

**Fill in this information to identify the case:**Debtor 1 Belvidere Associates LLC

Debtor 2

(Spouse, if filing)

United States Bankruptcy Court Northern District of IllinoisCase number: 18-30043

FILED

U.S. Bankruptcy Court  
Northern District of Illinois

1/27/2019

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**

<b>1. Who is the current creditor?</b>	<u>JIM HARMS</u>	
	Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor	<u>James E Harms</u>
<b>2. Has this claim been acquired from someone else?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
<b>3. Where should notices and payments to the creditor be sent?</b>	<b>Where should notices to the creditor be sent?</b>	<b>Where should payments to the creditor be sent? (if different)</b>
	<u>JIM HARMS</u>	_____
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	Name
	<u>26230 E. ELMWOOD AVE MUNDELEIN, IL 60060</u>	_____
	Contact phone <u>847-845-2026</u>	Contact phone _____
	Contact email <u>Jimstang@gmail.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
<b>4. Does this claim amend one already filed?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____	
	MM / DD / YYYY	
<b>5. Do you know if anyone else has filed a proof of claim for this claim?</b>	<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**

<b>6. Do you have any number you use to identify the debtor?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____										
<b>7. How much is the claim?</b>	\$ 10383.29 <div style="float: right; text-align: right;"> <b>Does this amount include interest or other charges?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).         </div>										
<b>8. What is the basis of the claim?</b>	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.  Deposit for Kitchen Cabinets										
<b>9. Is all or part of the claim secured?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. <b>Nature of property:</b> <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____  <b>Basis for perfection:</b> _____  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.)  <table style="width: 100%;"> <tr> <td style="width: 50%;"><b>Value of property:</b></td> <td style="width: 50%;">\$ _____</td> </tr> <tr> <td><b>Amount of the claim that is secured:</b></td> <td>\$ _____</td> </tr> <tr> <td><b>Amount of the claim that is unsecured:</b></td> <td>\$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</td> </tr> </table> <table style="width: 100%;"> <tr> <td style="width: 60%;"><b>Amount necessary to cure any default as of the date of the petition:</b></td> <td style="width: 40%;">\$ _____</td> </tr> </table> <table style="width: 100%;"> <tr> <td style="width: 60%;"><b>Annual Interest Rate</b> (when case was filed)</td> <td style="width: 40%;">_____ %</td> </tr> </table> <input type="checkbox"/> Fixed <input type="checkbox"/> Variable	<b>Value of property:</b>	\$ _____	<b>Amount of the claim that is secured:</b>	\$ _____	<b>Amount of the claim that is unsecured:</b>	\$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)	<b>Amount necessary to cure any default as of the date of the petition:</b>	\$ _____	<b>Annual Interest Rate</b> (when case was filed)	_____ %
<b>Value of property:</b>	\$ _____										
<b>Amount of the claim that is secured:</b>	\$ _____										
<b>Amount of the claim that is unsecured:</b>	\$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)										
<b>Amount necessary to cure any default as of the date of the petition:</b>	\$ _____										
<b>Annual Interest Rate</b> (when case was filed)	_____ %										
<b>10. Is this claim based on a lease?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____										
<b>11. Is this claim subject to a right of setoff?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____										

<b>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</b>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. <i>Check all that apply.</i>	<p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<b>Amount entitled to priority</b>
		<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 checked="" 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).	\$ 2850.00
		<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 1/27/2019  
MM / DD / YYYY

/s/ James E Harms

Signature

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

Name	<u>James E Harms</u>		
	First name	Middle name	Last name
Title	<u>Self</u>		
Company	_____		
Address	Identify the corporate servicer as the company if the authorized agent is a servicer		
	<u>26230 N Elmwood Ave</u>		
	Number Street		
	<u>Mundelein, IL 60060</u>		
	City State ZIP Code		
Contact phone	<u>847-845-2026</u>	Email	<u>jimstang@gmail.com</u>

THANK YOU FOR SHOPPING AT

(847) 263-1612

81 ORDER

05/05/18 12:30 M BDEI

SUB-TOTAL: \$ 9591.95 TAX \$ 791.34  
 TOTAL: \$ 10383.29  
 CK AMT: 10383.29  
 CK#001082 ABA#  
 ELECTRONIC CHECK

ACH Trace Number 140031000030223735014

Batch Number

APPROVED AUTH#: 2539

RETURN FEE AMOUNT \$25.00

DEPOSIT : 10383.29



ORDER# 396123/24

CUST NO: 84618

Customer Copy

Acct: JIM HARKS

REF: K\* KWC RENTOWN WHT WS 1

- ALL RETURNS AND EXCHANGES MUST BE IN ORIGINAL CONDITION IN FACTORY SEALED CARTON AND ACCOMPANIED BY ORIGINAL REGISTER RECEIPT WITHIN 30 DAYS OF PURCHASE.

- HOB0 RESERVES THE RIGHT TO DENY ANY RETURN OR EXCHANGE AND MAY REQUEST IDENTIFICATION AS A CONDITION OF RETURN OR EXCHANGE.

- SPECIAL ORDER, CUSTOM, AND MANUFACTURER DIRECT ITEMS ARE NON-REFUNDABLE.

- GIFT CARDS ARE NON-REFUNDABLE AND LOST OR STOLEN GIFT CARDS ARE NON-REPLACEABLE.

- PLEASE SEE FULL RETURN POLICY FOR ADDITIONAL EXCLUSIONS / LIMITATIONS

- Text BARGAIN to 555888 to join the Bargain Squad and receive exclusive benefits and savings!!!

