

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

Debtor 1 OL Enterprises LLC

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

United States Bankruptcy Court for the: Northern District of Illinois - Eastern Div

Case number 18-30056

**FILED**  
 UNITED STATES BANKRUPTCY COURT  
 NORTHERN DISTRICT OF ILLINOIS  
 JAN -2 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? Systems Equipment Service, Inc.  
 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? \_\_\_\_\_

3. Where should notices and payments to the creditor be sent?  
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p><b>Where should notices to the creditor be sent?</b></p> <p><u>Systems Equipment Service, Inc.</u>                  Name  <u>4314 166th Street</u>                  Number Street  <u>Oak Forest, IL. 60452</u>                  City State ZIP Code                  Contact phone <u>(708) 535-1273</u>                  Contact email <u>dlynn0616@hotmail.com</u></p>	<p><b>Where should payments to the creditor be sent? (if different)</b></p> <p>_____                  Name                  _____                  Number Street                  _____                  City State ZIP Code                  Contact phone _____                  Contact email _____</p>
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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? \$ 2,706.26 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.  
Services/repair

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:

Amount entitled to priority

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). \$ \_\_\_\_\_

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 12/26/2018  
MM / DD / YYYY

  
Signature

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

Name Robert E. Otterbacher  
First name Middle name Last name

Title President

Company Systems Equipment Service, Inc.  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 4314 166th Street  
Number Street

Oak Forest IL 60452  
City State ZIP Code

Contact phone (708) 535-1273 Email dlynn0616@hotmail.com



2:28 PM

Systems Equipment Services, Inc.

12/19/18

**Open Invoices**

As of December 19, 2018

Type	Date	Num	P. O. #	Terms	Due Date	Class	Aging	Open Balance
<b>Home Owners Bargain Outlet/Oak Lawn/\$85</b>								
<b>Toyota s/n 67343</b>								
Invoice	09/28/2018	20144	B. Rapp	Net 10	10/08/2018	HOBO	72	127.50
Invoice	10/16/2018	20184	Bill	Net 10	10/26/2018	HOBO	54	2,578.76
Total Toyota s/n 67343								2,706.26
Total Home Owners Bargain Outlet/Oak Lawn/\$85								2,706.26
<b>TOTAL</b>								<b>2,706.26</b>



4314 W. 166th Street  
 Oak Forest IL 60452

# Invoice

DATE	INVOICE #
10/16/2018	20184

<b>BILL TO</b>
Home Owners Bargain Outlet ATTN: A/R - Janet Sutton 2650 Belvedere Road Waukegan, IL. 60085

<b>EQUIPMENT LOCATION</b>
Home Owners Bargain Outlet 8716 S. Cicero Ave. Oak Lawn, IL. 60453

<b>P.O. NO.</b>	<b>TERMS</b>	<b>REP</b>	<b>PROJECT</b>
Bill	Net 10	JAV	Toyota s/n 67343

DESCRIPTION	QTY	RATE	AMOUNT
Toyota Model 7FGCU30 s/n: 67343			
Steam clean unit. Engine blowing white smoke from exhaust; excessive pressure building in radiator - troubleshoot. Found blown head gasket. Remove cylinder head and send out for repair. Reinstall repaired cylinder head. Tune-up unit. Replace upper and lower radiator hoses. Change engine oil and filter along with air filter. Adjust as needed and test operate. Found starter working intermittantly. Remove and replace starter. Return unit to Customer.	16	85.00	1,360.00
Cylinder head repair	1	395.00	395.00
Head gasket set	1	173.66	173.66
Lower radiator hose	1	12.78	12.78
Upper radiator hose	1	21.31	21.31
Bypass hose	1	28.99	28.99
Thermostat	1	18.35	18.35
Tune up kit	1	60.21	60.21
Air filter	1	17.90	17.90
50/50 Red Anti-Freeze	2	9.00	18.00
10W30 motor oil	4	4.95	19.80
Top Mount terminal	2	3.88	7.76
Starter	1	195.00	195.00
Cartage	1	250.00	250.00
<b>Total</b>			\$2,578.76



**SYSTEMS EQUIPMENT SERVICES, INC.**

4314 W. 166th Street  
Oak Forest, Illinois 60452  
Phone: (708) 535-1273 • Fax: (708) 535-1465

- EMERGENCY SERVICE
- RENTAL TRUCK
- PM SERVICE
- CUSTOMER DAMAGE
- CUSTOMER TRUCK
- POSSIBLE WARRANTY

**RECORD OF MATERIAL USED —**

QTY.	PART NO.	DESCRIPTION	UNIT PRICE	PRICE
1	R/R	CYL. HEAD		375.00
1	HS 941713	CARTRIDGE		
1	TY16512-23340-71	HOSE		
1	TY16511-23340-71	HOSE		
1	TY16227815F-71	HOSE		
1	30916-03980-71	THERMO		
1	E107123	RACKET		
1	TY1748-42230-71	M/FILTER		
1	RCD	AUTO FEEDER		
1	10030	M/OIL		
2	ET3600-2	FERRULE		
1	TY28100-2653-71	STARTER		
<b>PARTS TOTAL</b>				

**WORK ORDER**

20184

SALES TAX  
TOTAL

WORK PERFORMED AT:	DATE
SEES - Shop	10-2-18
MAKE	UNIT NO.
70Y07A	
MODEL	
7 FEG 430	
SERIAL NO.	
67343	
HOUR METER READING	
9238.1	
MECHANIC NAME	
Shop	
NO.	

