

**FILED**  
 UNITED STATES BANKRUPTCY COURT  
 NORTHERN DISTRICT OF ILLINOIS  
 JAN 07 2019  
 JEFFREY P. ALLSTEADT, CLERK  
 TEAM - CA

Fill in this information to identify the case:

Debtor 1 Morgan Administration, Inc.

Debtor 2 \_\_\_\_\_  
 (Spouse, if filing)

United States Bankruptcy Court for the \_\_\_\_\_ District of \_\_\_\_\_

Case number 18-30039

Official Form 410  
**Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

1. Who is the current creditor? SHUANGLONG ZHEN  
 Name of the current creditor (the person or entity to be paid for this claim)  
 Other names the creditor used with the debtor \_\_\_\_\_

2. Has this claim been acquired from someone else?  
 No  
 Yes. From whom? \_\_\_\_\_

3. Where should notices and payments to the creditor be sent?  
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent? <u>SHUANGLONG ZHEN</u> Name <u>2847 S Union Ave</u> Number Street <u>Chicago IL 60616</u> City State ZIP Code Contact phone <u>312-731-1882</u> Contact email <u>unclezhen@gmail.com</u>	Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____
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Uniform claim identifier for electronic payments in chapter 13 (if you use one):  
 \_\_\_\_\_

4. Does this claim amend one already filed?  
 No  
 Yes. Claim number on court claims registry (if known) \_\_\_\_\_ Filed on MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?  
 No  
 Yes. Who made the earlier filing? \_\_\_\_\_

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**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?  No  Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 3465

7. How much is the claim? \$ 341 Does this amount include interest or other charges?  No  Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.  
store credit in form of gift card.

9. Is all or part of the claim secured?  No  Yes. The claim is secured by a lien on property.  
**Nature of property:**  
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
 Motor vehicle  
 Other. Describe: \_\_\_\_\_  
**Basis for perfection:** \_\_\_\_\_  
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)  
Value of property: \$ \_\_\_\_\_  
Amount of the claim that is secured: \$ \_\_\_\_\_  
Amount of the claim that is unsecured: \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)  
Amount necessary to cure any default as of the date of the petition: \$ \_\_\_\_\_  
Annual Interest Rate (when case was filed) \_\_\_\_\_%  
 Fixed  
 Variable

10. Is this claim based on a lease?  No  Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff?  No  Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

- No  
 Yes. Check one:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ \_\_\_\_\_

Up to \$2,850\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ \_\_\_\_\_

Wages, salaries, or commissions (up to \$12,850\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ \_\_\_\_\_

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

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

Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies. \$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

**Part 3: Sign Below**

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.  
 I am the creditor's attorney or authorized agent.  
 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  
 I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that 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.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 12/16/2018  
 MM / DD / YYYY

Shuanglong Shee  
 Signature

Print the name of the person who is completing and signing this claim:

Name \_\_\_\_\_  
 First name Middle name Last name

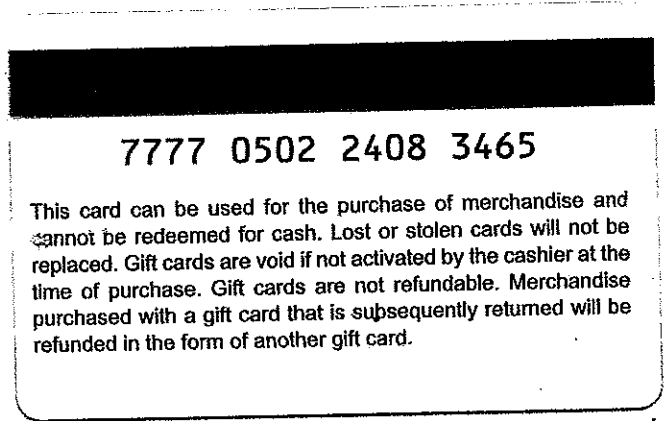
Title \_\_\_\_\_

Company \_\_\_\_\_  
 Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_  
 Number Street