HOBO 24  
 2650 BELVIDERE RD  
 WAUKEGAN, IL 60085

PHONE: (847) 263-1612

CUSTOMER: 84618  
 TERMS: CASH/CHECK/BANKCARD

JOB: 000

DATE / TIME: 5/5/18  
 CLERK: BDEF  
 TERMINAL: 81

7-845-2026 REFERENCE: K\* KWC RENTOWN WHT WS 1

ORDER: 396123/Q

PAGE NO: 1

DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
SPECIAL ORDER KWP CHOICE Entry Wood Select Custom Kitchen Cabinets are SPECIAL ER. Cancellations within 48 days are subject to a mandatory 10% cancellation fee. After 48 hours of notice, cancellations or alterations will be accepted. Any cancellations / alterations to this order may be subject to an additional charge and delay in delivery. Free delivery available within the		11989.94	/EA	11,989.94

CONTINUED...



PAGE NO: 1

**HOB0 24**  
**2650 BELVIDERE RD**  
**WAUKEGAN, IL 60085**

**PHONE: (847) 263-1612**

CUSTOMER: 84618  
 TERMS: CASH/CHECK/BANKCARD

JOB: 000

DATE / TIME: 5 / 5 / 18  
 CLERK: BDEF  
 TERMINAL: 81

17-945-2026 REFERENCE: K\* KWC RENTOWN WHT WS 1

791.34  
 10383.29  
 10383.29

CH#00.

ACH Trace Number 14000030223735014  
 Batch Number

APPROVED AUTH#: 2539  
 RETURN FEE AMOUNT \$25.00  
 DEPOSIT : 10383.29



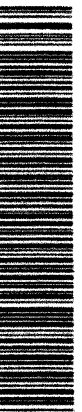
ORDER# 396123/24  
 CUST NO: 84618  
 Customer Copy

Acct: JIM HARMS  
 REF: K\* KWC RENTOWN WHT WS 1  
 - ALL RETURNS AND EXCHANGES MUST BE IN ORIGINAL CONDITION IN FACTORY SEALED CARTON AND ACCOMPANIED BY ORIGINAL REGISTER RECEIPT WITHIN 30 DAYS OF PURCHASE.  
 - HOB0 RESERVES THE RIGHT TO DENY ANY RETURN OR EXCHANGE AND MAY REQUEST IDENTIFICATION AS A CONDITION OF RETURN OR EXCHANGE.  
 - SPECIAL ORDER, CUSTOM, AND MANUFACTURER DIRECT ITEMS ARE NON-REFUNDABLE.  
 - GIFT CARDS ARE NON-REFUNDABLE AND LOST OR STOLEN GIFT CARDS ARE NON-REPLACABLE.  
 - PLEASE SEE FULL RETURN POLICY FOR ADDITIONAL EXCLUSIONS / LIMITATIONS  
 - Text BARGAIN to 555888 to join the Bargain Squad and receive exclusive

**ORDER: 396123/Q**

DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
SPECIAL ORDER KWP CHOICE Country Wood Select Custom Kitchen Cabinets are SPECIAL ORDER. Cancellations within 48 hours are subject to a mandatory 10% stocking fee. After 48 hours absolutely no cancellations or turns will be accepted. Any modifications / alterations to a design may be subject to an additional charge and delay in estimated delivery. Free delivery available within the		11989.94	/EA	11,989.94

CONTINUED...



PAGE NO: 1

**HOBO 24**  
**2650 BELVIDERE RD**  
**WAUKEGAN, IL 60085**

**PHONE: (847) 263-1612**

26230 E. ELMWOOD AVE

MUNDELEIN IL 60060 847-845 2026 REFERENCE: K\* KWC RENTOWN WHT WS 1

CUSTOMER: 84618 JOB: 000 DATE / TIME: 5/5/18 12:39  
 TERMS: CASH/CHECK/BANKCARD CLERK: BDEF  
 TERMINAL: 81

**ORDER: 396123/Q**

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
1	EA	SOKW	SPECIAL ORDER KWP CHOICE Kountry Wood Select Custom Kitchen Cabinets are SPECIAL ORDER. Cancellations within 48 hours are subject to a mandatory 10% restocking fee. After 48 hours absolutely no cancellations or returns will be accepted. Any modifications / alterations to the design may be subject to an additional charge and delay estimated delivery. Free delivery available within the		11989.94	/EA	11,989.94

CONTINUED...



**HOBO 24**  
**2650 BELVIDERE RD**  
**WAUKEGAN, IL 60086**

**PHONE: (847) 263-1612**

**SOLD TO: JIM HARMS**  
**26230 E. ELMWOOD AVE**

**CUSTOMER: 84618**  
**TERMS: CASH/CHECK/BANKCARD**

**DATE / TIME: 5/5/18 12:39**

**CLERK: BDEF**

**TERMINAL: 81**

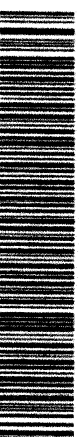
**MUNDELEIN IL 60060**

**847-945-2026 REFERENCE: K\* KWC RENTOWN WHT WS 1**

**ORDER: 396123/Q**

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
-1	EA	SOKW % OFF	Chicago and Milwaukee metro areas subject to a minimum purchase of four cabinets. Please allow 4-6 weeks for delivery. See design contract for additional terms and conditions. KOUNTRY WOOD % OFF DISCOUNT CREDIT RETURN RENTOWN MAPLE WHITE DOMESTIC CONSTRUCTION JIM HARMS 26230 E. ELMWOOD AVE MUNDELEIN, IL 60060		2397.99	/EA	-2,397.99

CONTINUED...



