UNITED STATES BANKRUPTCY WESTERN DISTRICT OF MISS		PRO	OOF OF CL	AIM.	YOUR CLAIM IS SCHEDULED AS:
Name of Debtor: Gas-Mart USA, Inc.			15-ABF		Schedule/Claim ID s466  Amount/Classification  UNKNOWN Unsecured Unliquidated
NOTE: Do not use this form to make a claim for an admin file a request for payment of an administrative expense ac	istrative expense that ar cording to 11 U.S.C. § 5	rises after i 103.	the bankruptcy filing. `	You may	1 19-31
Name of Creditor (the person or other entity to whom Missouri Emergency R	1	1	y): mission		The amounts reflected above constitute your claim as
Name and address where notices should be sent:  MO EMERGENCY RESPONSE COM.	374603209014	27	RECEIVE	)	scheduled by the Debtor or pursuant to a filed claim. If you agree with the amounts set forth herein, and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below.
DEPT OF PUBLIC SAFETY PO BOX 3133 JEFFERSON CITY, MO 65102-3133			DEC 29 201	5	If the amounts shown above are listed as Contingent, Unliquidated or Disputed, a proof of claim must be filed.
			BMC GRO		If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.
Creditor Telephone Number (573) ち26-7324			Osewa.dps.mo	o.gov	THIS SPACE IS FOR COURT USE ONLY
Name and address where payment should be se	nt (if different from al	oove):	Check box if you aware that anyone el filed a proof of claim	se has	Check this box to indicate that this claim amends a previously filed claim.
t.			your claim. Attach co statement giving part	opy of	Court Claim Number (if known):
Payment Telephone Number ( )	email:	50			Filed on:
<ol> <li>AMOUNT OF CLAIM AS OF DATE CASE FILE</li> <li>If all or part of your claim is secured, complete item 4</li> </ol>	\$ 2,6	20.	76		
If all or part of your claim is entitled to priority, comple	ete item 5.				
Check this box if claim includes interest or other char	ges in addition to the pr	incipal am	ount of claim. Attach it	emized sta	tement of interest or charges.
2. BASIS FOR CLAIM: Teir Two fe	e5				
WHICH CREDITOR IDENTIFIES DEBTOR:	a. Debtor may have	schedule	ed account as:		orm Claim Identifier (optional):
	See instruction #3a)		***************************************	(See ins	truction #3b)
<ol> <li>SECURED CLAIM: (See instruction #4)</li> <li>Check the appropriate box if your claim is secured by a liright of set off, attach required redacted documents, and requested information.</li> </ol>			nt of arrearage and ot led, included in secur		
Nature of property or right of setoff: Describe:	(6)	Basis fo	or Perfection:		
Real Estate Motor Vehicle Other			t of Secured Claim: \$		
Value of Property: \$		Amoun	t Unsecured: \$		
Annual Interest Rate: %	Variable				
5. Amount of Claim Entitled to Priority under 11 specifying the priority and state the amount.	U.S.C. § 507(a). If a	ny part o	of the claim falls in	to one of	the following categories, check the box
Amount entitled to priority: $\$$ 2, $620$ . To	•				
You MUST specify the priority of the claim:		_	Ť		
Domestic support obligations under 11 U.S.C. § 507	a)(1)(A) or (a)(1)(B).	L	Taxes or penalties of	wed to gov	vernmental units - 11 U.S.C. § 507(a)(8).
Up to \$2,775* of deposits toward purchase, lease, or services for personal, family, or household use -11 U			F		graph of 11 U.S.C. § 507(a)(5).
Wages, salaries, or commissions (up to \$12,475*), e- before filing of the bankruptcy petition or cessation of whichever is earlier - 11 U.S.C. § 507(a)(4).	arned within 180 days the debtor's business,				
* Amounts are subject to adjustment on 4/1/16 and every 3	years thereafter with re	spect to ca	ases commenced on o	r after the	date of adjustment.
6. CREDITS: The amount of all payments on this	claim has been credi	ted for the	e purpose of making	g this pro	of of claim. (See instruction #6)

