Case 18-30039 Claim 88-1 Filed 01/23/19 Desc Main Document Page 1 of 14

Fill in this information to identify the case:	
Debtor 1 Morgan Administration, Inc.	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Northern District of Illinois - Eastern Div	
Case number 18-30039	



JEFFREY P. ALLSTEADT, CLERK TEAM - CA

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?	Chicago Stool : Chair, Inc. 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?	Van No Ves. 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? Where should payments to the creditor be sent? (if different) Chicuyo Stool : Charf, Anc Sume 1230 Saint Charles St. Number Street Kigin LL Leol 20 City State ZIP Code Contact phone B41-289-9955 Contact phone Kathy Kelly Contact email Csci 2001 @ Sbcglobal.net Contact email Peter Laing Uniform claim identifier for electronic payments in chapter 13 (if you use one): If you use one): If you use one):
1.	Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known) Filed on
	Do you know if anyone else has filed a proof of claim for this claim?	Yes. Who made the earlier filing?

P	art 2:	Give Informatio	n About the Claim as of the Date the Case Was Filed
6.	Do you you uso debtor?	have any number to identify the	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How mu	uch is the claim?	\$_84,589.05 Does this amount include interest or other charges?
			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			Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
claim?			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.
			Goods Sold
9.	Is all or secure	part of the claim d?	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
-		claim based on a	No No
	lease	r -	Yes. Amount necessary to cure any default as of the date of the petition.
	11. Is this	s claim subject to a of setoff?	
	right	or seton?	Yes. Identify the property:

-			
12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?		X No	
		Yes. Check one:	Amount entitled to priority
	A claim may be partly priority and partly nonpriority. For example,	Domestic support obligations (including alutiony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
	in some categories, the law limits the amount entitled to priority.	□ 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	r the date of adjustment.

Part 3: Sign Below

۴.

The person completing	Check the appropriate box:							
this proof of claim must sign and date it.	A lam the creditor.							
FRBP 9011(b).	I am the creditor's attorney or authorized agent.							
If you file this claim	 I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. 							
electronically, FRBP								
5005(a)(2) authorizes courts to establish local rules	- Partia guarantor, surety, choorser, of other codebior. Bankrupicy Rule 5005.							
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> 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.							
A person who files a	amount of the claim, the creditor gave the deptor credit for any payments received toward the dept.							
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.							
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	I declare under penalty of perjury that the foregoing is true and correct.							
	Executed on date 10 - 2.5. 2018 MM / DD / YYYY							
	Signature							
	Print the name of the person who is completing and signing this claim:							
	Name Heshou Liang							
	Title Owner							
	company Chicago Stool & Chair, Inc							
	Identify the corporate servicer as the company if the authorized agent is a servicer.							
	Address <u>1230 Saint Charles Street</u> Number Street							
	Elgin IL 60120							
	Contact phone 847-289-9955 State ZIP Code							
	Contact phone 847-289-995 Email CSCi 2001 @Sbcglobal.net							