**INVOICE TO:**

DATE: 10/2/18

P.O. NUMBER

REL. NO.

BILL

**DESCRIPTION OF SERVICES PERFORMED**

REMARKS: STEPHEN CLEAN TRUCK. EXHAUST BLENDING WHITE SMOKE FROM EXHAUST IN BUILDING EXCESSIVE PRESSURE END RADIATOR. CHECK OUT. FOUND BLEND HEAD GASKET. REMOVE CYLINDER HEAD & SEND OUT FOR REPAIR. — REINSTALL CYLINDER HEAD. TUNE-UP, REPAIR & UPPER ROVER RADIATOR HOSES. CHANGE EXHAUST FILTER. REPLACE AIR FILTER. MAKE ALL NECESSARY ADJUSTMENTS. TEST OPERATE. FOUND STARTER INTERMITTENTLY WORKING. R/R STARTER.

- WORK COMPLETED
- TEMPORARY REPAIRS — OK FOR LIMITED USE UNTIL PROPER REPAIRS ARE COMPLETED
- INCOMPLETE — DO NOT USE UNIT UNTIL REPAIRS ARE COMPLETED
- CAUTION — THIS UNIT SHOULD NOT BE USED DUE TO UNSAFE CONDITION

ADDITIONAL WORK & PARTS REQUIRED

- APPROVED
- DISAPPROVED
- WILL ADVISE
- NEEDS QUOTE
- SIGNATURE

TIME ARRIVED

TIME LEFT

HOURS

PARTS TOTAL

TRAVEL TIME

CARTAGE

LABOR TOTAL

TOTAL HOURS

16

X

/HR =

RECEIVED BY:

TOTAL

256.00



MAIGHT BILL OF LADING - SHORT FORM

Date 10-16-18

Bill of Lading No.

Original—Not Negotiable

Systems Equipment Inc  
(Name of Carrier)

Shipper No.

Carrier No.

TO:  
Consignee **Systems Equipment Inc**  
Street **4314 W 166th St**  
Destination **Oak Forest, IL** Zip Code  
Route **BIU** Vehicle No.

FROM:  
Shipper **HOBO**  
Street **8716 S Cicero**  
Origin **Oakton, IL** Zip Code

No. of Shipping Units

Kind of Packaging, Description of Articles, Special Marks and Exceptions

Pick-up lower

#735 NISSAN CPJ02AZ5PV S/N 9w2364

Weight (Subject to Correction)

Rates or Class

CHARGES

if the shipment moves between two points by a carrier by water, the law requires that the bill of lading show what the weight is (net or gross weight).  
Net Weight: this value is dependent on value, shipment, or value. Shippers are required to state specifically in writing the amount or declared value of the property. The amount or declared value of the property is hereby specifically stated by the shipper to be not exceeding

Bill Rapp 10/16

PREPAID  
C.O.D. RECEIVED  
COLLECT

TOTAL CHARGES \$

WEIGHT CHARGES  
Check Appropriate Box:  
 Freight prepaid  
 Collect

Notarizable limitation for bills of lading in this shipment may be applicable. See 495 United States Code, Sections 1472(a) (1) and (2).

58-80001  
10-18







4314 W. 166th Street  
 Oak Forest IL 60452

# Invoice

DATE	INVOICE #
9/28/2018	20144

<b>BILL TO</b>
Home Owners Bargain Outlet ATTN: A/R - Janet Sutton 2650 Belvedere Road Waukegan, IL. 60085

<b>EQUIPMENT LOCATION</b>
Home Owners Bargain Outlet 8716 S. Cicero Ave. Oak Lawn, IL. 60453

P.O. NO.	TERMS	REP	PROJECT
B. Rapp	Net 10	JAV	Toyota s/n 67343

DESCRIPTION	QTY	RATE	AMOUNT
Toyota Model 7FGCU30 s/n: 67343  Lift is smoking. Test/inspect engine and cooling systems and components. Found head gasket is leaking and starter has an internal short. Advise Company of needed repairs. Rick B.	1.5	85.00	127.50
<b>Total</b>			\$127.50







# Northern District of Illinois Claims Register

[18-30056 OL Enterprises LLC](#)

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

<p><i>Creditor:</i> (27240985)  SYSTEMS EQUIPMENT  SERVICE, INC  dba SYSTEMS EQUIP  LEASING  4314 W 166TH STREET  OAK FOREST, IL 60452</p>	<p><b>Claim No: 16</b>  <i>Original Filed</i>  Date: 01/02/2019  <i>Original Entered</i>  Date: 01/02/2019</p>	<p><i>Status:</i>  <i>Filed by:</i> CR  <i>Entered by:</i> Kimetha Collier  <i>Modified:</i></p>
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Amount claimed: \$2706.26

*History:*

[Details](#)   [16-1](#)   01/02/2019 Claim #16 filed by SYSTEMS EQUIPMENT SERVICE, INC, Amount claimed: \$2706.26 (Collier, Kimetha)

*Description:*

*Remarks:*

## Claims Register Summary

**Case Name:** OL Enterprises LLC  
**Case Number:** 18-30056  
**Chapter:** 11  
**Date Filed:** 10/25/2018  
**Total Number Of Claims:** 1

<b>Total Amount Claimed*</b>	\$2706.26
<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>		