Gas-Mart USA, Inc. POC

statements of running accounts, contracts, judgments, mortgag consumer credit agreement, a statement providing the informat	<u>nat support the claim.</u> such as promissory notes, purchase orders, invoices, itemized es, and security agreements, or, in the case of a claim based on an open-end or revolving on required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and of a security interest are attached. If the claim is secured by the debtor's principal residence, claim. (See instruction #7, and definition of "redacted").
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCU	MENTS MAY BE DESTROYED AFTER SCANNING.
If the documents are not available, please explain:  DATE-STAMPED COPY: To receive an acknowledgment of	the filips of your plains england a stamped solf addressed
envelope and copy of this proof of claim.	ine illing or your claim, enclose a stamped, sen-addressed
	ent by mail or hand delivered (FAXES AND EMAILS NOT ACCEPTED) so that it is me on December 29, 2015 for all Governmental Units and Non-Governmental
BY MAIL TO: BMC Group, Inc	BY MESSENGER OR OVERNIGHT DELIVERY TO: BMC Group, Inc
Attn: Gas-Mart, USA Inc. Claims Processing	Attn: Gas-Mart, USA Inc. Claims Processing
PO Box 90100 Los Angeles, CA 90009	300 N. Continental Blvd, Suite 570 El Segundo, CA 90245-5072
Los Aligeles, CA 90009	El Segulido, CA 90243-3072
8. SIGNATURE: (See instruction #8)	
Check the appropriate 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 3005.)
declare under penalty of perjury that the information provided in this claim is	true and correct to the best of my knowledge, information, and reasonable belief.
Print Name: Shelly Honse Title: Fiscal Manager Company: State Energerey Manager Address and telephone number (if different from notice address above):	Desponsen
Title: Fiscal Manager	mocommiss. I hell work 12/22/15
Company: State Emergered I Vanagement Address and telephone number (if different from notice address above):	(Signature) (Date)
	(oldio)
Telephone number: email:	
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonme	ent for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.
· · · · · · · · · · · · · · · · · · ·	

# LIST OF DEBTORS:

Debtor Name	Case Number
Gas-Mart USA, Inc.	15-41915-ABF
Aving-Rice, LLC	15-41917-ABF
Fran Transport & Oil Co.	15-41918-ABF
G&G Enterprises, LLC	15-41919-ABF

	UNITED STATES BANKRUPTCY COUR WESTERN DISTRICT OF MISSOUR		PROOF OF INTEREST
Indicate Debtor in w (Check only one Debto	hich you hold an Equity Interest by checking the	appropriate box.	
	c. (Case No. 15-41915)   Fran Transport 8	oil Co. (15-41918) LLC (15-41919)	
1. Name of holder of "Interest Holder"):	the Equity Interest (Referred to hereinafter as the	Check box if you are aware that anyone else has filed a proof of interest relating to your interest. Attach copy of statement giving particulars.	
		Check box if you have never received any notices from the bankruptcy court or BMC Group in this case.	7
TalankanaNanka		☐ Check box if this address differs from the address on the envelope sent to you by BMC	
Telephone Number (	) DULD NOT be used to make a claim against the Deb	Group.	
Proof of Claim form sh Interest in the Debtor. interest you may have	nould be used for that purpose. This form should only An Equity Interest, as used herein, refers specific with respect to the above-named Debtor. Partie I file a proof of interest at this time.	be used to assert an Equity cally to any ownership	
	inc a proof of interest at this time.		If you have already filed a proof of interest with BMC, you do not need to file again.
			THIS SPACE IS FOR COURT USE ONLY
Account or other num	per by which Interest Holder identifies Debtor:		THIS STACE IS FOR GOOK! USE ONE!
		Check here if this proof of intere replaces a previously fil amends a previously fil	est:: led Proof of Interest dated: led Proof of Interest dated:
2. Name and Address	s of any person or entity that is the record holder	3. Date Equity Interest was ac	quired:
for the Equity Interes	et asserted in this Proof of Interest:		
Telephone Number (	)		
4. Total amount of m	ember interest:	5. Certificate number(s):	
6. Type of Equity Inte	erest:		
Please indicate the typ	e of Equity Interest you hold:		
☐ Check this be	ox if your Equity Interest is based on actual shares of	stock held in the Debtor or a men	mbership interest held in the Debtor.
Number of s	hares held or percentage of membership interest:		
	ox if your Equity Interest is based on anything else an	d describe that interest:	
7. SUPPORTING DO NOT SEND ORIG	DOCUMENTS: Attach copies of supporting doc	cuments, such as stock certifica ble, explain. If the documents are	ites, option agreements, warrants etc. voluminous, attach a summary.
8. DATE-STAMPED	COPY: To receive an acknowledgment of the filing of this proof of interest.	of your proof of interest, enclose	a stamped, self-addressed envelope and cop
so that it is actually re	npleted proof of interest form must be sent by mail or ceived on or before 5:00 pm, Central Standard ti viduals, partnerships, corporations, joint ventures, tru	me, on December 29, 2015 for e	
BY MAIL TO: BMC Group, Inc	BMC Group,	R OVERNIGHT DELIVERY TO:	
Attn: Gas-Mart, USA Ir PO Box 90100 Los Angeles, CA 9000	300 N Contine	t, USA Inc. Claims Processing ental Blvd #570 CA 90245	
Admin - 107 33 50- 2075 (200			
DATE	SIGN and print the name and title, if any, of the Inte to file this proof of interest (attach copy		1

# INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

# ITEMS TO BE COMPLETED IN PROOF OF CLAIM FORM (IF NOT ALREADY PROPERLY FILLED IN)

### Court, Name of Debtor, and Case Number:

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's full name, and the case number. If you received a notice of the case from the Claims Agent, BMC Group, some or all of this information may have been already completed. Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

### 1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

### 2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor: State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

### 3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

### 3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

### 4. Secured Claims

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions) If the claim is secured, check the box for the nature and value of property that secures the claim,

attach copies of lien documentation and state, as of the date of the bankruptcy filing the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

### 5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of your claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

### 6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

### 7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

# 8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

# DEFINITIONS

# INFORMATION

# DEBTOR

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

### CREDITOR

A creditor is a person, corporation, or other entity to whom the debtor owes a debt that was incurred before the date of the bankruptcy filing. See 11 U.S.C. §101(10).

### CLAIM

A claim is the creditor's right to receive payment for a debt owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101(5). A claim may be secured or unsecured.

### PROOF OF CLAIM

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. This form must be filed with the court-appointed Claims Agent, BMC Group, at the address listed in section #7 above.

### SECURED CLAIM Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court

judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

### UNSECURED CLAIM

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

# CLAIM ENTITLED TO PRIORITY Under 11 U.S.C. §507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

### REDACTE

A document has been reducted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor must show only the last four digits of any social-security, individual's tax-identification, or financial-account number, only the initials of a minor's name, and only the year of any person's date of birth. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information.

### **EVIDENCE OF PERFECTION**

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

# OFFERS TO PURCHASE A CLAIM

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. §101 et seq.), and any applicable orders of the bankruptcy court.

# **Date-Stamped Copy**

Return claim form and attachments, if any. If you wish to receive an acknowledgement of your claim, please enclose a self-addressed stamped envelope and a second copy of the proof of claim form with any attachments to the Claims Agent, BMC Group, at the address on the second page of this form.

Please read - important information: upon completion of this claim form, you are certifying that the statements herein are true.

Be sure all items are answered on the claim form. If not applicable, insert "Not Applicable."

ONCE YOUR CLAIM IS FILED YOU CAN OBTAIN OR VERIFY YOUR CLAIM NUMBER BY VISITING www.bincgroup.com/GasMartUSA

# IN THE UNITED STATES BANKRUPTCY COURT FOR THE WESTERN DISTRICT OF MISSOURI KANSAS CITY DIVISION

IN THE MATTER OF	)	
	)	Case No. BK 15-41915-11
GAS-MART USA, INC. et al.,	)	(Lead Case)
	)	
Debtors. 1	)	Chapter 11

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# NOTICE OF BAR DATE FOR FILING OF PROOF OF CLAIM OR INTEREST (LAST DAY TO FILE CLAIMS OR INTERESTS)

# TO ALL PERSONS AND ENTITIES WITH CLAIMS AGAINST, OR INTERESTS IN, ANY OF THE DEBTORS LISTED IN THIS BAR DATE NOTICE:

This notice (the "Bar Date Notice") describes the procedures by which persons or entities who believe they have a claim against, or an interest in, the Debtors must take action in order to preserve their ability to pursue such claims or interests and participate in the Debtors' chapter 11 cases and any plan(s) of reorganization. This Bar Date Notice describes the following: (i) a claim or interest; (ii) who must file a proof of claim or interest; (iii) who need not file a proof of claim or interest; (iv) the deadline for filing proofs of claim or interest; (v) how to file a proof of claim or interest; and (vi) the consequences for not filing a proof of claim or interest.

