

Fill in this information to identify the case:

Debtor 1 Morgan Administration, Inc

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: _____ District of Illinois, Eastern Division

Case number 18-30039

FILED
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

DEC 13 2018

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

- Who is the current creditor?

Antonio Prado
 Name of the current creditor (the person or entity to be paid for this claim) _____

Other names the creditor used with the debtor _____
- Has this claim been acquired from someone else?

☒ No
☐ Yes. From whom? _____
- Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>Antonio Prado</u> Name _____</p> <p><u>3723 N. Kedzie Ave</u> Number Street _____</p> <p><u>Chicago, IL 60618</u> City State ZIP Code _____</p> <p>Contact phone <u>773-874-6017</u></p> <p>Contact email <u>asprado@icloud.com</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p><u>Antonio Prado</u> Name _____</p> <p><u>3723 N. Kedzie Ave.</u> Number Street _____</p> <p><u>Chicago, IL 60618</u> City State ZIP Code _____</p> <p>Contact phone <u>773-874-6017</u></p> <p>Contact email <u>asprado@icloud.com</u></p>
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Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____
- Does this claim amend one already filed?

☒ No
☐ Yes. Claim number on court claims registry (if known) _____
- Do you know if anyone else has filed a proof of claim for this claim?

☒ No
☐ Yes. Who made the earlier filing? _____

Filed on _____
 MM / DD / YYYY

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: _____\$ 144.85
33.03

7. How much is the claim? \$

25.85

total = \$203.73

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.

Gift card purchases

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:☐ 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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* 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 this 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 07 2018
MM / DD / YYYY

X

Signature

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

Name

First name

Middle name

Last name

Title

Company

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

Address

Number

Street

City

State

ZIP Code

Contact phone

Email

THANK YOU FOR SHOPPING AT HOBO

H030 26

300 W NORTH AVE
VILLA PARK, IL 60181
(630) 833-3200

12/05/18 1:33PM CDRE 123 GIFTCARD

*** GIFT CARD BALANCE INQUIRY ***

25.85

Customer Copy

THANK YOU FOR SHOPPING AT HOBO

H030 26

300 W NORTH AVE
VILLA PARK, IL 60181
(630) 833-3200

12/05/18 1:33PM CDRE

*** GIFT CARD BALANCE INQUIRY ***

Balance: 144.95

Customer Copy

THANK YOU FOR SHOPPING AT HOBO

H030 26

300 W NORTH AVE
VILLA PARK, IL 60181
(630) 833-3200

12/05/18 1:33PM CDRE 123 GIFTCARD

*** GIFT CARD BALANCE INQUIRY ***

Balance: 38.03

Customer Copy

7777 0502 2404 6219

This card can be used for the purchase of merchandise and cannot be redeemed for cash. Lost or stolen cards will not be replaced. Gift cards are void if not activated by the cashier at the time of purchase. Gift cards are not refundable. Merchandise purchased with a gift card that is subsequently returned will be refunded in the form of another gift card.

7777 0502 2405 2488

This card can be used for the purchase of merchandise and cannot be redeemed for cash. Lost or stolen cards will not be replaced. Gift cards are void if not activated by the cashier at the time of purchase. Gift cards are not refundable. Merchandise purchased with a gift card that is subsequently returned will be refunded in the form of another gift card.

7777 0502 2405 5608

This card can be used for the purchase of merchandise and cannot be redeemed for cash. Lost or stolen cards will not be replaced. Gift cards are void if not activated by the cashier at the time of purchase. Gift cards are not refundable. Merchandise purchased with a gift card that is subsequently returned will be refunded in the form of another gift card.

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

Northern District of Illinois Claims Register

[18-30039 Morgan Administration, Inc.](#)

Honorable Judge: Jacqueline P. Cox

Chapter: 11

Office: Chicago

Last Date to file claims: 01/28/2019

Trustee:

Last Date to file (Govt): 04/23/2019

Creditor: (27375401)

Claim No: 29

Status:

Antonio Prado

Original Filed

Filed by: CR

3723 N Kedzie Ave

Date: 12/13/2018

Entered by: Maria Garcia

Chicago IL 60618

Original Entered

Modified:

Date: 12/14/2018

Amount claimed: \$203.73

History:

[Details](#) [29-1](#) 12/13/2018 Claim #29 filed by Antonio Prado, Amount claimed: \$203.73 (Garcia, Maria)

Description:

Remarks:

Claims Register Summary

Case Name: Morgan Administration, Inc.

Case Number: 18-30039

Chapter: 11

Date Filed: 10/25/2018

Total Number Of Claims: 1

Total Amount Claimed*	\$203.73
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		