Stat	emant of F	IOBO Sal	es from	CHICAGO	STOOL AND CHAIR 2018			
Hobo PO#	our Invoice#	Order Date		Amount	Past Due	Due Date	Paid on	check #
							Paid On	Check #
N19946	18-0001	12/28/2017	1/15/2018	\$12,127.85		2/15/2018	3/2/2018	45792
N20284	18-0017	2/15/2018	3/7/2018	\$11,450.20		4/7/2018	5/15/2018	46071
N20284A	18-0017A	2/15/2018	3/8/2017	\$9,800.00		4/8/2018	5/15/2018	46071
						., .,	5/ 10/ 2010	40071
N20628	18-0027	3/20/2018	4/6/2018	\$16,292.40		5/6/2018	6/11/2018	46286
N20628A	18-0027A	3/20/2018	4/9/2018	\$10,676.25		5/9/2018	6/11/2018	46286
						-/ -/	0, 11, 2010	40200
N21047	18-0036	5/3/2018	5/14/2018	\$13,655.75		6/14/2018	7/16/2018	456506
N21047	18-0036A	5/3/2018	5/18/2018	\$13,135.00		6/18/2018	7/24/2018	46722
N21047	18-0036B	5/3/2018	5/24/2018	\$11,521.80		6/24/2018	7/24/2018	46722
						-,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	40722
			· · · · · · · · · · · · · · · · · · ·		_			
HOBO PO#	our Invoice#	Order Date	Shipping	Amount				
				Amount		Due Date		
				Amount		Due Date		
N21503	18-0046	6/27/2018	7/11/2018	\$9,988.70	x	Due Date 8/11/2018	UNPAID	
N21503 N21503	18-0046 18-0046A	6/27/2018			لـ × ×	8/11/2018		
		6/27/2018	7/11/2018	\$9,988.70			UNPAID UNPAID	
		6/27/2018	7/11/2018	\$9,988.70		8/11/2018		
		6/27/2018 7/17/2018	7/11/2018	\$9,988.70	x	8/11/2018 8/16/2018	UNPAID	
N21503	18-0046A		7/11/2018 7/16/2018	\$9,988.70 \$4,283.85		8/11/2018		
N21503	18-0046A		7/11/2018 7/16/2018	\$9,988.70 \$4,283.85	x	8/11/2018 8/16/2018	UNPAID	
N21503	18-0046A		7/11/2018 7/16/2018	\$9,988.70 \$4,283.85	x	8/11/2018 8/16/2018 9/9/2018	UNPAID	
N21503 N21646	18-0046A 18-0050	7/17/2018	7/11/2018 7/16/2018 8/9/2018	\$9,988.70 \$4,283.85 \$13,250.90	x x x	8/11/2018 8/16/2018 9/9/2018 9/24/2018	UNPAID UNPAID UNPAID	
N21503 N21646	18-0046A 18-0050 18-0051	7/17/2018 8/14/2018	7/11/2018 7/16/2018 8/9/2018 8/24/2018	\$9,988.70 \$4,283.85 \$13,250.90 \$21,739.50	x x x x	8/11/2018 8/16/2018 9/9/2018 9/24/2018 9/28/2018	UNPAID UNPAID UNPAID UNPAID	
N21503 N21646	18-0046A 18-0050 18-0051 18-0051A	7/17/2018 8/14/2018 8/14/2018	7/11/2018 7/16/2018 8/9/2018 8/24/2018 8/24/2018 8/28/2018	\$9,988.70 \$4,283.85 \$13,250.90 \$21,739.50 \$21,583.05	x x x	8/11/2018 8/16/2018 9/9/2018 9/24/2018	UNPAID UNPAID UNPAID	

<u>\$84,589.05</u>

****Balance due on unpaid invoice****

Chicago Stool & Chair Inc.

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911

To: HOBO

Belvidere Road Waukegan, IL60085



INVOICE NO: 18-0046 DATE: July 11, 2018

SALESPERSON P.O. NUMBER		DATE SHIPPED	SHIPPED VIA	PRICE BASE	TERMS
	N000021503	July 11, 2018	Cycle Logistics	FOB Elgin	Net 30 days

TOTAL	DESCRIPTION	PRICE	EXTENSION
80	29" Black Saddle Stool / 1044460 pallet 1-4 of 29	21.75	1740.00
60	24' Black Saddle Stool / 1044461 pallet 5-7 of 29	21.25	1275.00
40	29" Dark Oak Saddle Stool / 1161923 pallet 8-9 of 29	21.75	870.00
80	24" Dark Oak Saddle Stool / 1161924 pallet 10-13 of 29	21.25	1700.00
55	24" Clark / 1179997 pallet 15-17 of 29 (2 x 20 pcs and 1 x 15 pcs)	26.50	1457.50
28	29" Clark / 1179998 pallet 18-19 of 29 (1 x 20 pcs and 1 x 8pcs)	27.50	770.00
12	24" Gavin / 1205619 pallet 23 of 29	33.95	407.40
48	29" Gavin / 1219136 pallet 24-27 of 29 (12pcs per pallet)	36.85	1768.80
	**1st shipment of po#N21503 (23 pailets of 29 total) Total 403 stools Packed on 23 pallets		
			\$9988.70

Make all checks payable to: CHICAGO STOOL & CHAIR INC. If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