On September 21, 2015, the United States Bankruptcy Court for the Western District of Missouri, Kansas City Division (the "Bankruptcy Court") entered an Order (the "Bar Date Order") in the Debtors' chapter 11 cases establishing **December 29, 2015** as the general bar date (the "General Bar Date") and other filing deadlines for certain other claims, identified below. Except as described below, the Bar Date Order requires that any Claim or Interest (as defined below) against any of the Debtors listed on Exhibit A to this Bar Date Notice be filed with BMC Group, Inc. (the "Claims and Noticing Agent") by submitting a proof of claim or interest to the Claims and Noticing Agent as provided herein.

# 1. WHAT IS A CLAIM OR INTEREST

For purposes of this Bar Date Notice, a "Claim" shall mean, as to or against any of the Debtors: (1) any right to payment, whether or not such right is reduced to judgment, liquidated, unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal, equitable, secured or unsecured; or (2) any right to an equitable remedy for breach of performance if such breach gives rise to a right to payment, whether or not such right to an equitable remedy is reduced to judgment, fixed, contingent, matured, unmatured, disputed, undisputed, secured or

CORE/3006787.0002/109288138.2

<sup>&</sup>lt;sup>1</sup> Gas-Mart USA, Inc., debtor and debtor-in-possession in Case BK 15-41915-11, Aving-Rice, LLC, debtor and debtor-in-possession in Case BK 15-41917-11, Fran Transport & Oil Co.. debtor and debtor-in-possession in Case BK 15-41918-11, and G&G Enterprises, LLC, debtor and debtor-in-possession in Case BK 15-41919-11 (collectively referred to herein as "Debtors").

unsecured. This Bar Date Notice is applicable to all Claims against any of the Debtors arising prior to July 2, 2015.

For purposes of this Bar Date Notice, an "Interest" shall mean, as to or against any of the Debtors: (1) any stock interest in a corporate Debtor; (2) any membership interest in a limited liability company Debtor; and (3) any other ownership interest of any kind (such as preferred stock, any option to acquire an ownership interest, or any contract right involving an ownership interest).

# 2. WHO MUST FILE A PROOF OF CLAIM OR INTEREST

You MUST file a proof of claim or interest ("Proof of Claim or Interest") by submitting your Proof of Claim or Interest to the Claims and Noticing Agent so that it is actually received on or before the General Bar Date, unless otherwise provided herein, if:

- a. you hold a Claim or Interest against a Debtor (whether secured, priority or unsecured) that arose prior to July 2, 2015 and such Claim or Interest is not described in section 3 below, and either
  - 1). your Claim or Interest is listed on the Debtors' Schedules of Assets and Liabilities (the "Schedules") as a "disputed," "contingent," or "unliquidated" Claim or Interest and you desire to participate in the Debtors' chapter 11 cases or share in any distribution in any of these chapter 11 cases, or
  - 2).your Claim or Interest is improperly classified in the Schedules or is listed in an incorrect amount and you desire to have your Claim or Interest allowed in a classification or amount other than set forth in the Schedules, or
  - 3). you are asserting a Claim or Interest that is not listed in the Schedules; or
  - 4). you believe you have a Claim against a Debtor under § 503(b)(9) of the Bankruptcy Code for the value of any goods received by a Debtor within 20 days before July 2, 2015 in which the goods have been sold by a Debtor in the ordinary course of its business.

# 3. WHO NEED NOT FILE A PROOF OF CLAIM

You need not file a Proof of Claim or Interest if:

- a. You (i) agree with the nature, classification, and amount of your Claim or Interest as set forth in the Schedules and (ii) your Claim or Interest is not listed as "disputed," "contingent," or "unliquidated" in the Schedules.
- b. You have already properly filed a Proof of Claim or Interest against the correct Debtor (provided however, that if you intend to amend such Proof of Claim or Interest, your amended Proof of Claim or Interest must be filed under the terms and conditions set forth herein).

c. You have a Claim allowable under §§ 503(b) and 507(a)(2) of the Bankruptcy Code as an administrative expense of the Debtors' chapter 11 cases (except for Claims arising under § 503(b)(9) of the Bankruptcy Code, which must be filed by the General Bar Date).

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d. You hold a claim against a Debtor that previously has been allowed by, or paid pursuant to, an order of the Bankruptcy Court.

