Fill in this information to identify the case:							
Debtor 1	North Avenue Associates LLC						
Debtor 2 (Spouse, if filing)							
United States	Bankruptcy Court for the: Northern District of Illinois						
Case number	18-30054						

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOV 2 0 2018

JEFFREY P. ALLSTEADT, CLERK
TEAM - CA

Official Form 410

Proof of Claim

Identify the 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, explain in an attachment.

Do not send original documents; they may be destroyed after scanning. If the documents are not available,

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.

2. Has this claim been acquired from someone else? 3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) Total	JMB Liquidators, LL Name of the current creditor Other names the creditor us No Yes. From whom? Where should notices to Name 729 Zeigler Lane Number Street	to the creditor	tor	Where should payn different)		itor be sent? (if
acquired from someone else? 3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) 7. No. E. Co. Co.	Where should notices of JMB Liquidators, LL Name 729 Zeigler Lane	to the credito		Where should payn different)		itor be sent? (if
and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) 7. NL E	JMB Liquidators, LL Name 729 Zeigler Lane		r be sent?	different)	nents to the cred	itor be sent? (if
_	Number Street Enola City Contact phone 717-547- Contact email melanie Iniform claim identifier for elicenters.	Djmbliquida		Contact email melan	PA State 47-6300	17025 ZIP Code ators.com
one already filed?	No Yes. Claim number o	on court claims	registry (if known)		Filed on	/ DD / YYYY
alaa baa filada d	No Yes. Who made the e	earlier filing?				

12. Is all or part of the clair entitled to priority unde									
11 U.S.C. § 507(a)?	Yes. Cl	neck one:			Amount entitled to priorit				
A claim may be partly priority and partly nonpriority. For example,	111	nestic support obligations (includ J.S.C. § 507(a)(1)(A) or (a)(1)(B	ding alimony and child suppor).	t) under	\$				
in some categories, the law limits the amount entitled to priority.	De Up to \$2.850* of deposits toward purchase losses as sent-left								
, , , , ,	Duri	les, salaries, or commissions (uptruptcy petition is filed or the del J.S.C. § 507(a)(4).	p to \$12,850*) earned within 1 otor's business ends, whichev	80 days before the er is earlier.	\$				
		es or penalties owed to governm	ental units. 11 U.S.C. § 507(a	a)(8).	\$				
	☐ Con	ributions to an employee benefi	t plan. 11 U.S.C. § 507(a)(5).		\$				
	☐ Othe	r. Specify subsection of 11 U.S.	C. § 507(a)() that applies.		\$				
	* Amour	its are subject to adjustment on 4/01.	/19 and every 3 years after that fo	r cases begun on or afte	r the date of adjustment.				
Part 3: Sign Below									
The person completing	Oh a all the								
this proof of claim must	Check the ap								
sign and date it. FRBP 9011(b).	I am the								
If you file this claim		creditor's attorney or authorized							
electronically, FRBP	l am the	trustee, or the debtor, or their au	ithorized agent. Bankruptcy R	ule 3004.					
5005(a)(2) authorizes courts	☐ I am a gu	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.							
to establish local rules specifying what a signature									
is.	I understand t	hat an authorized signature on the	his Proof of Claim serves as a	in acknowledgment th	at when calculating the				
A person who files a	amount or the	claim, the creditor gave the deb	tor credit for any payments re	ceived toward the del	ot.				
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	I declare under penalty of perjury that the foregoing is true and correct.								
3571.	Executed on d	ate 11/14/2018							
		MM / DD / YYYY							
	Wilde Signature	Bock							
	Print the name	of the person who is comple	ting and signing this claim:						
	Name	Melanie C. Bock							
	Wallie	First name	Middle name	Last name					
	Title	Owner/CFO		Edot Name					
	Company	JMB LIQUIDATORS, L	IC						
			the company if the authorized ag	ent is a servicer.					
	Address	729 Zeigler Lane							
		Number Street			-				
		Enola	PA	17025					
		City	State	ZIP Code					
(Contact phone	717-547-6300			:-				
	, , , , , , , , , , , , , , , , , , ,		Email	mela <u>nie@jmbliq</u> u	idators.com				