PAGE NO: 3

**HOB0 24**  
**2650 BELVIDERE RD**  
**WAUKEGAN, IL 60086**

**PHONE: (847) 263-1612**

**SOLD JIM HARMS**

**TO: 26230 E. ELMWOOD AVE**

**CUSTOMER: 84618**

**JOB: 000**

**TERMS: CASH/CHECK/BANKCARD**

**DATE / TIME: 5/ 5/18**

**12.39**

**CLERK: BDEF**

**TERMINAL: 81**

**MUNDELEIN IL 60060**

**847-845-2026 REFERENCE: K\* KWC RENTOWN WHT WS 1**

**ORDER: 396123/Q**

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
			1-847-845-2026 SALESPERSON - WILLIE STANG				
				TAXABLE			9591.95
				NON-TAXABLE			0.00
				SUB-TOTAL			9591.95
				TAX AMOUNT			791.34
				<b>TOTAL</b>			<b>10383.29</b>

**PRIOR DEPOSIT 10383.29**  
**DEPOSIT AMT 0.00**  
**BALANCE DUE 0.00**

**xManual Signature**







Cabinet Form A

## ORDER CONTRACT

39

Thank you for your cabinetry purchase at HOBO.

Please read the contract below. If you have any questions, please address them with your salesperson prior to signing this document.

## PURCHASER INFORMATION

NAME	JIM HARMS
ADDRESS	26230 E. ELMWOOD AVE
CITY	MUNDELEIN, IL 60060
PHONE	1-847-845-2026
ALT PHONE	
EMAIL	0

## SALE INFORMATION

SALESPERSON	WILLIE STANG
DATE OF SALE	5/5/18
VENDOR	KOUNTRY WOOD
FINAL PRICE	
PROMO?	20% OFF
INSTALLED BY	NO INSTALLATION

HOBO WILL ARRANGE FOR THE VENDOR LISTED ABOVE TO COMPLETE (purchaser to initial all applicable)

☒ Measurement for fabrication of the cabinetry

☒ Delivery of the cabinetry

☐ NA Installation of the cabinetry

## INSTALLATION ADDRESS (IF DIFFERENT)

NAME	
ADDRESS	
CITY, ST, ZIP	

These cabinets are custom made for YOU. Once this order is processed and payment for this Order is made in full, the Order cannot be changed, cancelled or returned.

## DIMENSIONS

All measurements have been provided by you prior to ordering, unless you have paid to have HOBO arrange for the vendor listed above to verify measurements. Purchaser is 100% responsible for appliance dimension verification. HOBO cannot be held responsible for any errors in measurements. All items covered in this contract are NON-RETURNABLE.

You have reviewed, approved, signed and received a copy of the final cabinet design drawing.

## DELIVERY

Approximate delivery lead-times are as follows: Haas/Lifestyle (4-6 weeks); Lifestyle Quick Ship (2-3 weeks); Springville (1-3 weeks); KWP Choice (4-5 weeks); KWP QuickShip (1-2 weeks). This contract does not guarantee delivery time frames, and can be extended due to supply issues or other events beyond HOBO's control. All estimated delivery time frames are in business days. If your order is for 4 cabinets or more, delivery will be directly to the address listed above. The delivery company, ML MATTHEWS, will contact you to schedule the delivery. ML MATTHEWS will not contact you until the cabinets have arrived to their warehouse. Springville cabinetry is delivered by Eagle Cabinetry, a subsidiary of LW Mountain Inc. ALL OTHER-FIRST FLOOR DELIVERY ONLY: ANY ADDITIONAL FLOOR WILL INCUR A \$150/FLOOR ADDITIONAL CHARGE. The definition of "first floor" is anything (5) steps or less. Anything more than (5) steps will incur a charge. If you order is 3 cabinets or less, the cabinets will be delivered to our store. The HOBO store will contact you upon receipt of your order. These delivery estimates are provided by the manufacturer. HOBO cannot be held responsible for delays for any reason. HOBO strongly recommends that you do not schedule installation or demolition of kitchen or room without a firm date of delivery. Deliveries are made Monday through Friday, 8:00-4:00 CST, excluding holidays (Springville deliveries are made Monday through Friday 8AM to 2PM). Adequate access is required to unload your product. Product will be delivered to customers garage or nearest dry storage, if there is no garage. You will be charged \$70.00 per hour if additional labor is required at the jobsite for conditions such as long walkways, no parking, etc. You will be charged a \$50.00 trip charge if you miss a scheduled appointment more than two weeks. There will be a \$2.00 per cabinet, per week surcharge for storage beyond two weeks.

## DAMAGE OR DEFECTS

Purchaser has ten days from date of receipt to notify their HOBO salesperson of any damage or issues. Please deal only with your HOBO salesperson as they have the most knowledge of your project. For all claims of warped, defective, or damaged door/drawer fronts, the item must be brought into the store for inspection. HOBO will not replace doors due to the natural characteristics of the wood. It is normal for minor damage to occur during installation. This will not be considered defective. HOBO recommends the purchase of a touch up kit for these issues. Purchaser understands that any repairs of damaged or defective products will take 2-4 weeks to receive, dependent on what the item is. For all claims of damaged or defective cabinets (non-door/drawer front), a photo must be provided of the damage. This photo can either be brought into the store, or can be emailed to [jcleussen@hoboonline.com](mailto:jcleussen@hoboonline.com).

→ INSTALLATION CONSTITUTES ACCEPTANCE OF THE PRODUCT. If you perceive an issue, DO NOT INSTALL THE PRODUCT. Hobo cannot replace items that have been modified or installed. As necessary, Hobo will only replace damaged parts or cabinets on a case-by-case basis. No compensation for inconvenience or delay of your project is either implied or promised.

