Fill in this ir	formation to identify the case:
Debtor 1	Oak Creek Distributors LLCdba Home Owners Bargain Opp
Debtor 2 (Spouse, if filing)	
United States	Bankruptcy Court for the: Northern District of Illinois
Case number	18-30055



### 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.	Who is the current creditor?	Eagle Home Prod					
		Name of the current credi	tor (the person or e	entity to be paid for this cl	aim)		
		Other names the creditor	used with the debt	or			
2.	Has this claim been acquired from someone else?	☑ No ❑ Yes. From whom?	?				
3.	Where should notices and payments to the creditor be sent?	Where should notice		r be sent?	Where shou different)	Id payments to the creditor	be sent? (if
	Federal Rule of	Eagle Home Prod	lucts, Inc.				
	Bankruptcy Procedure	Name			Name		
	(FRBP) 2002(g)	One Arnold Drive					
		Number Street	<b>N</b> 127	44740	Number	Street	
		Huntington	NY	11743		0.1	710.0.1
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone (631) 6	73 3500		Contact phone		
		Contact email Custsei		neproducts.com	Contact email		
		Contact email •	. Condition		Contact email		
		Uniform claim identifier fo	r electronic payme	nts in chapter 13 (if you u	se one):		
4.	Does this claim amend	No No					
	one already filed?	Yes. Claim numbe	er on court claim	s reaistry (if known)		Filed on	
				J , ( )_		MM / DD	/ YYYY
_	D	<b>□4</b>				0	
).	Do you know if anyone else has filed a proof	V No Ves. Who made the	o orlige filing?				
	of claim for this claim?	La res. vvno made ti	he earlier filing?				

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F	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?	\$ 11,770.86. Does this amount include interest or other charges?
		<ul> <li>Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).</li> </ul>
8.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
	claim?	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
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)%
10.	Is this claim based on a	M No
	lease?	☐ Yes. Amount necessary to cure any default as of the date of the petition. \$
11.	Is this claim subject to a	No No
	right of setoff?	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:	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).	\$
entitied to phoney.	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 aft	er the date of adjustment.

Dart 3.	Sign	B

Part 3: Sign Below					
The person completing	Check the approp	riate box:			
this proof of claim must sign and date it.	I am the cred	itor.			
FRBP 9011(b).	I am the cred	itor's attorney or authorized ag	jent.		
If you file this claim	I am the trust	ee, or the debtor, or their auth	orized agent. Bankrupt	cy Rule	e 3004.
electronically, FRBP	l am a guara	ntor, surety, endorser, or other	codebtor. Bankruptcy	Rule 3	005.
5005(a)(2) authorizes courts to establish local rules					
specifying what a signature is.	I understand that amount of the clai	an authorized signature on this m, the creditor gave the debto	s Proof of Claim serves r credit for any paymen	as an ts rece	acknowledgment that when calculating the eived toward the debt.
A person who files a			<b>.</b>		halist that the information is true
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined t and correct.	he information in this Proof of	Claim and have a reas	onable	belief that the information is true
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	I declare under pe	enalty of perjury that the forego	ing is true and correct.		
5571.	Executed on date	12/11/2018 MM / DD / YYYY			
	Signature	NO UT			
	Print the name of	of the person who is complet	ing and signing this o	claim:	
	Namo	Robert Chemtob			
	Name	First name	Middle name		Last name
	Title	VP			
	Company	Eagle Home Products,	Inc.		
	Company	Identify the corporate servicer as	the company if the author	rized ag	gent is a servicer.
		One Arnold Drive			
	Address	Number Street			
		Huntington		NY	11743
		City		State	ZIP Code
	Contact phone	(631) 673 3500		Email	custserv@eaglehomeproducts.com