AIGHT Case CI8130089	fust enter 94 hours		1/23/19 [Date	Desc Main Doo	cument Pa	ge 9 of 14	-0046
response telephone number under "Emerge Memorandum	ency Response Phon	e Number	rie l	ogistics	Shipper No. —— Carrier No.		
TO: Consignee +0750		ក្រមារខែ	of Carrier) FROM: Shipper	(Lina	in Stanl	21/20	C P
Street			Street	CW CP	40 51001	· Cha	The
Destination	Zip Code		Origin		7. 0.1		
Route:	Vehicle N		i	SCAC	Zip Code Emergen Phone Nu	cy Response umber	
No. Shipping Units +HM Kind of Packaging, Descr Special Marks and	Stowin Stowin			or attention in handling or isure safe transportation with reight Classification, Item 360.	Weight	Rate or Class	CHARGES
pallets	POFN	21	503		(0200)		
	403	Stal	<	· .	2		-
			~	172 0011	k ali		
	Shipm	ent \$	-1-	total 20	A Hate		
			MOLENING.		PATIETS		
If the shipment moves between two ports by a arrier by water, the law requires that the bill of lad tate whether weight is "carrier's or shipper's weigh	REMIT C.O.D. TO: ADDRESS		C.O.D. Amt. \$	C.O.D. FEE: PREPAID		L IGES: \$	an an Anna an I
Note-Where the rate is dependent on value, ship state specifically in writing the agreed or declared of the agreed or declared value of the access.	alue of the property.		onsignui, ule consi	if this shipment is to be di por shall sign the following	elivered to the consignee v	without FREI	GHT CHARGES
The agreed or declared value of the property is here by the shipper to be not exceeding 3 per	Boy specifically stated	The carrier shall charges.	not make delivery	of this shipment without p	payment of freight and all		Appropriate Box: ight prepaid
RECEIVED, subject to the classifications and la	vfully filed tariffs in offer	t on the data of a		(Signature of Consignor)	-	Coll	ect
RECEIVED, subject to the classifications and law d condition of contents of packages unknown), man corporation in possession of the property under th stination. It is mutually agreed as to each carrier by, that every service to be performed hereunder st date hereof, if this is a rail or a railwater shipming to the sting of the stand standard standard standard st per and accepted for himself and his assigns.	ked, consigned, and des e contract) agrees to ca of all or any of, said pro- all be subject to all the ant or (2) in the applical t forth in the classificati	tined as indicated irry to its usual pi perty over all or a terms and conditi ble motor carrier on or tariff which	above which said c lace of delivery at s any portion of said i ions of the Uniform classification or tari governs the transp	of Lading, the property des arrier/(the word carrier be aid destination, if on its rou oute to destination and as Domestic Straight Bill of L ff, if this is a motor carry protation of this shipment, if	scribed above in apparent ing understood throughout ute, otherwise to deliver tr i to each party at any time ading set forth (1) in Unifi ier shipment. Shipper here and the said terms and cc	good order, except this contract as r o another carrier o e interested in all o orm Freight Classifi by certifies that he onditions are hereb	as noted (contents meaning any person on the route to said or any of said prop cations in effect or is familiar with al
ark with "RQ" if appropriate to designate Hazardous Mate ansportation Regulations governing the transportation of ha optional method for identifying hazardous materials on Bills do if Federal Regulations. Also when shipping hazardous m scribed in section 172.204(a) of the Federal Regulations, ess 3 specific exception from the requirement is provided in	rials as defined in the U.S zardous materials. The use of Lading per 172.201(a) aterials, the shipper's certifi	 Department of of this column is (iii) of Title 49 ication statement 	The format and conter pany interpretation of 172, Subpart C-Shippi tions 172,201 (Hazar	t of hazardous item list is the r equirements as described in 4 19 Papers. Such description co dous Material Table) and Sect hazardous class. UN identific	responsibility of individual com- 9 Code of Federal Regulations nsists of the following per Sec-	Note: Liability or damage in may be appl	limitation for loss n this shipment icable. See 49 Code, Sections
HIPPER VALA VAC	7.11	16	CARRIER				,
This is to certify that the above named main marked and labeled and an in some named main and the second seco	1-11-	10 1	PER 58	CD Sola	FIC 7-1	1-18	
marked, and labeled, and are in proper conc applicable regulations of the U.S. Department		according to the		s receipt of packages and an ble and/or carrier has the l entation in the vehicle. Prop			

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Chicago Stool & Chair Inc.