HOBO, ITS OWNERS AND EMPLOYEES ARE NOT RESPONSIBLE FOR ANY ERRORS, DAMAGE OR DEFECTS DURING MEASUREMENT, DELIVERY, AND/OR INSTALLATION OF PRODUCTS PURCHASED UNDER THIS ORDER CONTRACT.

I have read and understand the above. By signing this document, I am in complete acceptance and understand what is being ordered for my project, including amounts of all trim and/or finish molding as well as a touch up kit. I

Purchaser Signature: *[Signature]* Date: 5/5/18 Sales Associate Signature: *[Signature]* Date: 5-5-18

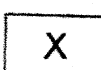
PLEASE CONTACT THIS HOBO STORE WITH ANY QUESTIONS



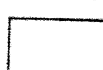
HOBO #21  
800 S. 108th  
West Allis, WI  
PH: (414) 302-4626  
FX: (414) 302-4630



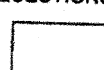
HOBO #23  
1693 Plainfield Rd  
Crest Hill, IL  
PH: (815) 730-8340  
FX: (815) 730-0297



HOBO #24  
2650 Bevidere Rd  
Waukegan, IL  
PH: (847) 263-1612  
FX: (847) 360-9616



HOBO #25  
8715 S. Cicero Ave  
Oak Lawn, IL  
PH: (708) 423-4856  
FX: (708) 423-5058



HOBO #26  
390 W. North Ave  
Villa Park, IL  
PH: (630) 833-3200  
FX: (630) 758-0615



HOBO #27  
3545 S. 27th St  
Milwaukee, WI  
PH: (414) 643-1226  
FX: (414) 643-1715

COPY TO CUSTOMER - COPY TO FILE - COPY TO VENDOR



## KOUNTRY WOOD CHOICE SPECIAL ORDER CHECKLIST

BASIC INFORMATION	
DOOR STYLE	RRENTOWN
FINISH	WHITE
WOOD TYPE	MAPLE

DOORS  
FULL OR STD OVERLAY ☒

WALL CABINET H  
30" HEIGHT / 84" SOFFIT ☐  
36" HEIGHT / 90" SOFFIT ☐  
42" HEIGHT / 96" SOFFIT ☐  
STAGGERED ? ☐

CUSTOMER  
INITIALS

I, THE CLIENT / PURCHASER, HAVE SEEN  
AN ACTUAL SAMPLE OF THE DOOR STYLE  
AND THE FINISH COLOR SAMPLE. I AGREE  
THAT SAMPLE IS WHAT I AM ORDERING.

HINGE STYLE  
CONCEALED STANDARD ☐  
CONCEALED 6-WAY ☒

ROLL-OUT SHELVES  
BASE ROLL-OUTS ☐  
TALL ROLL-OUTS ☐

	YES	NO
PREP FOR GLASS ?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
FINISHED INTERIOR ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DOMESTIC CONSTRUCTION?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
UPPER MOULDINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
LOWER MOULDINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
BASE MOULDINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
OTHER MOULDINGS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SOFT CLOSE DRAWERS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ALL WOOD DRAWERS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5-PIECE DRAWER FRONTS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ALL ENDS STANDARD?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PLYWOOD VENEER ENDS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
BUTT DOORS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

IF SO, WHICH CABINETS? \_\_\_\_\_

IF SO, WHICH CABINETS? ALL

NOTE PLYWOOD W/ VINYL

IF SO, WHAT TYPE? 4" CROWN

IF SO, WHAT TYPE? UNDER CABINET

IF SO, WHAT TYPE? TK

IF SO, WHAT TYPE? \_\_\_\_\_

IF SO, WHAT TYPE? \_\_\_\_\_

NOTE \_\_\_\_\_

NOTE \_\_\_\_\_

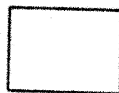
NOTE \_\_\_\_\_

NOTE \_\_\_\_\_

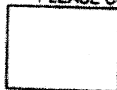
IF SO, WHICH CABINETS? \_\_\_\_\_

I have read and understand the above. By signing this document,  
 Customer Signature [Signature] Date 5/5/19  
 Sales Associate Signature [Signature] Date 5-5-18

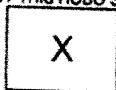
PLEASE CONTACT THIS HOBO STORE WITH ANY QUESTIONS



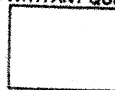
HOBO #21  
800 S. 108th  
West Allis, WI  
PH: (414) 302-4626



HOBO #23  
1693 Pleasant Rd  
Crest Hill, IL  
PH: (815) 730-8340



HOBO #24  
2660 Belvidere Rd  
Waukegan, IL  
PH: (847) 263-1612



HOBO #25  
8716 S. Cicero Ave  
Oak Lawn, IL  
PH: (708) 423-4856



HOBO #26  
300 W. North Ave  
Villa Park, IL  
PH: (630) 833-3200



HOBO #27  
3545 S. 27th St  
Milwaukee, WI  
PH: (414) 643-1226



Cabinet Form C

**SPECIALTY FINISH ACCEPTANCE**

Please read the disclaimer below. If you have any questions, please address them with your salesperson prior to signing this document. Check all that apply

☐**Cherry**

Cherry hardwood has an attractive, rich color that deepens with age, a characteristic you will appreciate the longer you own and admire your cabinets. Lighter colored cherry products will "mellow" to shades of yellow to brown while darker hues will deepen to a reddish brown shade.