City \_\_\_\_\_ State ZIP Code

Contact phone \_\_\_\_\_ Email \_\_\_\_\_



**PROOF OF CLAIM FILING INFORMATION FOR**

**MORGAN ADMINISTRATION, INC.**

**CASE NO. 18-30039**

**US BANKRUPTCY COURT, NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION**

Debtor Name	Case Number
Morgan Administration, Inc.	18-30039
Belvidere Associates LLC	18-30043
Deforab LLC	18-30057
FP Retail Associates LLC	18-30046
Hillcrest Enterprises, LLC	18-30047
Jular Media LLC	18-30050
KLS Acquisition Corp.	18-30052
Loomis Enterprises LLC	18-30053
North Avenue Associates LLC	18-30054
Oak Creek Distribution LLC	18-30055
OL Enterprises LLC	15-30056

**General Bar Date:** TBD

**General Administrative Bar Date:** TBD

**Governmental Bar Date:** TBD

*Hobo*  
*8716 S. CILERO AVE*  
*OAK LAWN, IL*  
*Lawn. 60453*

**NOTE: The Bar Date motion has not been filed. Until such time, you may send completed Proofs of Claims to:**

US Bankruptcy Court – Northern District of Illinois – Eastern Division  
Everett McKinley Dirksen United States Courthouse  
219 South Dearborn Street  
Chicago, IL 60604

United States Bankruptcy Court  
Northern District of Illinois

Jeffrey P. Allsteadt, Clerk of Court



Shuranglong Zhen

Date: 12/27/2018

*Shuranglong*  
*(correction)*

Letter to Filer:

Case Number, if applicable: *18-30039*  
Case Name, if applicable: *[scribble]*

**INFORMATION**

**CREDIT BUREAU** – The bankruptcy court does NOT perform any activities with the credit bureaus. You must contact the individual credit bureaus for their procedure for removing your bankruptcy filing from their credit report.

**RETURN DOCUMENT(S) – REQUEST FOR ADDITIONAL INFORMATION**

- Case name/number does not match our records. Please verify case name/number.
- Case name/number is missing. Please provide the case name/number.
- Case number is not listed on the document. Please provide the case number.
- There are several debtors listed. Please provide the correct case number.
- Proof of Claim – please fill out the attached Proof of Claim form and return to our office for processing. You may file a proof of claim electronically thorough the EPOC System on our website at: <http://www.ilnb.uscourts.gov/electronic-proof-claim-and-related-documents>. Or you may file a paper claim and return it to us. Obtain the proof of claim form from our website at <http://www.uscourts.gov/forms/bankruptcy-forms>.
- OTHER/REMARKS:**  
claim needs to have case name and case number written on actual claim. Please correct and return so that claim can be process.

**IF APPLICABLE**

Include the name of the debtor/joint debtor, the case number, the signature of the debtor/joint debtor on all required documents.

Include the signature of the attorney representing the debtor/joint debtor.

**Mail the required document(s) listed above, including this Letter to my attention at:**

Deputy Clerk Kimetha Collier  
Contact Number 312.697.7402

# Northern District of Illinois Claims Register

[18-30039 Morgan Administration, Inc.](#)

**Honorable Judge:** Jacqueline P. Cox

**Chapter:** 11

**Office:** Eastern Division

**Last Date to file claims:** 01/28/2019

**Trustee:**

**Last Date to file (Govt):** 04/23/2019

*Creditor:* (27425784)

**Claim No:** 52

*Status:*

Shuanglong Zhen

*Original Filed*

*Filed by:* CR

2847 S Union Ave

*Date:* 01/07/2019

*Entered by:* Kevin Lyons

Chicago IL 60616

*Original Entered*

*Modified:*

*Date:* 01/07/2019

Amount claimed: \$341.00

*History:*

[Details](#) [52-1](#) 01/07/2019 Claim #52 filed by Shuanglong Zhen, Amount claimed: \$341.00 (Lyons, Kevin)

*Description:*

*Remarks:*

## Claims Register Summary

**Case Name:** Morgan Administration, Inc.

**Case Number:** 18-30039

**Chapter:** 11

**Date Filed:** 10/25/2018

**Total Number Of Claims:** 1

<b>Total Amount Claimed*</b>	\$341.00
<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>		