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911

To: HOBO

Belvidere Road Waukegan, IL60085

INVOICE NO: 18-0046A DATE: July 16, 2018

SALESPERSON	P.O. NUMBER	DATE SHIPPED	SHIPPED VIA	PRICE BASE	TERMS
	N000021503	July 16, 2018	Echo Logistics	FOB Elgin	Net 30 days

TOTAL	DESCRIPTION	PRICE	EXTENSION
23	5 Tier Ladder shelf / Black / 1178240 pallet 14 of 29	27.50	632.50
30	Kitchen Trolley Cart Black / 1195333 pallet 20-22 of 29	52.75	1582.50
23	Loyd Console Table / 1237793 pallet 28-29 of 29 (1 x 12pcs and 1 x 11pcs)	89.95	2068.85
	**2 nd shipment of po#N21503 (6 pallets of 29 total) Total 23 5 tier ladders Total 30 kitchen carts Total 23 loyd tables Packed on 6 pallets		
			\$4283.85

Make all checks payable to: CHICAGO STOOL & CHAIR INC. If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

Case 18-30039 Claim 88-1 Filed 01/23/19 Desc Main Document Page 12 of 14

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BILL OF LADING	BOL Number: 32527916
SHIP FROM	Carrier: Monroe Transportation Service, Inc.
Name:Chicago Stool & Chair inc.Address 1:1230 Saint Charles StAddress 2:Address 3:City/State/Zip:ELGIN, IL, 60120KathyP:(847) 289-9955 Ext.F:	Pro # <u>Morrof</u> TRL# Pick Trail Trail
Stop Notes: SHIP TO	
Name: HOBO Distribution Address 1: 7557 S 78th Ave Address 2:	REFERENCE INFORMATION Reference Name Value Load BOL # N21503A Load PO# N21503A
Address 3: City/State/Zip: BRIDGEVIEW, IL, 60455 Barb P: 708-924-9155 Ext.17 F: Stop Notes:	18-0046A
THIRD PARTY FREIGHT CHARGES BILL TO Echo Global Logistics 600 W Chicago Ave Ste 725 Chicago, IL 60654	
Freight Charge Terms: Carrier Acct #: Prepaid X Collect 3rd Party X Quote ID:	
DO NOT STACK	Shipper InstructionsConsignee InstructionsPickup #:N21503ADelivery #:N21503ALoc Type:BusinessLoc Type:BusinessSpecial Services:Special Services:Special Services:
ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading.	
LTL or Partial Only: # of Pallets: 6 Pallet Type: Skid Spots: 0 Stackable: No Pallet Dimensions: L: W: H:	
CARRIER INF	
HANDLING UNIT PACKAGE HM OD QTY TYPE QTY TYPE WEIGHT (X) (X)	COMMODITY DESCRIPTION LTL Only Commodities requiring special or additional care or attention In bandling or stowing must be so materia and packaged or t
6 Pallets 0 3800	In handling or stowing must be so marked and packaged as t NNIFC# CLASS Stools/chairs 083445- 70
6 3800	GRAND TOTAL
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding	COD Amount: \$ Fee Terms: Collect: Prepaid: Customer check acceptable: able. See 49 U.S.C. III 14706(c)(1)(A) and (B).
DECENTED subject to individually dataset in the	he carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Section 7)
SHIPPER SIGNATURE / DATE Trailer Loaded: Freight Counter This is to certify that the above-named materials are properly condition for parsportation according to the applicable regulations of the Department of Transportation. By Shipper By Shipper Shipper: By Shipper By Driver By Driver/I Shipper: Date: 1-10-15 Date: Date:	ed: CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receip of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation regency response guidebok or equivalent decurpentation in the veptice

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Chicago Stool & Chair Inc.

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911

Page

To: HOBO

Belvidere Road Waukegan, IL60085

INVOICE NO: 18-0050 DATE: August 9, 2018

		P.O. NUMBER	DATE SHIPPED	SHIPPED VIA	PRICE BAS	E	TERMS
		N000021646	August 9 , 2018	Cycle Logistics	FOB Elgin		Net 30 days
TOTAL					L		
			DESCRIPTION			PRICE	EXTENSION
50	29" Black S	Saddle Stool / 104446	0 pallet 1-3 of 25			21.75	1305.00
100	24' Black S		21.25	2125.00			
10	24" Dark O	ak Saddle Stool / 116	1923 pallet 9-10 of	25			5
		ler Black / 1178240		20		21.25	850.00
		lley Cart Black / 1195				27.50	770.00
	24" Gavin /	52.75	1266.00				
	24" Gavin /	33.95	2037.00				
	29" Gavin /		36.85	3095.40			
		nd Cart / 1237645 p				90.00	540.00
	Decorator S	tand Espresso / 1237	786 pallet 25 of 25	**(with white)		12.50	950.00
2	Decorator S	tand White / 1237790) pallet 25 of 25 **(w	vith espresso)		12.50	312.50
	Total 34	4 stools Total 28-	5 Tier Ladders Te	otal 24 Kitchen Car	te		
	Total 6 M	arket Islands Total					
		Packed on 25 p					
					1		
							\$13250.90