YOU SHOULD NOT FILE A PROOF OF CLAIM OR INTEREST IF YOU DO NOT HAVE A CLAIM AGAINST, OR INTEREST IN, ANY OF THE DEBTORS.

YOUR RECEIPT OF THIS BAR DATE NOTICE DOES NOT MEAN THAT YOU HAVE A CLAIM AGAINST, OR INTEREST IN, ANY OF THE DEBTORS, OR THAT THE DEBTORS OR THE BANKRUPTCY COURT BELIEVE THAT YOU HAVE A CLAIM OR INTEREST.

NEITHER THE DEBTORS, THEIR ATTORNEYS NOR THE CLAIMS AND NOTICING AGENT CAN ADVISE YOU ABOUT, OR WHETHER YOU SHOULD FILE, A PROOF OF CLAIM OR INTEREST.

# 4. DEADLINE TO FILE A CLAIM OR INTEREST

- a. General Bar Date. If your Claim or Interest is described in Section 2 above, you must file your Proof of Claim or Interest with the Claims and Noticing Agent so that the Proof of Claim or Interest is ACTUALLY RECEIVED no later than 5:00 p.m. (Prevailing Central Time) on December 29, 2015.
- b. Executory Contracts and Unexpired Leases Bar Date. If you have a Claim arising out of the rejection of an executory contract or an unexpired lease you must file, and the Claims and Noticing Agent must receive, a Proof of Claim on or before 5:00 p.m. (Prevailing Central Time) by the later of: (a) December 29, 2015 or (b) thirty (30) days after the effective date of such rejection as ordered by the Bankruptcy Court.
- c. Amended Schedules Bar Date. If the Debtors amend their Schedules after mailing and publishing this Bar Date Notice and your Claim or Interest is affected by such amendment, then you must file a Proof of Claim or Interest, or amend any Proof of Claim or Interest you previously filed, on or before 5 p.m. (Prevailing Central Time) by the later of: (a) the December 29, 2015, or (b) thirty (30) days after the Debtors serve you with notice that the Debtors have amended their Schedules.

### 5. HOW TO FILE A CLAIM OR INTEREST

a. **Proof of Claim and Interest Forms.** For your convenience, a Proof of Claim form is included with this Bar Date Notice, and a Proof of Interest form is available at the website maintained by the Claims and Noticing Agent at www.bmcgroup.com/gasmartusa.

- b. Identification of Debtors and Claimants. You must identify on your Proof of Claim or Interest the holder or holders of the Claim or Interest and the particular Debtor against which your Claim or Interest is asserted. A list of Debtors, together with their respective case numbers and federal tax identification numbers, is attached to this Bar Date Notice as Exhibit A. If you are asserting Claims or Interests against more than one Debtor, you must file a separate Proof of Claim or Interest with respect to each such Debtor. If you list more than one Debtor on your Proof of Claim or Interest form, the Debtors will treat such Claim or Interest as filed against the Debtor you list first. Any Claims or Interests filed in the Joint Administration Case Number (In re Gas-Mart USA, Inc., Case No. 15-41915-11) shall be deemed filed only against Gas-Mart USA, Inc.
- c. Where and How to file Proof of Claim and Interest Forms. A Proof of Claim or Interest is filed by submitting the Proof of Claim or Interest to the Claims and Noticing Agent. In order to be considered timely filed, a Proof of Claim or Interest must be filed so as to be actually received by the Claims and Noticing Agent on or before 5:00 p.m. (Prevailing Central Time), on or before the Bar Date applicable to your Claim(s) or Interest(s), at the following address:

If by regular mail:

BMC Group, Inc. Attn: Gas-Mart, USA Inc. Claims Processing PO Box 90100 Los Angeles, CA 90009

If by person, personal service, federal express or courier:

BMC Group, Inc. Attn: Gas-Mart USA, Inc. Claims Processing 300 N Continental Blvd #570 El Segundo, CA 90245

Electronic submissions, including, but not limited to, facsimile and electronic mail submissions are prohibited and will not be accepted by the Claims and Noticing Agent.

YOU MUST SUBMIT A PROOF OF CLAIM OR INTEREST TO THE CLAIMS AND NOTICING AGENT. DO NOT SUBMIT A PROOF OF CLAIM OR INTEREST TO ANY OTHER PARTY, INCLUDING THE CLERK OF THE COURT OR COUNSEL FOR THE DEBTORS.