		_as	e 18-3	3005	4	(1	L File		Desc Main		Page 3 of 8	T
Page:	HASE	DER	\$000018668	8/ 9/18 8/17/18		e: NORMAL ROB	EXTENDED COST			270.00 270.00 270.00 270.00 270.00 270.00	200000	00000		5400.00
	PURCHA	ORDER	#:	r Date	# Od	Type:	M/n				E E E E E E E	EAAAA		GHT
	7		P.O. Store	Order	Alt.	Buyer	UNIT COST			11335.00 11335.00 11355.00		222222		TOTAL COST TOTAL FREIGHT OTHER CHARGES
					TERMS	30 DAYS	SPEC ORD#							
			60181			NET	7	The state of the s				*		
		26 NOPTH			P VIA		MFG#/SPCL			∞	32HL3 32HR3 32HR3 34HL3 36HR3 36HR3	34HL31 34HR31 36HL31 36HR31 36HR31		
HOBO 26 W NORTH AVE PARK, TI 60181	000	TO: HOBO	VILLA		SHIP				EMAIL "	H H H H H H H H H H H H H H H H H H H	GL 32" GL 34" GL 34" GL 34" 32" H	. 34" HL . 34" HR . 36" HL . 36" HL . 36" HL		
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		, LLC E	7-6300	STATIS	01810	ш	2	BIL	SPECIAL	1246845 1246846 1246849 1246850 1246851 1246852 1246872	24687 24687 24687 24687 24688 24688	24688 24688 24688 24688		
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980	HOME OWNERS BARGAIN OUTLET	: JMB L	ENOLA PHONE: FAX :	ASSTENED			STORE			20000000000000000000000000000000000000	00000000000000000000000000000000000000	9 7 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		AL UNITS
	NE OWN	10		VENDOR		JM390	LINE#			HVW470V8	117777			TOTAL

Enola, PA 17025 USA

Voice: 717-547-6300

Fax:

Case 18-30054 Claim 3-1 Filed 11/20/18 Desc Main Document

JMB Liquidators, LLC
729 Zeigler Lane
Engle BA 47005 Page 4 of 8

Sales Order Number: 1655

Sales Order Date: Ship By:

Aug 28, 2018 Sep 28, 2018

Page:

1

To:	
HOBO CORPORATE OFFICE 2650 BELVIDERE ROAD WAUKEGAN, IL 60085	

Ship To:	
STORE 26	

CustomerID	PO Number	Sales Rep Name
НОВО	S000018668	
Customer Contact	Shipping Method	Payment Terms
	Freight	Net 10 Days

Quantity	Item	Description	Unit Price	Amount
4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL ZINC #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
4.00	Door	3/0 FIBERGLASS DECO 3/4 OVAL ZINC #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL PATINA #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
4.00	Door	3/0 FIBERGLASS DECO 3/4 OVAL PATINA #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL PATINA #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
4.00	Door	2/10 FIBERGLASS DECO 3/4 OVAL PATINA #318	135.0000	540.00
		Subtotal		Continued
		Sales Tax		Continued
		Freight		Continued
		TOTAL ORDER AMOUNT		Continued

Case 18-30054 Claim 3-1 Filed 11/20/18 Desc Main Document

JMB Liquidators, LLC
729 Zeigler Lane

SALES

729 Zeigler Lane Enola, PA 17025 USA

Voice: 717-547-6300

Fax:

n Document Page 5 of 8

SALES ORDEI

Sales Order Number: 4055

Sales Order Number: 1655 Sales Order Date: Aug 2

Ship By:

Page:

Aug 28, 2018 Sep 28, 2018

2

To:	
HOBO CORPORATE OFFICE 2650 BELVIDERE ROAD WAUKEGAN, IL 60085	

Ship To:	
STORE 26	

Customer ID	DO W	71 2×
The state of the s	PO Number	Sales Rep Name
НОВО	S000018668	•
Customer Contact	Shipping Method	
		Payment Terms
	Freight	Net 10 Days

Quantity	Item	Description	Unit Price	
		DB NO BRICKMOULD (2 LH - 2 RH)		Amount
4.00	Door	3/0 FIBERGLASS DECO 3/4 OVAL PATINA #318 DB NO BRICKMOULD (2LH - 2 RH)	135.0000	540.00
4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL ZINC #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
4.00	Door	2/10 FIBERGLASS DECO 3/4 OVAL ZINC #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
4.00	Door	3/0 FIBERGLASS DECO 3/4 OVAL ZINC #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.0000	540.00
		Subtotal		5,400.00
		Sales Tax Freight		
		TOTAL ORDER AMOUNT	And the second s	0.00

