

## 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 - Eastern Div

Case number 18-30054

**FILED**  
UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
JAN 11 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

## 1. Who is the current creditor?

Lyon Capital Corporation factor for Vilo Home  
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? Vilo Home

## 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?

Lyon Capital Corporation  
Name  
7924 West Sahara Ave  
Number Street  
Las Vegas NV 89117  
City State ZIP Code  
Contact phone 702 534 5067  
Contact email Fred W@Lyoncredit.com  
c/o Fred Wasserspring

## Where should payments to the creditor be sent? (if different)

Same  
Name  
Number Street  
City State ZIP Code  
Contact phone \_\_\_\_\_  
Contact email \_\_\_\_\_

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? \_\_\_\_\_

**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: \_\_\_\_\_

7. How much is the claim? \$ 14,541 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.

Goods sold (invoices attached)

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:

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).

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 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

01 08 2019  
MM / DD / YYYY

Signature

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

Name

Fredric R. Wasserspring  
First name Middle name Last name

Title

Chief Operating Officer

Company

Lyan Capital Corporation

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

Address

7924 West Sahara Ave  
Number Street

Las Vegas NV  
City

89117  
ZIP Code

Contact phone

702-534-5067

Email

FredW@lyancapital.com



# VILO HOME

10909 Painter Ave  
Santa Fe Springs, CA 90670  
P: (562) 321-2715  
F: (562) 321-2716

360970  
Invoice

Date	Invoice #
8/10/2018	10567

Bill To
NORTH AVENUE ASSOCIATES LLC 7557 S. 78TH AVE. BRIDGEVIEW, IL 60455 (708) 924-9155

Ship To

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
n000020809	Net 30	JM	8/10/2018	Will Call		
Quantity	Item Code	Description	Price Each	Amount		
15	VH3100	La Salle Dining Table	149.00	2,235.00		
30	VH3120	La Salle Wood Back Dining Chairs	40.00	1,200.00		
30	VH3160	La Salle Hosting Chair	50.00	1,500.00		
15	VH3130	La Salle Dining Bench	40.00	600.00		
<p><i>This invoice is assigned and payable to Lyon Capital Corp.</i> Please remit payment directly to:</p> <p><b>Lyon Capital Corp.</b> 7924 W. Sahara Ave Las Vegas, NV 89117</p> <p><small>Yours Net 30.</small></p>						
				<i>Dee</i>		
				<b>Total</b>	\$5,535.00	
				<b>Balance Due</b>	\$5,535.00	



**VILO HOME**10909 Painter Ave  
Santa Fe Springs, CA 90670  
P: (562) 321-2715  
F: (562) 321-2716360975  
Invoice

Date	Invoice #
8/10/2018	10360

Bill To
NORTH AVENUE ASSOCIATES LLC 7557 S. 78TH AVE. BRIDGEVIEW, IL 60455 (708) 924-9155

Ship To

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
n000020809	Net 30	JM	8/10/2018	Delivery		

Quantity	Item Code	Description	Price Each	Amount
18	VH5500	CUMBERLAND PUB STORAGE TABLE	139.00	2,502.00
108	VH5502	CUMBERLAND PUB DINING CHAIR	35.00	3,780.00
<p><i>This invoice is assigned and payable to Lyon Capital Corp.</i> Please remit payment directly to:</p> <p><b>Lyon Capital Corp.</b> 7924 W. Sahara Ave Las Vegas, NV 89117</p> <p><small>Terms: Net 30</small></p>				

*Del*

<b>Total</b>	<b>\$6,282.00</b>
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<b>Balance Due</b>	<b>\$6,282.00</b>
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**VILO** HOME

10909 Painter Ave  
 Santa Fe Springs, CA 90670  
 P: (562) 321-2715  
 F: (562) 321-2716

3609776 Invoice

Date	Invoice #
8/10/2018	9832

<b>Bill To</b>
NORTH AVENUE ASSOCIATES LLC 7557 S. 78TH AVE BRIDGEVIEW, IL 60455 (708) 924-9155

<b>Ship To</b>

P.O. Number	Terms	Rep	Ship	Via	F.O.B.	Project
n000020809	Net 30	JM	8/10/2018	Delivery		

Quantity	Item Code	Description	Price Each	Amount
6	VH5500	CUMBERLAND PUB STORAGE TABLE	139.00	834.00
54	VH5502	CUMBERLAND PUB DINING CHAIR	35.00	1,890.00
<p><i>This invoice is assigned and payable to Lyon Capital Corp.</i>            Please remit payment directly to:</p> <p><b>Lyon Capital Corp.</b>            7924 W. Sahara Ave            Las Vegas, NV 89117</p> <p><small>Terms: Net 30.</small></p>				

*Deh*

<b>Total</b>	\$2,724.00
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<b>Balance Due</b>	\$2,724.00
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# Northern District of Illinois Claims Register

## [18-30054 North Avenue Associates LLC](#)

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

**Office:** Eastern Division

**Last Date to file claims:**

**Trustee:**

**Last Date to file (Govt):**

*Creditor:* (27443295)

**Claim No:** 22

*Status:*

Lyon Capital Corporation

*Original Filed*

*Filed by:* CR

factor for Vilo Home

*Date:* 01/11/2019

*Entered by:* Michelle O'Neal

7924 West Sahara Ave

*Original Entered*

*Modified:*

Las Vegas NV 89117

*Date:* 01/14/2019

Amount claimed: \$14541.00

*History:*

[Details](#)   [22-1](#)   01/11/2019 Claim #22 filed by Lyon Capital Corporation, Amount claimed: \$14541.00 (O'Neal, Michelle)

*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

<b>Total Amount Claimed*</b>	\$14541.00
<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>		