

Fill in this information to identify the case:

Debtor 1 <u>Belvidere Associates LLC</u>
Debtor 2 (Spouse, if filing)
United States Bankruptcy Court <u>Northern District of Illinois</u>
Case number: <u>18-30043</u>

FILED
 U.S. Bankruptcy Court
 Northern District of Illinois
 1/21/2019
 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

1. Who is the current creditor?	SPRINGVILLE CABINET COMPANY Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Eagle Cabinet</u>	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
	SPRINGVILLE CABINET COMPANY Name 1615 DUNDEE AVE Elgin, IL 60120-0000 Contact phone <u>8478889966</u> Contact email <u>tom@lwmountain.com</u> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	_____ Name Contact phone _____ Contact email _____
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<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: _____

7. How much is the claim? \$ 11191.56
 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 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) _____ %
 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)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply.</i>	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.	<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

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 1/21/2019
MM / DD / YYYY

/s/ Tom Miessler

Signature

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

Name Tom Miessler

First name Middle name Last name

Title COO

Company LW Mountain Inc

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

Address 1615 Dundee Ave SuiteE

Number Street

Chicago, IL 60120

City State ZIP Code

Contact phone 8478889966 Email tom@lwmountain.com

SPRINGVILLE CABINETS

Elgin, IL 60120
1625 Dundee Ave.

Invoice

Date	Invoice #
6/15/2018	17313

Bill To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship To
MARY REESE 5889 HANCOCK LANE GURNEE, IL 60031 847-502-2542

Store #	P.O. Number	Terms	Due Date	Customer
24	Q12129	Net 30	7/15/2018	OURS

Item Code	Description	LIST PRICE	PRICE MULTIPLIER	Amount
ABBOTT	SCC-Elite ABBOTT COLLECTION Country Linen - Raised Panel	8,895	0.52	4,625.40
DELIVERY - ...	JOBSITE DELIVERY FOR FIRST FLOOR (5 STEPS) OR GARAGE AREA ONLY	17	15.00	255.00

Total \$4,880.40

Balance Due \$4,880.40

SPRINGVILLE CABINETS

Elgin, IL 60120
1625 Dundee Ave.

Invoice

Date	Invoice #
6/15/2018	17314

Bill To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Store #	P.O. Number	Terms	Due Date	Customer
24	Q12147	Net 30	7/15/2018	REESE

Item Code	Description	LIST PRICE	PRICE MULTIPLIER	Amount
ABBOTT	SCC-Elite ABBOTT COLLECTION Country Linen - Raised Panel	75	0.52	39.00

Total	\$39.00
Balance Due	\$39.00

SPRINGVILLE CABINETS

Invoice

Elgin, IL 60120
1625 Dundee Ave.

Date	Invoice #
7/11/2018	17326

Bill To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship To
LEO MARUBIO 350 BRAINERD AVE LIBERTYVILLE, IL 60048 847-932-1577

Store #	P.O. Number	Terms	Due Date	Customer
24	Q12150	Net 30	8/10/2018	MARUBIO

Item Code	Description	LIST PRICE	PRICE MULTIPLIER	Amount
BRADFORD	SCC-Elite BRADFORD COLLECTION Designer White - Shaker	4,129	0.49	2,023.21
DELIVERY - ...	JOBSITE DELIVERY FOR FIRST FLOOR (5 STEPS) OR GARAGE AREA ONLY	12	15.00	180.00

Total				\$2,203.21
Balance Due				\$2,203.21

SPRINGVILLE CABINETS

Elgin, IL 60120
1625 Dundee Ave.

Invoice

Date	Invoice #
7/26/2018	17338

Bill To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship To
MARGARET DOMENY 287 C DEER TRAIL CT LAKE BARRINGTON SHORES IL 847-997-8507

Store #	P.O. Number	Terms	Due Date	Customer
24	Q12298	Net 30	8/25/2018	DOMENY

Item Code	Description	LIST PRICE	PRICE MULTIPLIER	Amount
ABBOTT	SCC-Elite ABBOTT COLLECTION Country Linen - Raised Panel	220	0.52	114.40

Total	\$114.40
Balance Due	\$114.40

SPRINGVILLE CABINETS

Elgin, IL 60120
1625 Dundee Ave.

Invoice

Date	Invoice #
7/26/2018	17339

Bill To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship To
MARGE DOMENY 287C DEER TRAIL CT LAKE BARRINGTON SHORES IL 60010 847-997-8507

Store #	P.O. Number	Terms	Due Date	Customer
24	Q12187	Net 30	8/25/2018	DOMENY

Item Code	Description	LIST PRICE	PRICE MULTIPLIER	Amount
ABBOTT	SCC-Elite ABBOTT COLLECTION Country Linen - Raised Panel	5,143	0.52	2,674.36
DELIVERY - ...	JOBSITE DELIVERY FOR FIRST FLOOR (5 STEPS) OR GARAGE AREA ONLY	12	15.00	180.00
Total				\$2,854.36
Balance Due				\$2,854.36

SPRINGVILLE CABINETS

Elgin, IL 60120
1625 Dundee Ave.

Invoice

Date	Invoice #
8/21/2018	17351

Bill To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship To
KELLI WILKINS 35471 INDIAN LANE INGELSIDE, IL 60046 1815-354-7201

Store #	P.O. Number	Terms	Due Date	Customer
24	Q11935	Net 30	9/20/2018	WILKINS

Item Code	Description	LIST PRICE	PRICE MULTIPLIER	Amount
ABBOTT	SCC-Elite ABBOTT COLLECTION Country Linen - Raised Panel	1,921	0.52	998.92
DELIVERY - ...	JOBSITE DELIVERY FOR FIRST FLOOR (5 STEPS) OR GARAGE AREA ONLY	5	15.00	75.00

Total \$1,073.92

Balance Due \$1,073.92

SPRINGVILLE CABINETS

Elgin, IL 60120
1625 Dundee Ave.

Invoice

Date	Invoice #
8/27/2018	17354

Bill To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Ship To
HOME OWNERS BARGAIN OUTLET 2650 BELVIDERE ROAD WAUKEGAN, IL 60085

Store #	P.O. Number	Terms	Due Date	Customer
24	Q12421	Net 30	9/26/2018	DOMENY

Item Code	Description	LIST PRICE	PRICE MULTIPLIER	Amount
ABBOTT	SCC-Elite ABBOTT COLLECTION Country Linen - Raised Panel	118	0.52	61.36

Total	\$61.36
Balance Due	\$61.36

Northern District of Illinois Claims Register

[18-30043 Belvidere Associates 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> (27201965) SPRINGVILLE CABINET COMPANY 1615 DUNDEE AVE Elgin, IL 60120-0000</p>	<p>Claim No: 51 <i>Original Filed</i> Date: 01/21/2019 <i>Original Entered</i> Date: 01/21/2019</p>	<p><i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> EPoc ADI <i>Modified:</i></p>
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Amount claimed: \$11191.56

History:

[Details](#) [51-1](#) 01/21/2019 Claim #51 filed by SPRINGVILLE CABINET COMPANY, Amount claimed: \$11191.56 (ADI, EPoc)

Description:

Remarks:

Claims Register Summary

Case Name: Belvidere Associates LLC
Case Number: 18-30043
Chapter: 11
Date Filed: 10/25/2018
Total Number Of Claims: 1

Total Amount Claimed*	\$11191.56
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		