYRUP		36.00	36.00
1 EA	FLA043SH BLUE RASPBERRY-SHAKE SYRUP		.00	.00
	FB 5 (Continued on Page 2)			

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

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INVOICE

Bill To:

GASMART USA / GASMART #59 10303 LEAVENWORTH RD KANSAS CITY KS 66109 Ship To:

GASMART #59 10303 LEAVENWORTH RD KANSAS CITY KS 66109

Invoice # Date	Customer # Customer	P.O Terms	Salesperson
724920 03/25/15	35521 JOE	NET 10 DAYS	
		-	NM

Quantity U/M	Description	DSC	Unit Price	Amount
	(Page 2) Tracking Numbers: 1Z6665590365577121 1Z6665590365705518 1Z6665590366315705 1Z6665590365577121 1Z6665590365705518			
	Subtotal Sales Tax Total Due On 04/04/15			306.00 26.85 332.85

2511 Cassens Drive Fenton, MO 63026

636-343-0664 Fax: 636-343-4084

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INVOICE

of 12

Bill To:

GASMART USA / GASMART #7 4111 BLUE RIDGE CUT OFF KANSAS CITY MO 64133

Ship To:

GASMART #7 4111 BLUE RIDGE CUT OFF KANSAS CITY MO 64133

ſ	Invoice # Date	Customer # Custo	mer P.O Terms	Salesperson
ľ	723880 03/19/15	35522	NET 10 DAYS	
Ī				NM

***** DUPLICATE COPY ***** ***************** Tue Mar 17 12:15 - Tue Mar 17 13:30 Per customer no syrup will dispense on flavor burst, I found unit unplugged	
Tue Mar 17 12:15 - Tue Mar 17 13:30 Per customer no syrup will dispense on flavor	
13:30 Per customer no syrup will dispense on flavor	
will dispense on flavor	
burst, I found unit unplugged	
from power. I plugged unit in	
and all flavors are working.	
I drew off several cups with	
no issues. Customer also said	
product is not froze enough	
so I defrosted c300 and	
checked brix and prox	
sensors. All settings are correct. I drained barrels	
and reprimed with fresh syrup	
and reprimed with fresh syrup and product now looks good .	
Then I found key pad on	
flavor burst acting up and	
replaced same. No other	
issues found.	
**********	ĺ
S/0:00100455363 Date:03/17/15	
Tech: 189 JAY ORDNUNG	
UNIVERSAL #: 0010455363	
Equ#:FB 80FCB-08	
Ser#:FCB8081101023	
SVC TEXT .00 .00	İ
Worked Performed (Continued on Page 2)	

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

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INVOICE

of 12

Bill To:

GASMART USA / GASMART #7 4111 BLUE RIDGE CUT OFF KANSAS CITY MO 64133

Ship To:

GASMART #7 4111 BLUE RIDGE CUT OFF KANSAS CITY MO 64133

Invoice #	Date	Customer #	Customer P.O	Terms		Salesperson
723880	03/19/15	35522		NET 10	DAYS	
						NM

-Quantity	U/M	Description	DSC	Unit Price	Amount
1	EA	(Page 2) ELE550 KEYPAD ASSY-FB80-08a AND THE FB80-08Sa ONLY-WILL NOT REPLAC ELE500		284.16	284.16
		CUST AUTH *********** Certified By: Sheleena Johnson **********************************		.00	.00
1	Hrs	004 ZONE CHARGE		73.00	73.00
1.25	Hrs	001 LABOR		120.00	150.00
		Subtotal Sales Tax Total Due On 03/29/15			507.16 21.63 528.79

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

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INVOICE

Bill To:

GASMART USA / GASMART #6 5050 NE LAKEWOOD WAY LEE'S SUMMIT MO 64064 Ship To:

GASMART #6 5050 NE LAKEWOOD WAY LEE'S SUMMIT MO 64064

Invoice # Date	Customer # C	Customer P.O	Terms		Salesperson
722068 03/10/15	35523 J	JANELLE	NET 10	DAYS	
					NM

Quantity	U/M	Description	DSC	Unit Price	Amount
		***** DUPLICATE COPY *****			
6	GAL	FCB NEUT BASE FCB NEUTRAL BASE-BAG IN BOX CODE#-(31-06628-CX28155)		14.00	84.00
		SOLD BY THE GALLON ONLY			
		Tracking Numbers: 1Z6665590364448790 1Z6665590366652583			
		Subtotal Sales Tax Total Due On 03/20/15			84.00 6.39 90.39
		Total Bue on 03/20/13			30.03

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

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TAYLOR*



INVOICE

Bill To:

GASMART USA / GASMART #6 5050 NE LAKEWOOD WAY LEE'S SUMMIT MO 64064

Ship To:

GASMART #6
5050 NE LAKEWOOD WAY
LEE'S SUMMIT MO 64064

DCC Holt Drigo Amount

Invoice # Date	Customer #	Customer	P.O [Terms			Salesperson
725316 03/27/15	35523	NATALIE		NET 1	0 DA	YS	
							NM

Quantity	U/M	Description	DSC	Unit Price	Amount
		***** DUPLICATE COPY *****			
1	EA	FLA040SH CLASSIC CHERRY		36.00	36.00
1	EA	FLA006SH BUBBLEGUM SHAKE SYRUP		36.00	36.00
1	EA	FLA043SH BLUE RASPBERRY-SHAKE SYRUP		36.00	36.00
t 1	EA	FLA017SH ORANGE SHAKE SYRUP		36.00	36.00
1	EA	FLA023SH GRAPE SHAKE SYRUP		36.00	36.00
1	ΕA	FLA043SH BLUE RASPBERRY-SHAKE SYRUP		.00	.00
1	EA	BP-1238205 MIX EM UP 320Z PLASTIC CUPS 720/CS 24 PER SKID		136.80	136.80
1	EA	BP-1238212 32oz DOME LIDS 1000/CS 45 PER SKID		30.00	30.00
		(Continued on Page 2)			

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

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INVOICE

Bill To:

GASMART USA / GASMART #6 5050 NE LAKEWOOD WAY LEE'S SUMMIT MO 64064 Ship To:

GASMART #6 5050 NE LAKEWOOD WAY LEE'S SUMMIT MO 64064

Invoice # Date	Customer # Customer P.O	Terms	Salesperson
725316 03/27/15	35523 NATALIE	NET 10 DAYS	
			МИ

Declinit Drice Amount

Quantity [U/M	Description	DSC	Unit Price	Amount
1 E	EA	(Page 2) MEU-16 16OZ MIX EM UP CUPS MX3900-50-PP-MIXEMUP 1000/CS - 12 PER SKID		112.00	112.00
1 F	EΑ	MEU-20 200Z MIX EM UP CUPS MX3900-57-PP-MIXEMUP 1000/CS - 18 PER SKID		124.00	124.00
1 E	EΑ	MDL-1620 12/16/200Z DOME LIDS MX4000-18-APET-PDL 1000/CS - 40 PER SKID		53.00	53.00
3 (GAL	FCB NEUT BASE FCB NEUTRAL BASE-BAG IN BOX CODE#-(31-06628-CX28155) SOLD BY THE GALLON ONLY		14.00	42.00
3	GAL	3076-384 FRIDGEE-COLA FCB 3 GAL BIB		14.00	42.00
		FB5. 32 OZ LID 1/2 PRICE. 1ST TIME GETTING NEWER CUPS. Tracking Numbers: 1Z6665590364133012 1Z6665590365462030 (Continued on Page 3)			

2511 Cassens Drive Fenton, MO 63026

Tel: 636-343-0664 Fax: 636-343-4084

www.taylormidwest.com







INVOICE

Bill To:

GASMART USA / GASMART #6 5050 NE LAKEWOOD WAY LEE'S SUMMIT MO 64064 Ship To:

GASMART #6 5050 NE LAKEWOOD WAY LEE'S SUMMIT MO 64064

Invoice # Date	Customer #	Customer P.O	Terms		Salesperson
725316 03/27/15	35523	NATALIE	NET 10	DAYS	
	NM				

Quantity U/M	Description	DSC	Unit Price	Amount
Quantity U/M	(Page 3) 1Z6665590365793209 1Z6665590365954624 1Z6665590365462030 Subtotal Sales Tax Total Due On 04/06/15	DSC	Unit Price	719.80 54.80 774.60

Western District of Missouri **Claims Register**

15-41915-abf11 Gas-Mart USA, Inc.

Judge: Arthur B. Federman Chapter: 11

Claim No: 8

Office: Kansas City Last Date to file claims: **Trustee: Last Date to file (Govt):**

Creditor: (15466031) Midwest Equipment Company 2511 Cassens Drive

Original Filed Original Entered Fenton, MO 63026 Date: 07/16/2015

Status: Filed by: CR Date: 07/16/2015 Entered by: ePOC Modified:

Amount claimed: \$2394.18 Unsecured claimed: \$2394.18

History:

8-1 07/16/2015 Claim #8 filed by Midwest Equipment Company, Amount claimed: **Details** \$2394.18 (ePOC)

Description:

Remarks: (8-1) Account Number (last 4 digits):5520

Claims Register Summary

Case Name: Gas-Mart USA. Inc. **Case Number:** 15-41915-abf11

Chapter: 11 **Date Filed:** 07/02/2015 **Total Number Of Claims: 1**

Total Amount Claimed*	\$2394.18
Total Amount Allowed*	

^{*}Includes general unsecured claims

The values are reflective of the data entered. Always refer to claim documents for actual amounts.

	Claimed	Allowed
Secured		
Priority		
Administrative		