☐**Maple**

Maple is noted for its beauty, consisting of sapwood, which is commonly white with a slight reddish tinge, and heartwoods, usually a light reddish brown but sometimes considerably darker. Maple may contain Birdseye, curly and fiddle back grain definitions.

☐**Hickory**

Hickory is a tough and strong hardwood with wild grain characteristics. Small knots and reddish brown mineral streaks accompanied by natural white sapwood and browned heartwood are common in hickory cabinets. The amount of grain variation is greatly affected by the color finish you select. The lighter the stain, the more variation.

**Oak**☐

Red oak is an open grained hardwood that offers grain variations that range from close, nearly vertical grain to a more pronounced cathedral grain. Oak lumber will typically range from almost white to yellow and may include mineral streaks. When stained, the grain will become more pronounced and will stain darker than the surrounding wood.

**Natural Finish**☐

A clear sealer and topcoat are applied to highlight the natural graining of the wood. No color stain is applied, so subtle to highly noticeable color variations will be present in the natural finish products.

**Mist and Glaze Accents**☐

These processes can create artistic variations from piece to piece inside the same kitchen. This is acceptable as a characteristic of the finishing process and is not to be considered reason for replacement. Additionally, external elements (e.g., cigarette smoke, grease) can cause color variations and are not to be considered reason for replacement.

**Dyes / HAAS ONLY**☒

The process of applying and wiping dyed colors will result in a build-up of stain that may not be uniform in consistency and color from area to area. This is an acceptable characteristic and is not considered a reason for replacement. Finish dyes will also take on different looks on the various wood species. Natural and artificial lighting conditions and other external elements (e.g., cigarette smoke, grease) can cause color variations and are not to be considered reason for replacement.

**Painted Finishes**☒

With the natural expanding and contracting of hardwood, some separation will occur at the cabinet joints creating visible hairline cracks. These cracks are acceptable on painted wood surfaces, do not affect the structural integrity of the cabinets, and are not to be considered reason for replacement. Additionally, external elements (e.g., cigarette smoke, grease) can cause color variations and are not to be considered reason for replacement.

**Thermofoil**☐

Thermofoil cabinets provide the look of painted cabinetry without the brush strokes, drips, and imperfections that come along with paint. Discoloration can occur over time or when the material is exposed to excessive heat.

**Rustic Woods and Quarter Sawn Oak**☐

Haas does offer a rustic wood and quarter sawn selection of styles. This product will have knots and wild grain patterns. Expect the unexpected, and understand that exchanges or refunds are not available if there is a complaint regarding this final product.

☐

I have read and understand the above. By signing this document, I agree not to hold HOBO or vendor responsible in the event any of these characteristics or variations are later found by me to be less than desirable than I had expected.

Customer Signature \_\_\_\_\_ Date 5/15/19 Sales Associate Signature \_\_\_\_\_ Date 5-5-18

PLEASE CONTACT THIS HOBO STORE WITH ANY QUESTIONS



HOBO #21  
800 S. 100th  
West Allis, WI  
PH: (414) 302-4626  
FX: (414) 302-4630



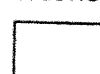
HOBO #23  
1093 Plainfield Rd  
Crest Hill, IL  
PH: (815) 730-6340  
FX: (815) 730-0297



HOBO #24  
2650 Belvidere Rd  
Waukegan, IL  
PH: (847) 263-1812  
FX: (847) 360-0616



HOBO #25  
8716 S. Cicero Ave  
Oak Lawn, IL  
PH: (708) 423-4856  
FX: (708) 423-5058



HOBO #26  
300 W. North Ave  
Villa Park, IL  
PH: (630) 833-3200  
FX: (630) 758-0915



HOBO #27  
3545 S. 27th St  
Milwaukee, WI  
PH: (414) 643-1226  
FX: (414) 643-1715

COPY TO CUSTOMER - COPY TO FILE - COPY TO VENDOR

## Contract



### PROJECT DETAILS

ID:

Creation Date:

Dealer

Customer

### DESIGN DETAILS

File name:

C:\Users\Public\Documents\2020 Files\Willie\HARMS1-847-845-2026.kit

Reference:

Sold date:

Designer ID:

Delivery date:

Designer name:

Installation date:

Sort order:

Tall/Wall/Base

## CATALOG KWP\_18A1\_2

Supplier Kountry Wood Products

Wall Door Soft Close Hinge Upgrade

Tail Door

Base Door

Door style

Rentown Full Overlay (C)  
PRICE

Drawer Front

Drawer Pull

Door Pull

Wood Drw Box W/Soft Close

Qty	User code	Material code	Description	Part Name	Price
<b>Cabinets</b>					
1	1 REP396L	APF032496E	Refrigerator End Panel Left	REP396L	370.00
			STILE WILL NEED TO BE CUT TO 2 5/8"		
2	1 W3030	WAL303012	30" High 12" Deep Standard Wall	W3030	315.00
3	1 W3030	WAL303012	30" High 12" Deep Standard Wall	W3030	315.00
4	1 W2736	WAL273612	36" High 12" Deep Standard Wall	W2736	400.00
5	1 W2736	WAL273612	36" High 12" Deep Standard Wall	W2736	400.00
6	1 W3636	WAL363612	36" High 12" Deep Standard Wall	W3636	461.00
7	1 W3636	WAL363612	36" High 12" Deep Standard Wall	W3636	461.00
8	1 F3X30P	AFI0330A6P	3" X 30" Wall Filler (1 Each)	F3X30P	36.00
9	1 W301824	WAL301824	18" High 24" Deep Standard Wall	W301824	359.00
10	1 W301824	WAL301824	18" High 24" Deep Standard Wall	W301824	359.00
11	1 F3X30P	AFI0330A6P	3" X 30" Wall Filler (1 Each)	F3X30P	36.00
12	1 W3336	WAL333612	36" High 12" Deep Standard Wall	W3336	443.00
13	1 W3018	WAL301812	18" High 12" Deep Standard Wall	W3018	261.00
14	1 W3936	WAL393612	36" High 12" Deep Standard Wall	W3936	483.00
15	1 F3X42P	AFI0342A6P	3" X 42" Wall Filler (1 Each)	F3X42P	45.00
16	1 DWC2742R	WDC274227	Diagonal Wall 2742 Right	DWC2742R	661.00
17	1 DWC2742R	WDC274227	Diagonal Wall 2742 Right	DWC2742R	661.00
18	1 B18L	BAS182434	Base 18 Left	B18L	328.00
19	1 BWB18	BWB182434	Base Wastebasket 18	BWB18	486.00
19.1	1 WWBSC-UPG	WWB-UPG	HD Softclose Wastebasket Holder (Upg)	WWBSC-UPG	462.00
20	1 B30	BAS302434	Base 30	B30	427.00
21	1 B30	BAS302434	Base 30	B30	427.00
22	1 ARL030336E	ARL030336E	3 1/2 X 3 1/2 X 35 1/2 Reeded Post	ARL030336E	256.00
23	1 ARL030336E	ARL030336E	3 1/2 X 3 1/2 X 35 1/2 Reeded Post	ARL030336E	256.00
24	1 ARL030336E	ARL030336E	3 1/2 X 3 1/2 X 35 1/2 Reeded Post	ARL030336E	256.00
25	1 B33	BAS332434	Base 33	B33	443.00

Print date: 5/5/2018

Page 2 / 5

Qty	User code	Manuf. code	Description	Price
26	1 B30	BAS302434	Base 30	B30
27	1 B33	BAS332434	Base 33	B33
28	1 3DB33	B3D332434	3-Drawer Base 33	3DB33
29	1 3DB33	B3D332434	3-Drawer Base 33	3DB33
30	1 BZR3636	BZR363634	Revolving Door Lazy Susan	BZR3636
31	1 SB36	BSB362434	Sink Base 36	SB36
32	1 B12R	BAS122434	Base 12 Right	B12R
33	1 BZR3636	BZR363634	Revolving Door Lazy Susan	BZR3636
*34	1 PANEL-O	PAN4896A2E	1/4" X 4' X 8' Finished Panel (Horz Grain)	PANEL-O
35	1 F3X30P	AFI0330A6P	3" Base Filler (1 Each)	F3X30P
36	1 F3X30P	AFI0330A6P	3" Base Filler (1 Each)	F3X30P
37	1 F3X30P	AFI0330A6P	3" Base Filler (1 Each)	F3X30P
38	7 CM4	MC408P	4" Crown (1 Each)	CM4
39	5 UCM8	MUC08P	Under Cabinet (1 Each)	UCM8
40	5 TK8P	ATK08P	8" Toe Kick (1 Each)	TK8P

## Cabinets subtotal

15,349.00

## Charges

*41	1 WHITE	WHITE	White (%)	WHITE	1,991.06
*42	1 DOMESTIC	DW	Domestic Construction (Ply w/Vinyl + Wood Drws)	DOMESTIC	0.00

## Premiums total

1,991.06

*43	22 SC-HINGE	28	Soft Close Hinge Upgrade	SC-HINGE	352.00
*44	13 WDS	WDS	Wood Drw Box W/Soft Close	WDS	754.00