6. CONSEQUENCES OF FAILURE TO FILE A PROOF OF CLAIM OR INTEREST

IF YOU ARE REQUIRED TO FILE A PROOF OF CLAIM OR INTEREST, AND YOU FAIL TO DO SO BY THE BAR DATE APPLICABLE TO YOUR CLAIM(S) OR INTEREST(S) DESCRIBED IN THIS BAR DATE NOTICE, UNLESS OTHERWISE

PROVIDED BY SUBSEQUENT ORDER OF THE BANKRUPTCY COURT PURSUANT TO RELEVANT LAW, YOU WILL BE FOREVER PROHIBITED FROM:

- A. ASSERTING ANY CLAIM OR INTEREST AGAINST THE DEBTORS, AND THE DEBTORS AND THEIR PROPERTY WILL BE FOREVER DISCHARGED FROM ANY AND ALL INDEBTEDNESS OR LIABILITY OR OWNERSHIP RIGHTS WITH RESPECT TO SUCH CLAIM OR INTEREST; AND
- B. VOTING UPON, OR RECEIVING DISTRIBUTIONS UNDER, ANY PLAN OR PLANS OF REORGANIZATION IN THESE CHAPTER 11 CASES IN RESPECT OF SUCH CLAIM OR INTEREST.

If it is unclear from the Schedules whether your Claim or Interest is disputed, contingent or unliquidated as to amount or is otherwise properly listed and classified, you must file a Proof of Claim or Interest on or before the Bar Date applicable to your Claim(s) or Interest(s). If you rely on the information in the Schedules you bear responsibility for determining that your Claim or Interest is accurately listed therein.

# 7. RESERVATION OF RIGHTS

The Debtors reserve the right to: (a) dispute, or to assert offsets or defenses against, any filed Claim or Interest, or any Claim or Interest listed or reflected in the Schedules, as to nature, amount, liability, classification or otherwise; or (b) subsequently designate any Claim or Interest as disputed, contingent or unliquidated. Nothing set forth in this Bar Date Notice shall preclude the Debtors from objecting to any Claim or Interest, whether scheduled or filed, on any grounds.

# 8. ADDITIONAL INFORMATION

A holder of a possible claim or interest with respect to any of the Debtors should consult an attorney regarding any matters not covered by this notice, such as whether the holder should file a proof of claim or interest.

THE FACT THAT YOU HAVE RECEIVED THIS NOTICE DOES NOT MEAN THAT YOU HAVE A CLAIM OR INTEREST OR THAT THE DEBTORS BELIEVE YOU HAVE A CLAIM OR INTEREST.

The Claims and Noticing Agent cannot advise you how to file, or whether you should file, a proof of claim or interest. Questions concerning the contents of this Notice and requests for copies of filed proofs of claim or interests should be directed to BMC at (888) 909-0100. Please note that neither BMC's staff, counsel to the Debtors nor the Clerk of the Court's Office is permitted to give you legal advice. BMC cannot advise you how to file, or whether you should file, a proof of claim or interest.

Additional proof of claim or interest form requests and further inquiries regarding filing a Proof of Claim or Interest against any of the Debtors may be directed to the Claims and Noticing Agent in writing at the following address, or by calling the Claims and Noticing Agent at the number listed below.

BMC Group, Inc. Attn: Gas-Mart, USA Inc. Claims Processing PO Box 90100 Los Angeles, CA 90009 (888) 909-0100

Paul M. Hoffmann (Missouri Bar No. 31922) Sharon L. Stolte (Missouri Bar No. 41133 Nicholas J. Zluticky (Missouri Bar No. 61203) STINSON LEONARD STREET LLP 1201 Walnut, Suite 2900 Kansas City, MO 64106-2150

ATTORNEYS FOR DEBTORS AND DEBTORS-IN-POSSESSION

# **EXHIBIT A - DEBTORS**

<u>Debtor</u> Gas-Mart USA, Inc.	Case No. 15-41915-11	<u>Tax I.D.</u> 48-1172645
Aving-Rice, LLC	15-41917-11	45-4504026
Fran Transport & Oil Co.	15-41918-11	04-3848467
G&G Enterprises, LLC	15-41919-11	80-0100399

