

## Fill in this information to identify the case:

Debtor 1 Oak Creek Distribution LLC

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_

Case number 18-30055

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

118

ADT, CLERK  
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.

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

## Part 1: Identify the Claim

## 1. Who is the current creditor?

Potential Poly Bag, Inc.  
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor \_\_\_\_\_

NOV 27 2018  
JEFFREY P. ALLSTEADT, CLERK  
TEAM - CA

## 2. 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?

MARK KATZ - Potential Poly Bag  
Name

1253 Conny Island Ave.  
Number Street

BROOKLYN NY 11230  
City State ZIP Code

Contact phone 718-258-0800

Contact email mark@potentialpoly.com

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

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? \_\_\_\_\_

**PROOF OF CLAIM FILING INFORMATION FOR**

**MORGAN ADMINISTRATION, INC.**

**CASE NO. 18-30039**

**US BANKRUPTCY COURT, NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION**

Debtor Name	Case Number
Morgan Administration, Inc.	18-30039
Belvidere Associates LLC	18-30043
Deforab LLC	18-30057
FP Retail Associates LLC	18-30046
Hillcrest Enterprises, LLC	18-30047
Jular Media LLC	18-30050
KLS Acquisition Corp.	18-30052
Loomis Enterprises LLC	18-30053
North Avenue Associates LLC	18-30054
Oak Creek Distribution LLC	18-30055
OL Enterprises LLC	15-30056

**General Bar Date:** TBD

**General Administrative Bar Date:** TBD

**Governmental Bar Date:** TBD

**NOTE: The Bar Date motion has not been filed. Until such time, you may send completed Proofs of Claims to:**

US Bankruptcy Court – Northern District of Illinois – Eastern Division  
Everett McKinley Dirksen United States Courthouse  
219 South Dearborn Street  
Chicago, IL 60604

**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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim? \$ <u>10,512</u>	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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.  <u>goods sold</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property.  <b>Nature of property:</b> <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____  <b>Basis for perfection:</b> _____ 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.)  <b>Value of property:</b> \$ _____ <b>Amount of the claim that is secured:</b> \$ _____ <b>Amount of the claim that is unsecured:</b> \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)  <b>Amount necessary to cure any default as of the date of the petition:</b> \$ _____  <b>Annual Interest Rate</b> (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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:

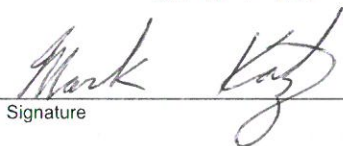
- ☒ I am the creditor.  
☐ I am the creditor's attorney or authorized agent.  
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

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 10 30 2018  
MM / DD / YYYY

  
Signature

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

Name

MARK  
First name

Middle name

KATZ  
Last name

Title

PRESIDENT

Company

POTENTIAL POLY BAG INC.

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

Address

1253 CONEY ISLAND AVE.  
Number Street

BROOKLYN  
City

N.Y.  
State

11230  
ZIP Code

Contact phone

718-258-0800

Email

MARK@POTENTIALPOLY.COM



1253 Coney Island  
Brooklyn, NY 11230

Potential Poly Bag, Inc.

Packaging Manufacturer

phone: 1-718-258-0800 - fax: 1-718-258-9393

## INVOICE

INVOICE # 205997	DATE September 5, 2018
CUSTOMER ID: HOBO	TERMS: <del>Net 30</del> Net 30
P.O. #: n0000022148	SALESPERSON: HOUSEACC
ORDERED BY:	SHIP VIA:

### BILL TO

HOBO  
2650 BELVIDERE RD  
WAUKEGAN IL 60085

### SHIP TO

HOBO 47  
7557 S. 78TH AVE.  
BRIDGEVIEW IL 60455

Style #	DESCRIPTION	UNITS	UNIT PRICE	AMOUNT
1204768	ROUGH STUFF 55G DRUM LINER 20 CT	160.00	34.20	5472.00
1057872	42 GAL 20 CT CONTRACT 16TB	160.00	31.50	5040.00

	Total Units
	320
Items Total	\$10,512.00
Invoice Total	10512.00

# Northern District of Illinois Claims Register

## 18-30055 Oak Creek Distribution LLC

**Honorable Judge:** Jacqueline P. Cox

**Chapter:** 11

**Office:** Chicago

**Last Date to file claims:**

**Trustee:**

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

*Creditor:* (27235953)  
POTENTIAL POLY BAG, INC  
1253 CONEY ISLAND  
AVENUE  
BROOKLYN, NY 11230

**Claim No:** 12  
*Original Filed*  
*Date:* 11/27/2018  
*Original Entered*  
*Date:* 11/28/2018

*Status:*  
*Filed by:* CR  
*Entered by:* Charles Ward  
*Modified:*

Amount claimed: \$10512.00

*History:*

[Details](#) [12-1](#) 11/27/2018 Claim #12 filed by POTENTIAL POLY BAG, INC, Amount claimed: \$10512.00  
(Ward, Charles)

*Description:*

*Remarks:*

## Claims Register Summary

**Case Name:** Oak Creek Distribution LLC

**Case Number:** 18-30055

**Chapter:** 11

**Date Filed:** 10/25/2018

**Total Number Of Claims:** 1

<b>Total Amount Claimed*</b>	\$10512.00
<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>		