Case 18-30054 Claim 3-1 Filed 11/20/18 Desc Main Document Page 6 of 8
729 Zeigler Lane
Frola PA 47005

Enola, PA 17025 USA

Voice: 717-547-6300

Fax:

Invoice Number: 1623

Invoice Date: Sep 17, 2018

Page:

Duplicate

Bill To:
HOBO CORPORATE OFFICE 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship to:		
STORE 26		

CustomerID	Customer PO	Paymen	t Terms
НОВО	S000018668	Net 10 Days	Days
Sales Rep ID	Shipping Method	Ship Date	Due Date
	Freight		9/27/18

Quantity	ltem	Description	Unit Price	Amount
4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL ZINC #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
4.00	Door	3/0 FIBERGLASS DECO 3/4 OVAL ZINC #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL PATINA #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
4.00	Door	3/0 FIBERGLASS DECO 3/4 OVAL PATINA #418 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL PATINA #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
		Subtotal		Continued
		Sales Tax		Continued
		Total Invoice Amount		Continued
eck/Credit Men	no No:	Payment/Credit Applied		
		TOTAL		Continued

JMB Liquidators, LLC Claim 3-1 Filed 11/20/18 Desc Main Document Page 7 of 8

729 Zeigler Lane Enola, PA 17025 USA

Voice: 717-547-6300

Fax:

Invoice Number: 1623

Invoice Date:

Sep 17, 2018

2

Page:

Duplicate

Bill To:	
HOBO CORPORATE OFFICE 2650 BELVIDERE ROAD WAUKEGAN, IL 60085	

Ship to:	***************************************
STORE 26	

Customer ID	Customer PO	Paymer	t Terms
НОВО	S000018668	Net 10	Days
Sales Rep ID	Shipping Method	Ship Date	Due Date
	Freight		9/27/18

Quantity	Item	Description	Unit Price	Amount
4.00	Door	2/10 FIBERGLASS DECO 3/4 OVAL PATINA #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
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4.00	Door	2/8 FIBERGLASS DECO 3/4 OVAL ZINC #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
4.00	Door	2/10 FIBERGLASS DECO 3/4 OVAL ZINC #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
		Subtotal		Continued
		Sales Tax		Continued
N 1/0 171.15	N	Total Invoice Amount Payment/Credit Applied		Continued
Check/Credit Mer	no No:	TOTAL		Continued

JMB Liquidators, LLC Claim 3-1 Filed 11/20/18 Desc Main Document Page 8 of 8 729 Zeigler Lane Enola, PA 17025

US:A

Voice: 717-547-6300

Fax:

Sep 17, 2018 Invoice Date:

Page:

3

Duplicate

Bill To:	
HOBO CORPORATE OFFICE 2650 BELVIDERE ROAD WAUKEGAN, IL 60085	

Ship to:	
STORE 26	

CustomerID	Customer PO	Paymen	t Terms
НОВО	S000018668	Net 10	Days
Sales Rep ID	Shipping Method	Ship Date	Due Date
	Freight		9/27/18

Quantity	Item	Description	Unit Price	Amount
4.00		3/0 FIBERGLASS DECO 3/4 OVAL ZINC #318 DB NO BRICKMOULD (2 LH - 2 RH)	135.00	540.00
	,	Subtotal	,	5,400.00
		Sales Tax		**
		Total Invoice Amount		5,400.00
Check/Credit Mer	no No:	Payment/Credit Applied		
		TOTAL		5,400.00

Northern District of Illinois Claims Register

18-30054 North Avenue Associates LLC

Honorable Judge: Jacqueline P. Cox Chapter: 11

Office: Chicago

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (27228862) Claim No: 3 Status:

JMB LIQUIDATORS LLC Original Filed Filed by: CR

729 ZEIGLER LANE Date: 11/20/2018 Entered by: Kimetha Collier

Enola, PA 17025-0000 Original Entered Modified:

Date: 11/20/2018

Amount claimed: \$5400.00

History:

<u>Details</u> 3-1 11/20/2018 Claim #3 filed by JMB LIQUIDATORS LLC, Amount claimed: \$5400.00 (Collier,

Kimetha)

Description: Remarks:

Claims Register Summary

Case Name: North Avenue Associates LLC

Case Number: 18-30054

Chapter: 11

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

Total Amount Claimed*	\$5400.00
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		