

**Fill in this information to identify the case:**

Debtor 1 <u>Oak Creek Distribution LLC</u>
Debtor 2 (Spouse, if filing)
United States Bankruptcy Court <u>Northern District of Illinois</u>
Case number: <u>18-30055</u>

FILED  
 U.S. Bankruptcy Court  
 Northern District of Illinois  
 12/21/2018  
 Jeffrey P. Allsteadt, Clerk

**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**

<b>1. Who is the current creditor?</b>	EULER HERMES N.A as Agent for VIKING FOREST PRODUC _____ Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor _____	
<b>2. Has this claim been acquired from someone else?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
<b>3. Where should notices and payments to the creditor be sent?</b>  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>	<b>Where should payments to the creditor be sent? (if different)</b>
	EULER HERMES N.A as Agent for VIKING FOREST PRODUC _____ Name  800 Red Brook Blvd, #400C Owings Milla, MD 21117  Contact phone <u>410-753-0640</u> Contact email <u>insolvency@eulerhermes.com</u>  Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	_____ Name  Contact phone _____ Contact email _____
<b>4. Does this claim amend one already filed?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ <span style="float: right;">MM / DD / YYYY</span>	
<b>5. Do you know if anyone else has filed a proof of claim for this claim?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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: 3679

7. How much is the claim? \$ 115891.22 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 healthcare information.  
Goods and Services

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: \_\_\_\_\_

<b>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply.</i>	<b>Amount entitled to priority</b>
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
	<input type="checkbox"/> 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).	\$ _____
	<input type="checkbox"/> 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).	\$ _____
	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies	\$ _____
* Amounts are subject to adjustment on 4/1/19 and every 3 years after that for cases begun on or after the date of adjustment.		

**Part 3: Sign Below**

<p><b>The person completing this proof of claim must sign and date it. FRBP 9011(b).</b></p> <p>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</p> <p><b>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.</b></p>	<p>Check the appropriate box:</p> <p><input type="checkbox"/> I am the creditor.</p> <p><input checked="" type="checkbox"/> I am the creditor's attorney or authorized agent.</p> <p><input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.</p> <p><input type="checkbox"/> I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.</p> <p>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.</p> <p>I have examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date <u>12/21/2018</u></p> <p style="text-align: center;">MM / DD / YYYY</p> <p><u>/s/ Sonia Thomas</u></p> <p>Signature</p> <p>Print the name of the person who is completing and signing this claim:</p> <p>Name <u>Sonia Thomas</u></p> <p style="text-align: center;">First name Middle name Last name</p> <p>Title <u>Insolvency Processor</u></p> <p>Company <u>Euler Hermes N.A</u></p> <p>Address <u>800 Red Brook Blvd, #400C</u></p> <p style="text-align: center;">Number Street</p> <p style="text-align: center;"><u>Owings Milla, MD 21117</u></p> <p style="text-align: center;">City State ZIP Code</p> <p>Contact phone <u>410-753-0640</u> Email <u>insolvency@eulerhermes.com</u></p>
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# STATEMENT

Viking Forest Products  
 7615 Smetana Lane, Suite 140  
 Eden Prairie, MN 55344

10.26.18

**BILL** Customer # 658409  
**TO** Oak Creek Dist dba: HOBO  
 7557 W 78th St  
 Bridgeview IL 60455

Inv Date	Invoice Number	Due Date	Balance	Amount
8/14/2018	45484	9/13/2018		6,815.90
8/30/2018	13269	9/29/2018		5,322.72
8/30/2018	13270	9/29/2018		5,385.64
8/30/2018	13271	9/29/2018		5,385.64
8/30/2018	84474	9/29/2018		5,603.64
8/31/2018	84473	9/30/2018		5,603.15
9/4/2018	45840	10/4/2018		5,360.68
9/4/2018	45841	10/4/2018		5,360.68
9/4/2018	88893	10/4/2018		13,130.04
9/7/2018	46657	10/7/2018		4,886.28
9/10/2018	10292	10/10/2018		6,389.76
9/10/2018	59944	10/10/2018		4,923.00
9/10/2018	10291	10/11/2018		6,389.76
9/11/2018	46569	10/11/2018		5,027.40
9/17/2018	46955	10/17/2018		4,907.76
9/17/2018	48903	10/17/2018		6,154.12
9/19/2018	46954	10/19/2018		4,907.76
9/25/2018	46150	10/25/2018		6,215.30
9/25/2018	50439	10/25/2018		8,121.99
				<b>115,891.22</b>

current	1-30 days	31-60 days	61-90 days	Over 90 days	amount due
	past due	past due	past due	past due	
	109,075.32	6,815.90			<b>115,891.22</b>

Remittance  
 Date  
 Amount Due  
 Amount  
 Enclosed

Send Payment to:  
 Viking Forest Products, LLC  
 PO BOX 847245  
 Dallas, TX 75284-7245

Make all checks payable to Viking Forest Products  
**Thank you for your business!**

# Northern District of Illinois Claims Register

[18-30055 Oak Creek Distribution LLC](#)

**Honorable Judge:** Jacqueline P. Cox      **Chapter:** 11  
**Office:** Eastern Division      **Last Date to file claims:**  
**Trustee:**      **Last Date to file (Govt):**

*Creditor:* (27395904)      **Claim No:** 23      *Status:*  
EULER HERMES N.A as Agent      *Original Filed*      *Filed by:* CR  
for VIKING FOREST PRODUC      *Date:* 12/21/2018      *Entered by:* EPoc ADI  
800 Red Brook Blvd, #400C      *Original Entered*      *Modified:*  
Owings Milla, MD 21117      *Date:* 12/21/2018

Amount claimed: \$115891.22

*History:*

[Details](#)    [23-1](#) 12/21/2018 Claim #23 filed by EULER HERMES N.A as Agent for VIKING FOREST PRODUC,  
Amount claimed: \$115891.22 (ADI, EPoc)

*Description:*

*Remarks:* (23-1) Account Number (last 4 digits):3679

## 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>	\$115891.22
<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>		



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