

**B10 (Official Form 10) (04/13)**

<b>UNITED STATES BANKRUPTCY COURT Western District of Missouri</b>		<b>PROOF OF CLAIM</b>
Name of Debtor: Gas-Mart USA, Inc.		Case Number: 15-41915
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): <b>BURTON PLUMBING SERVICES INC</b>		<b>FILED</b> <b>U.S. Bankruptcy Court</b> <b>Western District of Missouri</b> <b>7/29/2015</b> <b>Paige Wymore-Wynn, Clerk</b> <b>COURT USE ONLY</b>
Name and address where notices should be sent: BURTON PLUMBING SERVICES INC 5010 F STREET OMAHA NE 68117-0000  Telephone number: 402-343-0055      email: pwells@justcallburton.com		<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
Name and address where payment should be sent (if different from above):    Telephone number:      email:		<input type="checkbox"/> 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.
1. Amount of Claim as of Date Case Filed: \$ <u>8272.73</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input checked="" type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>Ran new gas main and lines to furnace</u> (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor: <u>6936</u>	3a. Debtor may have scheduled account as: _____ (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate (when case was filed) ___% <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable		Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ 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.		
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier - 11 U.S.C. §507(a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507(a)(5).
<input type="checkbox"/> 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).	<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507(a)(8).	<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.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 claim has been credited for the purpose of making this proof of claim. (See instruction #6)		

Gas-Mart USA, Inc. POC  
  
 00022

**7. Documents:** Attached are **redacted** copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and **redacted** copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and the definition of "redacted".)  
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.  
If the documents are not available, please explain:

**8. Signature:** (See instruction #8) Check the appropriate box.

<input checked="" type="checkbox"/> I am the creditor.	<input checked="" type="checkbox"/> I am the creditor's authorized agent.	<input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. (See Bankruptcy Rule 3004.)	<input type="checkbox"/> I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)
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I 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: Pam Wells

Title: Accounts Receivable

Company: Burton Plumbing Services

Inc

Address and telephone number (if different from notice address above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

/s/ Pam Wells  
(Signature)

7/29/2015  
(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.*



**Burton Plumbing Services, Inc.**

5010 F Street  
Omaha, NE 68117

7/29/2015
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EDDY'S 66 GAS MART USA 429 W S OMAHA BRIDGE RD COUNCIL BLUFFS, IA 51501
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		\$8,272.73	
Date	Transaction	Amount	Balance
01/24/2015	INV #150126ckjoJ. Due 02/23/2015. Orig. Amount \$7,651.97. MSM: 150126ckjonesJ	7,651.97	7,651.97
03/06/2015	INV #FC 1105. Due 03/06/2015. Orig. Amount \$48.43. Finance Charge	48.43	7,700.40
04/06/2015	INV #FC 1148. Due 04/06/2015. Orig. Amount \$136.48. Finance Charge	136.48	7,836.88
05/07/2015	INV #FC 1186. Due 05/07/2015. Orig. Amount \$136.48. Finance Charge	136.48	7,973.36
06/08/2015	INV #FC 1233. Due 06/08/2015. Orig. Amount \$140.88. Finance Charge	140.88	8,114.24
07/14/2015	INV #FC 1288. Due 07/14/2015. Orig. Amount \$158.49. Finance Charge	158.49	8,272.73
		\$8,272.73	
0.00		158.49	140.88
		136.48	7,836.88
		7,836.88	\$8,272.73



5010 F Street  
Omaha, NE 68117

Date 07-24-2015

TR # \_\_\_\_\_

FIND US ON



Job # 461704

196936

(402) 343-0011

15012664 JT

Customer Name <u>Gas Mart USA</u> <u>Eddy's 66</u>	Job Address	Caller Name
Email Address	City, State, Zip <u>Council Bluffs IA 51501</u>	Ph #1 Ph #2
Job Contact Name <u>LARRY STOCK</u>	Billing Address (if different) <u>429 W S OMAHA BRIDGE ROAD</u>	Service Partner Member? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**ORIGINAL REASON FOR THE CALL:**  
 SUMMARY: Black hills Tagged Gas Service - 1st 2 to 3 Amp Looking for Gas Leaks found Several Fixed, found several more, Owners Decided to Run New Gas Main and Branches to FURNACES

**WORK AUTHORIZATION:** I, the undersigned, am owner/authorized representative/tenant of the premises at which the work above is being done. I hereby authorize you to perform the above recommendation, and to use such labor and materials as you deem advisable. Unless prior authorization for billing, payment for all work done is due upon completion (C.O.D.). A \$10.00 BILLING CHARGE is due thereafter. An office billing charge and/or finance charge of 1.75% per month (21% per annum) will be added after 10 days past due. I agree to pay reasonable attorney's fees, court costs and collection fees in the event of legal action. I have read this contract, including the terms and conditions on the reverse side hereof and agree to be bound by all the terms contained herein. All old parts will be removed from premises and discarded, unless otherwise specified herein.

