Case 18-30054 Claim 43-1 Filed 01/28/19 Desc Main Document Page 1 of 5

Debtor 1 North Avenue Associates LLC		
Debtor 2		
(Spouse, if filing)		
United States	Bankruptcy Court for the: Northern District of Illinois - Eastern Div	



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.

1	Part 1: Identify the Claim				
1.	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			
2.	Has this claim been	1.			
2.	acquired from someone else?	Viol Viol <td< th=""></td<>			
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) Name Name Name Name Number Street VIII A PAR L LEGISI City State Contact phone			
4.	Does this claim amend one already filed?	No Priced 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?			

P	art 2: Give Informatio	n 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?	s367.45 Does this amount include interest or other charges? DNO ☐ 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.
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 necessary to cure any default as of the date of the petition: \$
		Annual Interest Rate (when case was filed)%
	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 right of setoff?	a No Ves. Identify the property:

12. Is all or part of the claim entitled to priority under	X No	
11 U.S.C. § 507(a)?	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).	\$
	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	er the date of adjustment.

Part 3:	Sign Below	

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The person completing	priate box:				
this proof of claim must sign and date it.	n and date it. A lam the creditor.				
FRBP 9011(b).					
If you file this claim	tee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
electronically, FRBP 5005(a)(2) authorizes courts	courts I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
to establish local rules specifying what a signature					
is.	Lunderstand that an authorized signature on this Proof of Claim service as an asknowledgement that when calculating i				
A person who files a	uncult of the old	in, all oreands gave the debter orean or any payments received toward the debt.			
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	and correct.				
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under pe	enalty of perjury that the foregoing is true and correct.			
3571.	Executed on date $\frac{1/3/20/9}{MM/DD/YYYY}$				
	XX				
	Signature				
	Print the name o	f the person who is completing and signing this claim:			
	News	Trating, Smith			
	Name	First name Middle name Last name			
	Title				
	Company				
		Identify the corporate servicer as the company if the authorized agent is a servicer.			
	Address	839 12 NOTE ALLETS			
	Address	Number Street			
		1/11/a Parc, 12 60131			
		City State ZIP Code			
	Contact phone	(1030) 90 FODS Email 14/1/an/03EGM/11/ COM			

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PayServ

Bradenton

iorted By: Added Descending

Vacation Accrual Not Paid, JuJuan Smith, North Avenue Assoc. LLC

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Total Weeks from Anniversary until last day worked	21.00
Days Accrued per week	0.28846
Total Days Accrued Since Anniversary	6.06
Vention Dave Remaining from Accruals History Report	12.00
Vacation Days Remaining from Accruals History Report	12.00
Vacation Hours Paid on Last Check	16.48
Vacation Days Paid on Last Check	2.06
	16.00
Total Vacation Hours Unpaid	
Total Vacation Hours Unpaid	127.98
Levely Data	18.50
Hourly Rate	20100
Total Amount Owed	2367.65

Northern District of Illinois Claims Register

18-30054 North Avenue Associates LLC

Honorable Judge: Jacqueline	P. Cox Chapter:	11		
Office: Eastern Division	Last Date	Last Date to file claims:		
Trustee:	Last Date	to file (Govt):		
<i>Creditor:</i> (27483570) JuJuan Smith 889 W North Ave #F Villa Park IL 60181	Claim No: 43 Original Filed Date: 01/28/2019 Original Entered Date: 01/28/2019	Status: Filed by: CR Entered by: Kevin Lyons Modified:		
Amount claimed: \$2367.65				
History:				
<u>Details</u> <u>43-</u> 01/28/2019 Claim #	43 filed by JuJuan Smit	h, Amount claimed: \$2367.65 (Lyon	s, Kevin)	

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*	\$2367.65
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		