MISSOURI DEP	ARTMENT OF PUBLIC SAFETY -	FEE CALCULATION WORKSHEET					Page:	1 of 3
Remit to: Misso	uri Emergency Response Comn	nission - Department of Public Safety - PO Box	3133 Jeffe	rson Ci	ity, MO	65102	Date: 10	0/16/2015
Business: Gasr	mart Usa - 10777 Barkley Suite #20	00 - Overland Park, KS 66211						
Contact:		Telephone:						
Α	В	С	D or	Е	F	G	J	K
<b>Facility County</b>	Facility Name	Facility	Facility	Type		eportable	Calculated	DPS
or City of St. Louis (Alphabetically)	(Alphabetically within County)	Street, City, Zip	\$50 - Retail Petroleum	\$100 Other	ļ	emicals ach after 3	Amount D or E + G	USE X=
Buchanan	GAS MART USA #1	4101 NORTH BELT HWY - ST JOSEPH, MO 64506	\$50				\$50	
Cass	GAS MART USA #9	500 E NORTH AVENUE - BELTON, MO 64012	\$50				\$50	
Clay	COP Site #6568-131	100 S. Forrest Avenue - Liberty, MO 64068	\$50				\$50	-
Clay	COP Site #6127-136	4430 NE Chouteau Tfy - Kansas City, MO 64117	\$50				\$50	
Clay	COP Site #6192-139	4400 NE Antioch - Kansas City, MO 64117	\$50				\$50	
Clay	COP Site #6199-104	9901 NE Barry Rd - Kansas City, MO 64157	\$50				\$50	
Clay	COP Site #6278-123	920 Sutton Place - Liberty, MO 67226	\$50				\$50	
Clay	GAS MART USA #10	7303 NORTH OAK ST - GLADSTONE, MO 64118	\$50				\$50	
Clay	GAS MART USA #11	1203 ARMOUR ROAD - NORTH KANSAS CITY, MO	\$50		-		\$50	
Jackson	COP site #6151-135	6815 E Front Street - Kansas City, MO 64210	\$50				\$50	
Jackson	COP Site #6563-121	6903 Blue Ridge Boulevard - Raytown, MO 64133	\$50				\$50	
Jackson	COP Site #6563-121	6903 Blue Ridge Boulevard - Raytown, MO 64133	\$50				\$50	
Jackson	COP Site #6095-108	11100 Holmes - Kansas City, MO 64131	\$50				\$50	
Jackson	COP Site # 6106-113	1202 N 7 Hwy Blvd - Blue Springs, MO 64015	\$50				\$50	
Jackson	COP Site # 6165-125	7000 E. Bannister - Kansas City, MO 64134	\$50				\$50	
	CERTIFI	CATION	Total of Calculated Amount (J)					
(Read and sign after reviewing all sections)		Subtract Federal Transportation Fees Petroleum Business Certification must be completed & attached						
		examined and am familiar with the information	Base Amount Owed					
	bmitted in pages one through 3 and that based on my inquiry of those individuals responsible for taining the information, I believe that the submitted information is true, accurate, and complete.		Late Charges (10% for receipt after March 1st plus 1% per month)					
			Optional Distril	oution Fee	•	·		
						Amount Owed	(see last page)	
Name DAVID GEORGI	Title PRESIDENT	Signature ————————————————————————————————————			Date		Check Number	r

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# MISSOURI DEPARTMENT OF PUBLIC SAFETY - FEE CALCULATION WORKSHEET

Remit to: Missouri Emergency Response Commission - Department of Public Safety - PO Box 3133 Jefferson City, MO 65102

