



State of Wisconsin DEPARTMENT OF REVENUE

Request for Payment of Taxes (Bankruptcy Code Cases-Administrative Expenses)

United States Bankruptcy Court: for the Northern District of Illinois.

In the matter of: MORGAN ADMINISTRATION INC

Case Number 18-30039, Type of Bankruptcy Chapter 11, Date of Petition 25-Oct-2018, Taxpayer Identifying Number, Social Security Number, Customer Number 0001107317, Employer Identification Number XX-XXX4200

\*\* NOTE: All withholding tax balances are estimated amounts due to non-filed returns \*\*

- 1. The undersigned, whose business address is 2135 Rimrock Rd., Madison, WI 53713, is the agent of the Wisconsin Department of Revenue, and is authorized to make this claim on behalf of the Wisconsin Department of Revenue.
2. Request is made for payment of taxes and any interest or penalty due under the laws of the State of Wisconsin.
3. The ground of liability is taxes due under the laws of the State of Wisconsin as follows:

Table with 6 columns: Kind of Tax, Period, Tax Due, Interest, Penalty, Balance Due. Rows include Withholding (15-Mar-2019 to 15-Jun-2019) and BTR (31-Jul-2021).

FILED UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

SEP 06 2019

JEFFREY P. ALLSTEADT, CLERK INTAKE 3

Amount due (as of 03-Sep-2019)..... \$23,590.88
Interest will continue to accrue at the state rate.

Signature block for Jill Ritchie, Bankruptcy Specialist, dated 03-Sep-2019. Includes contact information for Wisconsin Department of Revenue.

# Northern District of Illinois Claims Register

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

**Honorable Judge:** Jacqueline P. Cox      **Chapter:** 11  
**Office:** Eastern Division      **Last Date to file claims:** 01/28/2019  
**Trustee:**      **Last Date to file (Govt):** 04/23/2019

<i>Creditor:</i> (28177081)	<b>Claim No:</b> 140	<i>Status:</i>
Wisconsin Department of Revenue (ADMINISTRATIVE)	<i>Original Filed</i>	<i>Filed by:</i> CR
PO Box 8901	<i>Date:</i> 09/06/2019	<i>Entered by:</i> Charles Ward
Madison WI 53708-8901	<i>Original Entered</i>	<i>Modified:</i>
	<i>Date:</i> 09/06/2019	

Admin claimed: \$23590.88

*History:*

[Details](#)    [140-1](#)    09/06/2019 Claim #140 filed by Wisconsin Department of Revenue, Admin claimed: \$23590.88 (Ward, Charles)

*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

<b>Total Amount Claimed*</b>	
<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>	\$23590.88	