

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

PROOF OF CLAIM



YOUR CLAIM IS SCHEDULED AS:

Schedule/Claim ID s744

Name of Debtor:
Gulf Packaging, Inc.

Case Number:
15-15249

Amount/Classification
\$25,660.81 Unsecured

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):

Name and address where notices should be sent:

VANGUARD SHRINK FILMS, INC.
PO BOX 19203
LENEXA, KS 66285-9203

36759531000692

The amounts reflected above constitute your claim as 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.

If the amounts shown above are listed as Contingent, Unliquidated or Disputed, a proof of claim must be filed.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number (913) 599-1111 email:

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

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

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

Court Claim Number (if known):

Filed on:

Payment Telephone Number () email:

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$

If all or part of your claim is secured, 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.

2. BASIS FOR CLAIM:

(See instruction #2)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:

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 your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information.

Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$

Nature of property or right of setoff:
Describe:

Basis for Perfection:

Real Estate Motor Vehicle Other

Amount of Secured Claim: \$

Value of Property: \$

Amount Unsecured: \$

Annual Interest Rate: % Fixed or Variable
(when case was filed)

RECEIVED

JUN 17 2015

BMC GROUP

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.

Amount entitled to priority: \$

You MUST specify the priority of the claim:

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

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

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).

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

Wages, salaries, or commissions (up to \$12,475*), 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).

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)

Gulf Packaging, Inc. POC



00155

7. DOCUMENTS: Attached are redacted copies of documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and 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 definition of "redacted").
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.
If the documents are not available, please explain:

DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.
The original of this completed proof of claim form must be sent by mail or hand delivered (NEITHER FAXES NOR E-MAILS WILL BE ACCEPTED) so that it is actually received no later than 5:00 pm, prevailing Central Time on July 31, 2015 for all Entities other than Governmental Units OR no later than 5:00 pm, prevailing Central Time on October 26, 2015 for all Governmental Units.

BY MAIL TO:
BMC Group, Inc.
Attn: Gulf Packaging, Inc. Claims Processing
PO Box 90100
Los Angeles, CA 90009

BY MESSENGER OR OVERNIGHT DELIVERY TO:
BMC Group, Inc.
Attn: Gulf Packaging, Inc. Claims Processing
300 N. Continental Blvd., #570
El Segundo, CA 90245

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 3004.) I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

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: Michael J. Sanders
Title: Controller
Company: Oxum USA - Vanguard Film Div
Address and telephone number (if different from notice address above):


(Signature)

June 9, 2015
(Date)

Telephone number: _____ email: _____

Vanguard Shrink Films, Inc.
Open Invoices
As of June 9, 2015

Type	Date	Num	P. O. #	Terms	Due Date	Class	Aging	Open Balance
GULF PACKAGING - HOUSTON								
Invoice	03/06/2015	339923	0005486	2% 15 N...	04/05/2015		65	13,711.20
Invoice	03/06/2015	339924	0005484	2% 15 N...	04/05/2015		65	7,168.00
Invoice	03/23/2015	340046	0006702	2% 15 N...	04/22/2015		48	3,584.00
Invoice	03/25/2015	340075	H32669	2% 15 N...	04/24/2015		46	978.19
Invoice	03/27/2015	340103	H33725	2% 15 N...	04/26/2015		44	219.42
Total GULF PACKAGING - HOUSTON								25,660.81
TOTAL								25,660.81



VANGUARD
SHRINK FILMS
 9970 LAKEVIEW AVE
 LENEXA, KS 66219
 PH. 913-599-1111
 FX. 913-599-0096

Date	Sales Order #	Invoice #
3/6/2015	374237	339923

Remit Payment To

Vanguard Shrink Films, Inc.
PO Box 19203 Lenexa, KS 66285-9203

Bill To
 GULF PACKAGING - HOUSTON
 7720 FM 1960 EAST
 HUMBLE, TX 77346

Ship To
 Gulf Packaging - Houston
 250 Portwall Street
 Suite 100
 Houston, TX 77029

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
0005486	2% 15 NET 30	SP	3/6/2015	BEST WAY	FRT PAID	

Quantity	Item Code	Description	U/M	Price Each	Amount
1	50-7514	50-7514 CF/75G/14" CXV SHRINK FILM 3500 FT	roll	78.40	78.40
3	50-10016	50-10016 CF/100G/16" CXV SHRINK FILM 2625 FT	roll	89.60	268.80
30	50-5014	50-5014 CF/50G/14" CXV SHRINK FILM 5250FT	roll	78.40	2,352.00
100	50-5016	50-5016 CF/50G/16" CXV SHRINK FILM 5250FT	roll	89.60	8,960.00
2	52-10030L	52-10030L CF/100G/30" CCL SHRINK FILM 2625 FT	roll	186.00	372.00
15	50-5020	50-5020 CF/50G/20" CXV SHRINK FILM 5250FT	roll	112.00	1,680.00
SHIP WITH ORDER # 374238					
DELIVERY APPOINTMENT REQUIRED- CONTACT JIMMY IANNETTA AT 281-830-8304					