Business: Gasmart Usa - 10777 BARKLEY ST #200 - OVERLAND PARK, KS 66211-1611

Contact: Rola	nd Evans	Telephone: 913-559-5800						
Α	В	С	D or E F G		J	K		
or City of St. Louis (Alphabetically)	Facility Name (Alphabetically within County)	Facility Street, City, Zip	Facility \$50 - Retail Petroleum	Other \$20 each after 3		Calculated Amount D or E + G	DP US	
Jackson	COP Site #6070-128	6024 Blue Ridge - Raytown, MO 64133	\$50				\$50	-
Jackson	COP Site #6153-129	4208 S. Noland Road - Independence, MO 64058	\$50				\$50	
Jackson	COP Site #6331-114	7900 Wornall - Kansas City, MO 64114	\$50				\$50	
Jackson	COP Site #6332-118	9805 East Hwy 350 - Raytown, MO 64133	\$50				\$50	
Jackson	COP Site #6561-106	7447 State Line Road - Kansas City, MO 64114	\$50				\$50	
Jackson	COP Site #6562-103	10245 State Line Road - Kansas City, MO 64114	\$50				\$50	
Jackson	COP Site #6564-124	300 South 291 Hwy Lee's Summit, MO 64063	\$50				\$50	
Jackson	COP Site #6567-122	8100 West Ridge - Raytown, MO 64138	\$50				\$50	
Jackson	GAS MART USA #12	1501 WOODS CHAPEL ROAD - BLUE SPRINGS,	\$50				\$50	
Jackson	GAS MART USA #13	1900 WEST 40 HWY - BLUE SPRINGS, MO 64015	\$50				\$50	
Jackson	GAS MART USA #14	12421 GRANDVIEW ROAD - GRANDVIEW, MO	\$50				\$50	
Jackson	GAS MART USA #15	2561 SOUTH 291 HWY - INDEPENDENCE, MO	\$50				\$50	
Jackson	GAS MART USA #16	17600 EAST 39th STREET - INDEPENDENCE, MO	\$50				\$50	
Jackson	GAS MART USA #17	11715 EAST HWY 24 - INDEPENDENCE, MO 64054	\$50				\$50	
Jackson	GAS MART USA #18	15800 EAST 23rd - INDEPENDENCE, MO 64055	\$50				\$50	
CERTIFICATION  (Read and sign after reviewing all sections)		Total of Calculated Amount (J)  Subtract Federal Transportation Fees Petroleum Business Certification must be completed &						
certify under ne	,	examined and am familiar with the information	attached  Base Amount Owed					
submitted in pag	ges one through 3 and that based o	n my inquiry of those individuals responsible for ed information is true, accurate, and complete.		(10% for re	ceipt after N	March 1st plus		
			Optional Distribution Fee (\$10 fee per location)					
					Total	Amount Owed	(see last page)	
Name DAVID GEORG	Title E PRESIDENT	Signature			Date		Check Number	•

Page: 2 of 3

Date: 10/16/2015

#### MISSOURI DEPARTMENT OF PUBLIC SAFETY - FEE CALCULATION WORKSHEET Page: 3 of 3 Remit to: Missouri Emergency Response Commission - Department of Public Safety - PO Box 3133 Jefferson City, MO 65102 Date: 10/16/2015 Business: Gasmart Usa - 10777 BARKLEY ST #200 - OVERLAND PARK, KS 66211 Contact: Roland Evans Telephone: 913-559-5800 В C D or E F G J Κ **Facility Type** Facility County **Facility Name Facility** # of Reportable Calculated DPS Street, City, Zip Chemicals Amount USE or City of (Alphabetically within County) \$50 -\$100 D or E+G Retail Other St. Louis X= \$20 each after 3 Petroleum (Alphabetically) GAS MART USA #2 Jackson 111 SE AA HWY - BLUE SPRINGS, MO 64015 \$50 \$50 GAS MART USA #6 Jackson 5050 NE LAKEWOOD BLVD - LEES SUMMIT, MO \$50 \$50 Jackson GAS MART USA #7 4111 BLUE RIDGE CUT OFF - KANSAS CITY, MO \$50 \$50 GAS MART USA #4 250 E COOPER - WARRENSBURG, MO 64093 \$50 Johnson \$50 Platte COP Site #6087-107 6316 Hwy 9 North - Parkville, MO 64152 \$50 \$50 COP Site #6201-127 Platte 6901 NW Barry Road - Kansas City, MO 64153 \$50 \$50 Platte COP Site #6565-115 9917 E. Bannister - Kansas City, MO 64134 \$50 \$50 GAS MART USA #3 2301 PRAIRIE VIEW ROAD - PLATTE CITY, MO Platte \$50 \$50 Total of Calculated Amount (J) CERTIFICATION \$1,900.00 Subtract Federal Transportation Fees Petroleum \$0.00 Business Certification must be completed & (Read and sign after reviewing all sections) attached I certify under penalty of law that I have personally examined and am familiar with the information Base Amount Owed \$1,900.00 submitted in pages one through 3 and that based on my inquiry of those individuals responsible for Late Charges (10% for receipt after March 1st plus \$340.76 obtaining the information, I believe that the submitted information is true, accurate, and complete. 1% per month) Optional Distribution Fee (\$10 fee per location) \$380.00 Total Amount Owed \$2,620,76 Title Name Signature Date Check Number

DAVID GEORGE

**PRESIDENT**