Make all checks payable to: CHICAGO STOOL & CHAIR INC. If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

, esponse telephone number under	DINCIAIN 88-1 PARN2	Filed 01/23/19	Desc Doci	iment Cont	inued Pa	ge
Original—Not Negotiable	Referials must enter 24-hour emergence r "Emergency Response Phone Number		1 18	Bill of L	ading No. 18	-0050
то:	- uce	Vohistics		Shipper		
Consignee toRC)	(Name of Carrier)	A	Carrier	No	
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Destination		Street	-vii c	10 5100		air V
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Shipping +HM Kind of Packaging	g, Description of Articles Commodities requ	90	AC	Zip Co	de	
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20 partes	POIN 21(1)	iring special or additional care or atte marked and packaged as to ensure sa ction 2(e) of National Motor Freight C	fe transportation with assification, Item 360	Weight (Subject to	Rate or Class	
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	s weight". ADDRESS	Amt. \$	C.O.D. FEE: PREPAID	тот	AL	
te-Where the rate is dependent on value	3. Shippens					Se Stressistered
te-Where the rate is dependent on value	e, shippers are required to Subject to Section lared value of the property. recourse on the	on 7 of the conditions, if this sh		CHA	RGES: \$	
te-Where the rate is dependent on value te specifically in writing the agreed or deci agreed or declared value of the property i he shipper to be not exceeding	the carrier sha	ion 7 of the conditions, if this sh e consignor, the consignor shall all not make delivery of this sha	COLLECT \$	CHA ared to the consignee atement.	RGES: \$	T CHARGES
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te-Where the rate is dependent on value to specifically in writing the agreed or deci a agreed or declared value of the property is the shipper to be not exceeding	the carrier sha	ion 7 of the conditions, if this sh consignor, the consignor shall all not make delivery of this sh (Signatur the issue of this Bill of Lading, d above which said carrier (the place of delivery of carrier (the	CULLECT \$	CHA ared to the consignee atement.	RGES: \$	T CHARGES ropriate Box: t prepaid
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Com-Carnier acknowledges receipt of packages and any required placards. Carnier certifies emergency response informa-tion was made available and/or carnier has the U.S. Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

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Chicago Stool & Chair Inc. 1230 St. Charles Street

Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911



To: HOBO

Belvidere Road Waukegan, IL60085

INVOICE NO: 18-0051 DATE: August 24, 2018

UNLL	SPERSON	P.O. NUMBER	DATE SHIPPED	SHIPPED VIA	PRICE BAS				
		N000021886	August 24 , 2018	Cycle Logistics			TERMS		
			,		FOB Elgin		Net 30 days		
TOTAL			DESCRIPTION			PRICE	EXTENSIO		
81	Framhouse	Framhouse Rustic Console/1247230 pallet 1-7 (6pallets 12 pcs, 1 pallet 9 pcs)							
180	Rustic Kitch	hen Cart/1247232 na	llet 8 10** (11	allets 12 pcs, 1 palle	et 9 pcs)	68.50	5548.50		
120	5 Tier Leda	Rustic Kitchen Cart/1247232 pallet 8-19** (11 pallets 16pcs,1 pallet4pc and 12 stools) 5 Tier Ledger Bookcase/1219137 pallet 20-23							
27				7		44.50	5340.00		
	Ripley 24" / 29" Adjustable/1205616 pallet 24 24" Natural Stool/1053652 **pallet 19 (with rustic kitchen cart)						405.00		
		8.00	96.00						
		** SHIPME	NT #1 **						
	Total 81	Farmhouse Total	180 Rustic Carts						
	Total 39 S	exercise of the second	5 tier Ledger						
		Packed on 24 p			1				
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		e to: CHICAGO STOC is concerning this invo IR BUSINESS!	DL & CHAIR INC. Dice, call at (847)289	9-9955					

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5 of 10

Chicago Stool & Chair Inc.