## Upcharges total

1,106.00

## Charges total

3,097.06

## Cabinets net total

18,446.06

## KWP\_18A1\_2 Total

18,446.06

## Discount (35%)

6,456.12

## KWP\_18A1\_2 Net Total

11,989.94

\*: non-plan item

- 202,237.91

9519.52

TAX 791.74

10310.86

5/5/18

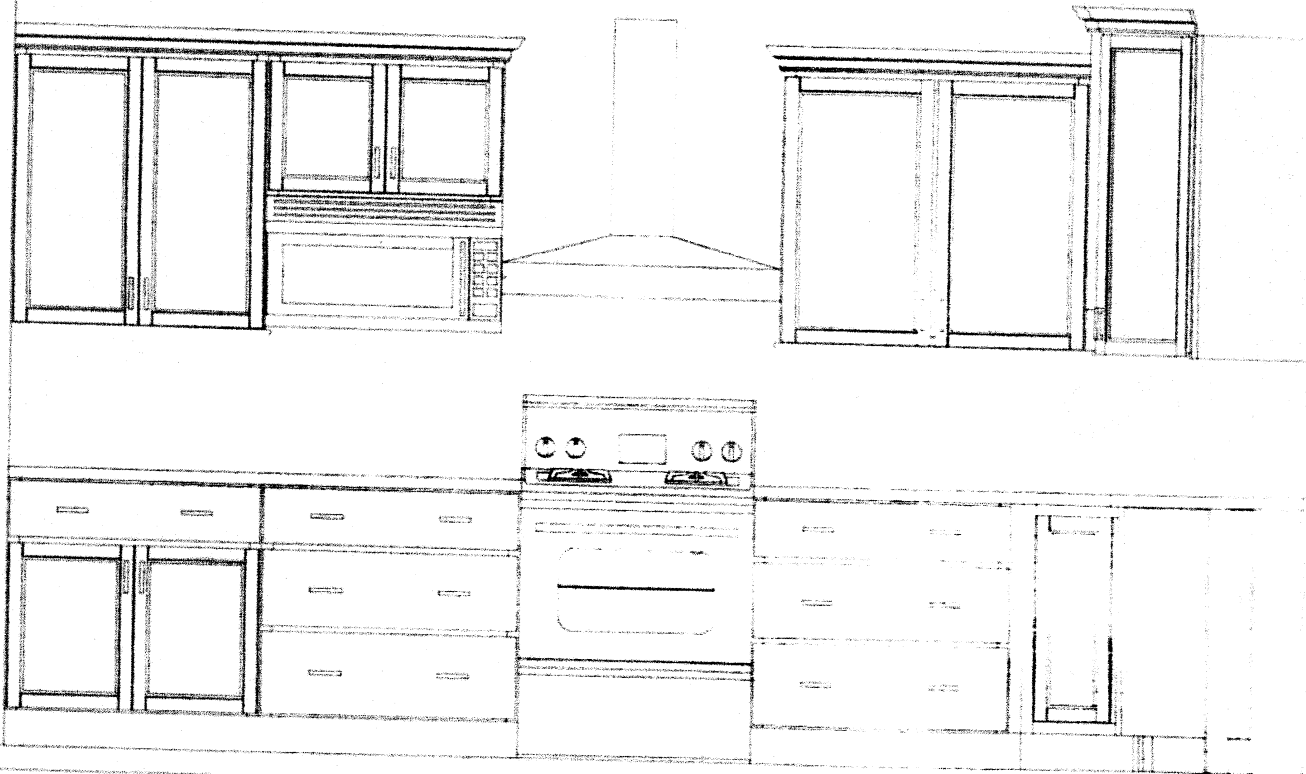
**Contact Name:**

**Contract net total:** \$11,989.94

**Contract total:** \$11,989.94

**Volume:** 0.00

**Weight:** 1,443.57



*Handwritten signature: Allen & [illegible]*

Note: This drawing is an artistic interpretation of the general appearance of the design. It is not meant to be an exact rendition.



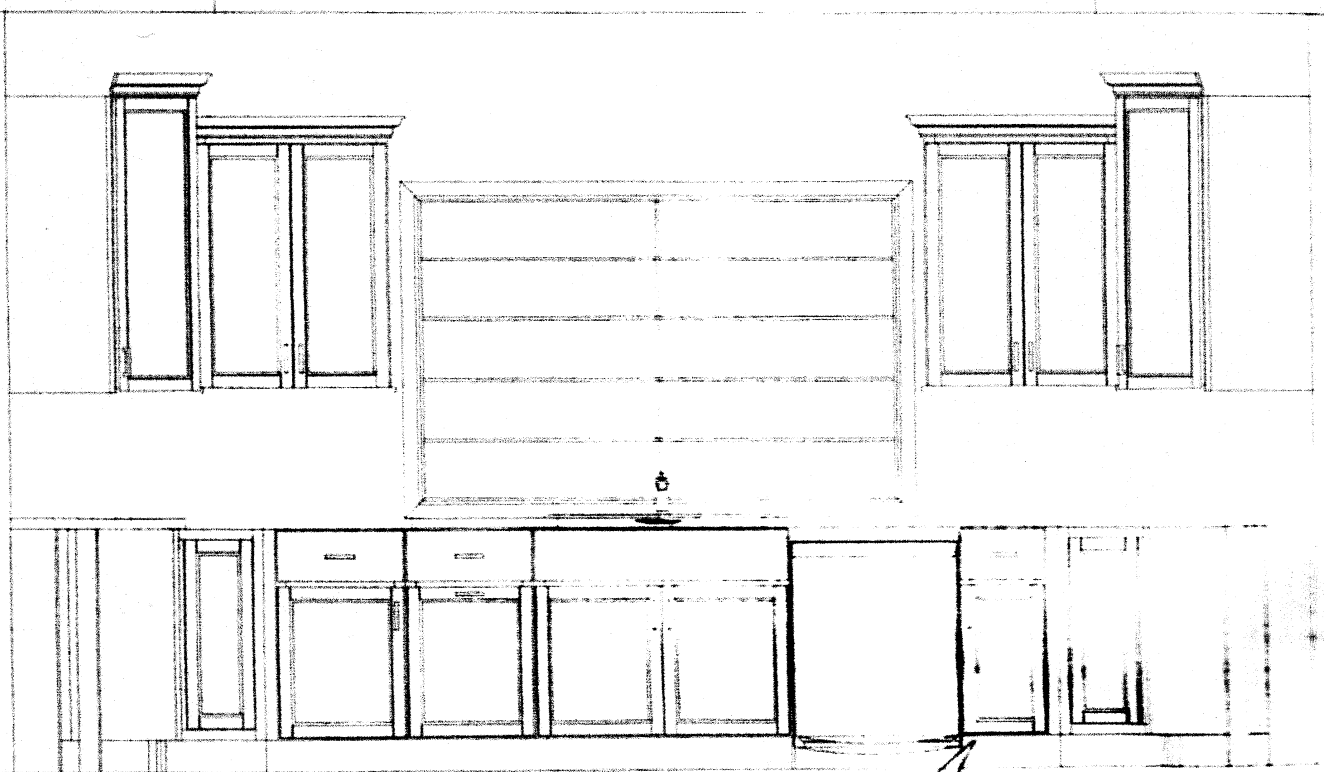
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Printed: 5/5/2018

HARMS1-847-845-2026

All

Drawing # 1





*[Handwritten signature]*

Note: This drawing is an artistic interpretation of the general appearance of the design. It is not meant to be an exact rendition.