I HEREBY AUTHORIZE YOU TO PROCEED WITH THE ABOVE WORK AT THE UPFRONT FEE OF \$ \_\_\_\_\_ Signature: \_\_\_\_\_

*For your peace of mind, should the repair amount exceed 25% of your system's replacement value, our technician is required to inform you of options for both repairing and replacing the equipment.*

Qty	Task#	Description	Rate
		<u>Pen Proposal Signed</u>	
	<u>1#</u>	<u>Labor and Materials</u>	<u>1844.38</u>
	<u>2#</u>	<u>Labor and Materials</u>	<u>5306.99</u>

MC  Visa  Disc  AmEx  Auth # \_\_\_\_\_

Card #: \_\_\_\_\_ Exp: \_\_\_\_\_

Financed  Bill Customer  Please pay from this invoice - Work performed C.O.D.

**ACCEPTANCE OF WORK PERFORMED:** I acknowledge satisfactory completion of the above described work and that the premises has been left in satisfactory condition. I understand that if my check does not clear, I am liable for the check and any charges from the bank. I agree to pay 1.75% per month for past due contracts (minimum charge \$15). In the event that collection efforts are initiated against me, I shall pay for all associated fees at the posted rates as well as all cost of collection fees and reasonable attorney fees. I agree that the amount set forth in the space marked "TOTAL COST" is the total flat price I have agreed to.

SIGNATURE \_\_\_\_\_

**PAYMENT 1** Cash  Check  Check #: \_\_\_\_\_

**PAYMENT 2** Cash  Check  Check #: \_\_\_\_\_

I decline to have the recommended work performed at this time.  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**WANT TO PAY LESS?**  
 My Service Technician presented me with a Service Partner Program and explained the benefits.  
 I want to save money and become a Service Partner  Initial ONE  
 OR  
 At this time I decline the offer

**SERVICE TECHNICIAN ACKNOWLEDGEMENT**  
 Prior to the customer entering into the contract, I have discussed the nature of the service and cost and I have given a copy of the contract to the customer. All work I have done has been in compliance with company standards in workmanship, manner, to building codes when applicable.  
 PRINT \_\_\_\_\_

Subtotal	<u>7,151.37</u>
Discount	
Subtotal	<u>7,151.37</u>
Dispatch Fee	
Service Partner Membership	
Tax	<u>500.60</u>
Deposit	
Total Amount Due	<u>7,651.97</u>

**SERVICE PARTNER SAVINGS**  
\$ \_\_\_\_\_

**CUSTOMER SERVICE IS OUR #1 FOCUS**  
 If you are not completely satisfied for any reason, please call and speak with the Service Manager. Your feedback is very important to us.  
**THANK YOU FOR CHOOSING US!!**

# Western District of Missouri Claims Register

[15-41915-abf11 Gas-Mart USA, Inc.](#)

**Judge:** Arthur B. Federman      **Chapter:** 11  
**Office:** Kansas City              **Last Date to file claims:**  
**Trustee:**                              **Last Date to file (Govt):**

<b>Creditor:</b> (15455705) BURTON PLUMBING SERVICES INC 5010 F STREET OMAHA NE 68117- 0000	<b>Claim No: 22</b> <i>Original Filed</i> Date: 07/29/2015 <i>Original Entered</i> Date: 07/29/2015	<b>Status:</b> Filed by: CR Entered by: ePOC Modified:
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Amount	claimed:	\$8272.73			
Unsecured	claimed:	\$8272.73			

*History:*

<a href="#">Details</a>	<a href="#">22-1</a>	07/29/2015	Claim #22 filed by BURTON PLUMBING SERVICES INC, Amount claimed: \$8272.73 (ePOC)
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*Description:*

Remarks: (22-1) Account Number (last 4 digits):6936		
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## 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

<b>Total Amount Claimed*</b>	\$8272.73
<b>Total Amount Allowed*</b>	

\*Includes general unsecured claims

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

	Claimed	Allowed
<b>Secured</b>		
<b>Priority</b>		
<b>Administrative</b>		