(631) 673 3500

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Name 1	Eagle Home Products Inc. 631 673-3500		r's Pro No		15666
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and the second sec	THE REPORT OF THE AND FYCE PTIONS	WEIGHT (Subject to Correction)	Class or Rate Ret (For Into, Only)	Cupe (Optional)	For Freight Collect Shipments. If this shipment, is to be delivered to the constance, without recourse on the consignot.
	- a. J. M. W. How And	1320			the consignor shall sign the following statement
_00_0	2- 4- 000021702				The carrier may decline to make delivery of this snipment without payment of freight and all other lawful charges
<u> </u>		- anint	non		(Signature-of Consignor.)
Censt	LE MUST CALL AFRICACIÓN	AF			Shipper Certification-This is to certify that the
	(70X) -Max-1100				above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation accord-
			1		ing to the applicable regulations of the DOT.
	<u><u></u></u>				Per Date Carrier Certification-Carrier acknowledges
RE	i dientmust sign for use co				receipt of packages and required placards. Carrier cartifies emergency response information was made available and/or carrier
			1	1	has the DOT emergency response guidebook or equivalent document in the vehicle.
TOTAL PIECES	Re Lot 1 and 3 giteds	1320	-422-1		
NOTE (1) Where II	he rate is dependent on value, snippers are required to state specifically in writing the NOTE (2) Liability Limitation applicable.	tor loss or damage or	n tinis shipment	may be	Per Date Date
The agreed or declared or dec	value of the property as follows: tared value of the property is specifically stated by the shipper to be not exceeding NOTE (3) Commodities requiring spi be so marked and packaged as to a	acial or additional care or attent insure sate transportation with	ion in nandling or sto ordinary care. See S	wing musi ec.	Package Nos. Date Freight charges are to be PREPAID
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Shipper	Carrier Carrier	Date			C.O.D. SHIPMENT
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One A	rnold Drive, Huntington New York 11743	Permanent post			. Total Charges
T Mark "X" to desi	ignale Hazargous Materiais as defined in BOT Regulations.				United and an additional of the state of the
	Truck	er Initial			
	1120				i
æ	Merchandise received in good condition	<u> </u>			Time In:
		$\geq$			//
\$	Merchandise received on pallets				
	Distance Distance	>			Time Out:
8	Packing list provided by shipper	5.			11-
	Bill of Lading received by driver				17
		· ·		nelle	to and earteas from
¢	Driver is responsible for carton count and for any necess	ary strapping i	to prevent	. paile	als and cartons from
	movement.				
۵	Packing list is provided on last pallet loaded and clearly m	narked.			

Shipper not responsible for carrier repositioning of pallets.

5 Date

Driver Signature

Dix. tons Car

Trailer Number

10/25/2018

Case 18-30055 Claim 27-1 Part 2 Filed 12/26/18 Desc Document Continued 4 of 11

Page

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PLEASE REMIT PROMPTLY TO: ROADRUNNER TRANSPORTATION SERVICES PO BOX 74857 CHICAGO IL 60694-4857 CUSTOMER SERVICE: 855-228-0096	ITERSTON	RDF5 EW 394452112 PRO NO. 393290614 Ship date 8/03/18		And Andream State of An	DELIVERY RECEIPT
B L T O	S EAGLE HOME H 1 ARNOLD DE P HUNTINGTON	2	CONS	HOBO STORES 47 7557 S 78TH AV BRIDGEVIEW, II	Æ
Orig: NYM Dest: CHI - RDFS	100360 1 references be 2HI Anticles and special warks		708 924 RUVO	9155. M Savced(	
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3 < T O	T A L S	393290614D	PDD	1,320	
ALL FREIGHT DESCRIBED ABOVE RECEIVED IN GOOD CONDITION AND	SHRINK WRAPIBANDING INTACT EXCL		Any Additi	ional Service May Result Please Initial Services Pe	t In Additional Charges Informed
DUE DATE 8/08/18	DATE DEL		N DEL	LIFTGATE SC	
SIGNATURE PRINTED NAME	DRIVER:	- And	RESID		HK#
FEDERAL & CARREER REGULATIONS REQUIRE PAYMENT WITHIN 15 DA		CREDIT TERMS TO MAINTAIN APP			

08/07/18 01:54

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One Arnold Drive, Huntington New York 11743

ອມງ Claim 27-1 Part 2 Filed 12/26/18 Desc Document Continued – 10 of 11

Bill of Lading received by driver

Packing list provided by shipper

Merchandise received on pallets

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x: 12%

Merchandise received in good condition

One Arnold Drive, Huntington New York 11743

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when the rate is dependent on value, shippers are required to state specifically in whether the rate is dependent on value (1) and (1) and (1)

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Case 18-30055 Claim 27-1 Part 2 Filed 12/26/18 Desc Document Continued

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# Northern District of Illinois Claims Register

#### 18-30055 Oak Creek Distribution LLC

Honorable Judge: Jacqueline P. Cox

**Office:** Eastern Division

Chapter: 11 Last Date to file claims: Last Date to file (Govt):

#### **Trustee:**

*Creditor:* (27234325) EAGLE HOME PRODUCTS, INC ONE ARNOLD DRIVE HUNTINGTON, NY 11743 Claim No: 27 Original Filed Date: 12/26/2018 Original Entered Date: 12/26/2018 Status: Filed by: CR Entered by: Kimetha Collier Modified:

Amount claimed: \$11770.86

History:

Details 27-1 12/26/2018 Claim #27 filed by EAGLE HOME PRODUCTS, INC, Amount claimed: \$11770.86 (Collier, Kimetha)

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

Total Amount Claimed\* \$11770.86

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		