ODFL 04511566061

Total \$13,711.20



VANGUARD
SHRINK FILMS
 9970 LAKEVIEW AVE
 LENEXA, KS 66219
 PH. 913-599-1111
 FX. 913-599-0096

Date	Sales Order #	Invoice #
3/6/2015	374238	339924

Remit Payment To

Vanguard Shrink Films, Inc.
PO Box 19203 Lenexa, KS 66285-9203

Ship To

Gulf Packaging - Houston
 250 Portwall Street
 Suite 100
 Houston, TX 77029

Bill To

GULF PACKAGING - HOUSTON
 7720 FM 1960 EAST
 HUMBLE, TX 77346

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project	
0005484	2% 15 NET 30	SP	3/6/2015	BEST WAY	FRT PAID		
Quantity	Item Code	Description			U/M	Price Each	Amount
80	50-5016	50-5016 CF/50G/16" CXV SHRINK FILM 5250FT SHIP WITH ORDER # 374237 DELIVERY APPOINTMENT REQUIRED - CONTACT JIMMY IANNETTA AT 281-830-8304			roll	89.60	7,168.00

ODFL 04511566061	Total	\$7,168.00
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VANGUARD
SHRINK FILMS
 9970 LAKEVIEW AVE
 LENEXA, KS 66219
 PH. 913-599-1111
 FX. 913-599-0096

DATE	SALES ORDER #	INVOICE #
3/23/2015	374543	340046

Remit Payment To

Vanguard Shrink Films, Inc.
 PO Box 19203 Lenexa, KS 66285-9203

Bill to
 GULF PACKAGING - HOUSTON
 7720 FM 1960 EAST
 HUMBLE, TX 77346

Ship to
 Gulf Packaging - Houston
 250 Portwall Street
 Suite 100
 Houston, TX 77029

Product	Terms	Rep	Ship	Trade	Incoterms	Project
0006702	2% 15 NET 30	SP	3/23/2015	BEST WAY	FRT PAID	
Quantity	Part #	Description	Unit	Price Each	Amount	
30	50-5014	50-5014 CF/50G/14" CXV SHRINK FILM 5250FT	roll	78.40	2,352.00	
10	50-5022	50-5022 CF/50G/22" CXV SHRINK FILM 5250FT	roll	123.20	1,232.00	
					Total	\$3,584.00

R&L 90049712-4



VANGUARD
SHRINK FILMS
 9970 LAKEVIEW AVE
 LENEXA, KS 66219
 PH. 913-599-1111
 FX. 913-599-0096

Date	Order Number	Invoice #
3/25/2015	374536	340075

Send Payment To:

Vanguard Shrink Films, Inc.
PO Box 19203 Lenexa, KS 66285-9203

Ship To:

COLE & ASHCROFT, INC.
 5631 BRYSTONE DRIVE
 HOUSTON, TX 77041

Ship To:

GULF PACKAGING - HOUSTON
 7720 FM 1960 EAST
 HUMBLE, TX 77346

Order #	Terms	Print	Date	Ship To	Notes	QTY	Price	Amount
H32669	2% 15 NET 30	SP	3/25/2015	BEST WAY	ADD FRT			
4	59-4034L FRT. AND HDL.	59-4034L SW/40G/34" HY SHRINK FILM 13120FT FREIGHT AND HANDLING			roll		221.00 94.19	884.00 94.19
		PO# 16446						
		ATTN PAUL WAGNER						

R&L 90049719-6	Total	\$978.19
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VANGUARD
SHRINK FILMS
 9970 LAKEVIEW AVE
 LENEXA, KS 66219
 PH. 913-599-1111
 FX. 913-599-0096

Date	Sales Order #	Invoice #
3/27/2015	374594	340103

Remit Payment To

Vanguard Shrink Films, Inc.
PO Box 19203 Lenexa, KS 66285-9203

Bill To
GULF PACKAGING - HOUSTON
 7720 FM 1960 EAST
 HUMBLE, TX 77346

Ship To
INFOVINE
 1100 WEST 23 RD STREET
 #100
 HOUSTON, TX 77008

PO Num	Term	Pay	Ship	Via	FOB	Print
H33725	2% 15 NET 30	SP	3/26/2015	BEST WAY	ADD FRT	
Quantity	Item Code	Description	Unit	Price Each	Amount	
2	50-6016	50-6016 CF/60G/16" CXV SHRINK FILM 4370 FT	roll	89.60	179.20	
	FRT. AND HDL.	FREIGHT AND HANDLING		40.22	40.22	
		P/O: JARAD				
UPS					Total	\$219.42