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911



To: HOBO

Belvidere Road Waukegan, IL60085

INVOICE NO: 18-0051A DATE: August 24, 2018

SALE	SPERSON	P.O. NUMBER	DATE SHIPPED	SHIPPED VIA	PRICE BAS	E	TEDWO		
		N000021886	August 28 , 2018	Cycle Logistics	FOB Elgin		TERMS		
TOTAL					FOB EIGIN		Net 30 days		
TOTAL			DESCRIPTION			PRICE	EXTENSION		
144	Mission Co	oat Rack Walnut / 124	7231 pallet 25-28			64.50			
57	24/29" Ripl		9288.00						
96	24" Natural	15.00	855.00						
60	1	8.00	768.00						
41		29" Dark Oak Stool / 1161923 pallet 33-35 21.7 5 Tier Ladder Shelf Black / 1178240 pallet 36-37(#36 26pcs, #37 15pcs + 2pc Loyd) 27.5							
44	Kitchen Car	ts Black / 1105000	240 pallet 36-37(#3)	6 26pcs, #37 15pcs +	+ 2pc Loyd)	27.50	1127.50		
45		ts Black / 1195333 pa		#39 15pc , #40 14pc	c)	52.75	2321.00		
	24" Gavin S	33.95	1527.75						
	29" Gavin S	36.85	1031.80						
)	Market Islan	d Cart / 1237645 pall	et 46 (+3 24/29" ripl	ey)		90.00	810.00		
6	Decorator St	tand Espresso/12377	86 pallet 47		1				
		tand White1237790				12.50	450.00		
		e Table w/ Baskets /		(19 0	1.0.1510	12.50	300.00		
	SI	HIPMENT #2	201100 pallet 40	(16 pcs, 2 with 5 tier	ladder)	89.95	1799.00		
				2					
*	Total 144	Coat Racks Total	286 Stopis Total	20 Loud Comercia					
	Total 41-5	tier Black Total 5	3 Kitchen Carts	Total 60 Plant Stand	able				
		Packed on 24 pa	llets	i olai ou Plant Stand	is				
					1	-			
							\$21583.05		

Make all checks payable to: CHICAGO STOOL & CHAIR INC. If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

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Desc Document Continued Page 7 of 10

Chicago Stool & Chair Inc. 1230 St. Charles Street

Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911



To: HOBO

Belvidere Road Waukegan, IL60085

SALESPERSON

INVOICE NO: 18-0051B DATE: Sept 17, 2018

	SPERSON	P.O. NUMBER	DATE SHIPPED	SHIPPED VIA	PRICE BAS	E	TERMS
		N000021886	Sept 17, 2018	Cycle Logistics	FOB Elgin		Net 30 days
TOTAL	1						and the days
216			DESCRIPTION			PRICE	EVERING
210	24/29" Riple	ey / 1205616 pallet 4	9-56				EXTENSIC
40		addle Stools / 10444				15.00	3240.00
00	24" Block C			21.75	870.00		
	24 Diack Saddle Stools / 1044461 pallet 59-63						2125.00
92	24" Natural /	24" Natural / 1053652 pallet 64-67					
	24" Dark Oak Saddle Stools / 1161924 pallet 68-71					8.00	1536.00
			61924 pallet 68-71			21.25	1700.00
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THANK YOU FOR YOUR BUSINESS!

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Case 18-30039 Claim 88-1 Part 2

Filed 01/23/19 Desc Document Continued Page 9 of 10

Chicago Stool & Chair Inc.

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911



To: HOBO

Belvidere Road Waukegan, IL60085

SALESPERSON

INVOICE NO: 18-0051C DATE: Sept 24, 2018

	PERSON	P.O. NUMBER	DATE SHIPPED	SHIPPED VIA	PRICE BAS	SE	TERMS
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If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

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Northern District of Illinois Claims Register

18-30039 Morgan Administration, Inc.

Honorable Judge: Jacqueline P. Cox

Office: Eastern Division

1230 Saint Charles St Elgin IL 60122

Chapter: 11 Last Date to file claims: 01/28/2019 Last Date to file (Govt): 04/23/2019

Trustee: Creditor:

(27197436) History Claim No: 88 Chicago Stool & Chair Inc **Original Filed** Date: 01/23/2019 Original Entered Date: 01/23/2019

Status: Filed by: CR Entered by: Kimetha Collier Modified:

Amount claimed: \$84589.05

History:

Details 88-1 01/23/2019 Claim #88 filed by Chicago Stool & Chair Inc, Amount claimed: \$84589.05 (Collier, Kimetha)

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

Total Amount Claimed* \$84589.05

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		