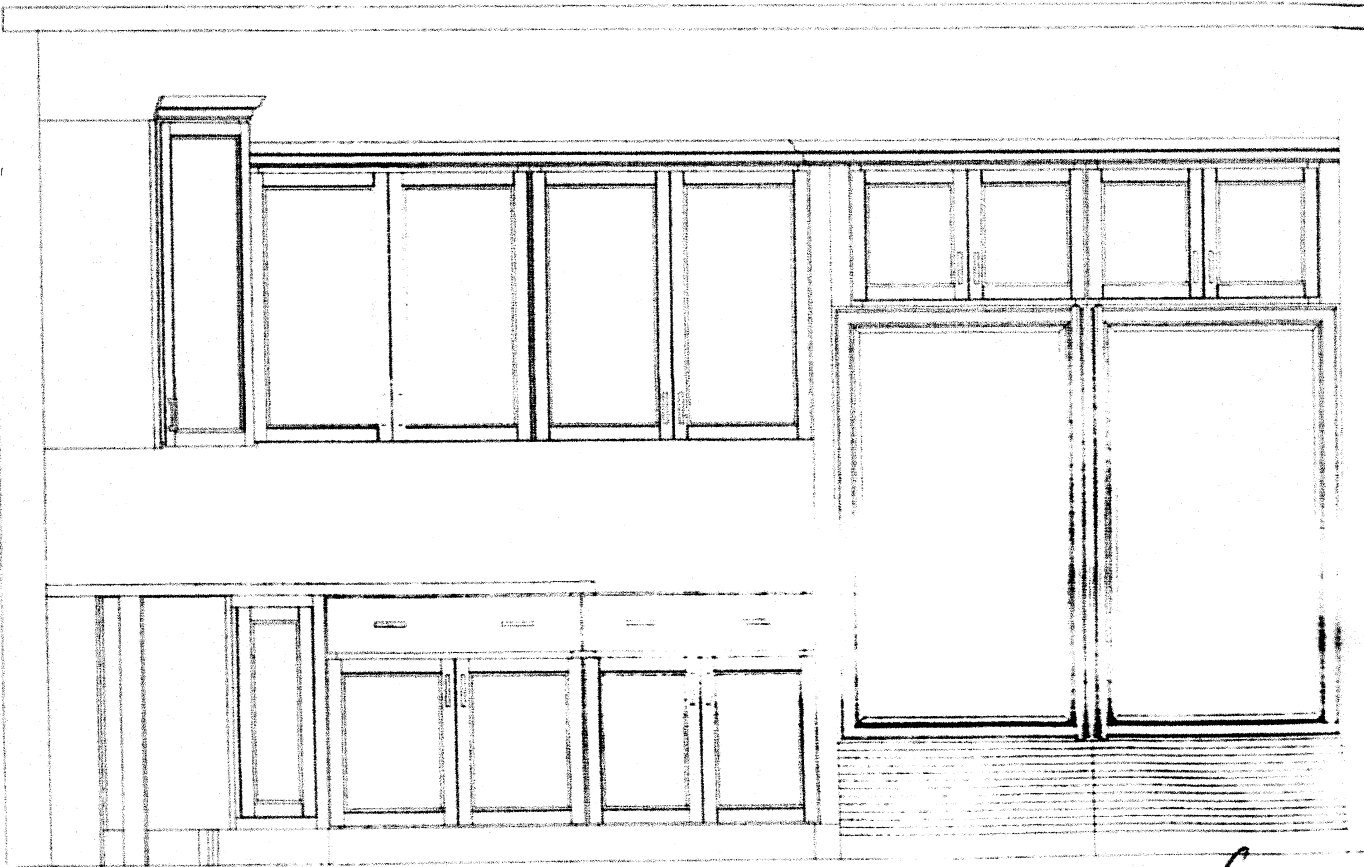
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Designed: 5/5/2018  
Printed: 5/5/2018

HARMS1-847-845-2026

All

Drawing # 1



*Handwritten signature: Bill Miller*

Note: This drawing is an artistic interpretation of the general appearance of the design. It is not meant to be an exact rendition.

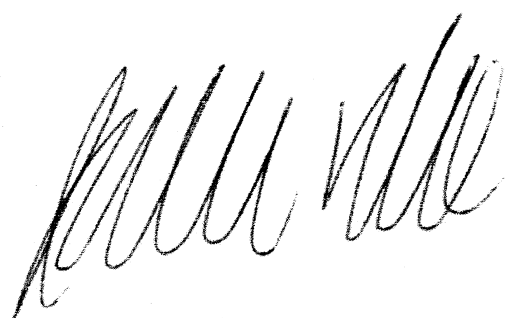


Designed: 5/5/2018  
Printed: 5/5/2018

HARMS1-847-845-2026

All

Drawing # 1



15/19



Designed: 5/5/2018  
Printed: 5/5/2018

# 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):**

*Creditor:* (27206117)

**Claim No:** 71

*Status:*

JIM HARMS

*Original Filed*

*Filed by:* CR

26230 E. ELMWOOD AVE

*Date:* 01/27/2019

*Entered by:* EPoc ADI

MUNDELEIN, IL 60060

*Original Entered*

*Modified:*

*Date:* 01/27/2019

Amount claimed: \$10383.29

Priority claimed: \$2850.00

*History:*

[Details](#) [71-1](#) 01/27/2019 Claim #71 filed by JIM HARMS, Amount claimed: \$10383.29 (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

<b>Total Amount Claimed*</b>	\$10383.29
<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>	\$2850.00	
<b>Administrative</b>		