Case 18-30052 Claim 57-1 Filed 01/17/19 Desc Main Document Page 1 of 6

Fill in this information to identify the case:				
Debtor 1	KLS Acquisition Corp.			
Debtor 2 (Spouse, if filing)				
United States	Bankruptcy Court for the: Northern District of Illinois - Eastern Div			
Case number	18-30052			

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

JAN 17 2019

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					
Who is the current creditor?	Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
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? Helen King Name 17/14 Kimbark Ave Number Street South Holland II. 60473 City State ZIP Code Contact phone 708-596-2620 Contact email ON HIGH La ad. Com Uniform claim identifier for electronic payments in chapter 13 (if you under the contact of the creditor be sent?	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone Contact email				
4. Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known)	Filed on 10/25/2018				
5. Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?					

F	Part 2: Give Information About the Claim as of the Date the Case Was Filed						
6.		o you have any number ou use to identify the U Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
7.	How mi	uch is the claim?	\$ 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 claim?	the basis of the	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. deposit for Countertop Not recrived				
9.	Is all or secure	part of the claim 1?	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	□ No				
			Yes. Amount necessary to cure any default as of the date of the petition. \$				
11		claim subject to a f setoff?	1 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	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, 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).	\$ 250.23
, , , , , , , , , , , , , , , , , , , ,	■ 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		
The person completing this proof of claim must sign and date it. FREP 9011(b).	Check the appropriate box:	
If you file this claim	 □ I am the creditor's attorney or authorized agent. □ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. 	
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.	
to establish local rules specifying what a signature	Lundorstand that an authorized signature on this Book of Okina and the Lundorstand	
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment the amount of the claim, the creditor gave the debtor credit for any payments received toward the debtor credit for any payments.	hat when calculating the bt.
A person who files a 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 and correct.	mation is true
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.	
3571.	Executed on date 01/14/2019 MM / DD / YYYY	
	Signature Keng	
	Print the name of the person who is completing and signing this claim:	
	Name Helen Leverne King First name Middle name Last name	
	Title	
	Company Identify the corporate servicer as the company if the authorized agent is a servicer.	-
	Address 17/14 Kimback Ave	
	City South Holland IL 60473	
	Contact phone 708-596-2620 Email 6NH16-1	4 I @ gol Com

HOBO 25 8716 S CICERO OAK LAWN, IL

PHONE: (708) 423-4656

P age CHARLIE KING
17114 KIMBARK AVE

SOUTH HOLLAND 60473 708-596-2620 REFERENCE: K * CF FROST WHITE 3CM CP1

CUSTOMER: 137 TERMS: CASH/CHECK/BANKCARD

DATE / TIME: 10/11/18 CLERK: LGER

1:55

TERMINAL: 108

SPEC ORDER: 305162/R SPECIAL ORDER COUNTERTOP FACTORY FROST WHITE 3CM SPECIAL ORDER COUNTERTOP FACTORY FREE SINK PROMO EQUAL BOWL #3118 BEVEL EDGE REMOVAL OF EXISTING CTOP AND HAUL AWAAY RECONNECTION OF PLUMBING CHECK PAYMENT CHECK PAYMENT CHECK PAYMENT 250.23 TAX AMOUNT 4026.73 TOTAL SUGG PRICE /PER EXTENSION 3669.00 768-596-2620 SUB-TOTAL 3669.00 367.73 TOTAL	, 122 [23 922	18-3005	1 EA SOTCF	EQUANTITY UM ITEM	ain Do	ocume TO: KING/HELEN	SOUTH HOLLAND IL 60473
PRICE /PER EXT 369.00 /EA ABLE I-TAXABLE -TOTAL AMOUNT	AYMENT		SPECIAL ORDER COUNTERTOP FACTORY FROST WHITE 3CM FREE SINK PROMO EQUAL BOWL #3118 BEVEL EDGE REMOVAL OF EXISTING CTOP AND HAUL AWAY RECONNECTION OF PLUMBING CHARLIE KING 17114 KIMBARK AVE SOUTH HOLLAND IL 60473 708-596-2620 DESIGNER CATHIE	DESCRIPTION	S	ALL EXENCE: IN CITE AND	1-596-2620 DEFERENCE: X * OF FDOOT WILL
PRICE /PER EXT 369.00 /EA ABLE I-TAXABLE -TOTAL AMOUNT	250.23			SUGG	PEC C		
162/R EXTENSION 3,669.00 3669.00 3669.00 3669.00 357.73	TAX AMOUNT TOTAL	TAXABLE NON-TAXABLE SUB-TOTAL	.00)RDER: 305	7	יייייייייייייייייייייייייייייייייייייי
	357.73 4026.73	3669.00 0.00 3669.00		7	162/R		



Northern District of Illinois Claims Register

18-30052 KLS Acquisition Corp.

Honorable Judge: Jacqueline P. Cox **Chapter:** 11

Office: Eastern Division

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (27456676) Claim No: 57 Status: HELEN KING Original Filed Filed by: CR

17114 KIMBARK AVE Date: 01/17/2019 Entered by: Kimetha Collier

SOUTH HOLLAND, IL Original Entered Modified:

60473 Date: 01/17/2019

Amount claimed: \$250.23 Priority claimed: \$250.23

History:

<u>Details</u> 57-1 01/17/2019 Claim #57 filed by HELEN KING, Amount claimed: \$250.23 (Collier, Kimetha)

Description: Remarks:

Claims Register Summary

Case Name: KLS Acquisition Corp.

Case Number: 18-30052

Chapter: 11

Date Filed: 10/25/2018 **Total Number Of Claims:** 1

Total Amount Claimed*	\$250.23		
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	\$250.23	
Administrative		