

Fill in this information to identify the case:

Debtor 1 FP Retail Associates LLCDebtor 2
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Illinois

Case number 18-30046

FILED
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
NOV 27 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

1. Who is the current creditor?

Mark A. Rangel

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)

Where should notices to the creditor be sent?

Mark A. Rangel

Name

9232 Washington Avenue

Number Street

BrookfieldIL60513

City

State

ZIP Code

Contact phone 312-342-7682Contact email marcpa@comcast.net

Where should payments to the creditor be sent? (if different)

Name

Number Street

City

State

ZIP Code

Contact phone

Contact email

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? \$ 5,141.25. 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.

Customer Deposit - No Goods Delivered

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)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ No☒ Yes. Check one:

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). \$ 2,850.00☐ 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 11/19/2018
MM / DD / YYYY

Signature



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

Name Mark Anthony Rangel
First name Middle name Last name

Title _____

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

Address 9232 Washington Avenue
Number Street
Brookfield IL 60513
City State ZIP Code

Contact phone 312-342-7682 Email marcpa@comcast.net



ORDER CONTRACT

Thank you for your cabinetry purchase at HOBOb.

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

PURCHASER INFORMATION

NAME	MARK & KELLY RANGEL
ADDRESS	9232 WASHINGTON AVE.
CITY	BROOKFIELD, IL. 60513
PHONE	312.342.7682 (MARK - Call 1st)
ALT PHONE	708.785.2082 (KELLY)
EMAIL	MARCPA@COMCAST.NET

SALE INFORMATION

SALESPERSON	DEBIE ALPORT BY JW
DATE OF SALE	9/7/18
VENDOR	KOUNTRY WOOD
FINAL PRICE	\$5,842.32 - 20% + DELIVERY + TAX
PROMO?	20% - OK PER TALION
INSTALLED BY	NO INSTALLATION

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

YES 9.7.18 OK
NO Measurement for fabrication of the cabinetry
YES Delivery of the cabinetry
NO 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 HOBOb arrange for the vendor listed above to verify measurements. Purchaser is 100% responsible for appliance dimension verification. HOBOb cannot be held responsible for any errors in measurements.

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); Springfield (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 HOBOb'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. Springfield cabinetry is delivered by Eagle Cabinetry, a subsidiary of LW Mountain Inc. ALL OTHER-FIRST FLOOR DELIVERY ONLY; ANY ADDITIONAL FLOOR WILL INCUR A \$2.00 PER CABINET/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 HOBOb store will contact you upon receipt of your order. These delivery estimates are provided by the manufacturer. HOBOb cannot be held responsible for delays for any reason. HOBOb 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. HOBOb's delivery service will store goods at no charge for up to 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 HOBOb salesperson of any damage or issues. Please deal only with your HOBOb 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. HOBOb 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. HOBOb recommends the purchase of a touch up kit for these issues. Purchaser understands that any reorders 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 hobokitchens@hoboonline.com

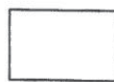
HOBOb, ITS OWNERS AND EMPLOYEES ARE NOT RESPONSIBLE FOR ANY ERRORS, DAMAGE OR DEFECTS DURING MEASUREMENT, DELIVERY, AND/OR INSTALLATION OF PRODUCTS PURCHASED UNDER THIS ORDER CONTRACT.

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. I also have reviewed, accepted and signed all required forms shown above.

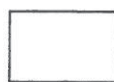
Mark & Kelly Rangel 9/7/18
Purchaser Signature Date

Debie Alport 9.7.18
Sales Associate Signature Date

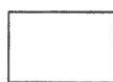
PLEASE CONTACT THIS HOBOb STORE WITH ANY QUESTIONS



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



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



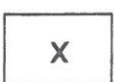
HOBOb #24
2650 Belvidere Rd
Waukegan, IL
PH: (847) 263-1612
FX: (847) 360-9616



HOBOb #25
8716 S. Cicero Ave
Oak Lawn, IL
PH: (708) 423-4656
FX: (708) 423-5058



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



HOBOb #22
7630 W. Roosevelt Rd.
Forest Park, IL.
PH: (708) 488-9800
FX: (708) 488-8075

COPY TO CUSTOMER - COPY TO FILE - COPY TO VENDOR



Cabinet Form B.2

KOUNTRYWOOD CHOICE SPECIAL ORDER CHECKLIST

BASIC INFORMATION

DOOR STYLE	GEORGETOWN
PANEL INSERT TYPE	N/A
WOOD SPECIES	HDF
FINISH	LIMESTONE (PAINT)
OTHER	N/A

WALL CABINET HEIGHTS

30" HEIGHT / 84" SOFFIT	
36" HEIGHT / 90" SOFFIT	
42" HEIGHT / 96" SOFFIT	X
STAGGERED ?	

SLIDING SHELVES

NONE	X
SLIDING SHELVES	
FULL ACCESS ROLL OUTS	
TOM MOUNTED ROLL OUTS	

MAR
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.

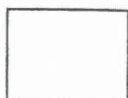
	YES	NO	
PREP FOR GLASS ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SELECT TYPE (MULLION, ETC.?) _____
FINISHED INTERIOR ?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
	<input type="checkbox"/>	<input type="checkbox"/>	_____
UPPER MOULDINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IF SO, WHAT TYPE? <u>COVE CROWN</u>
LOWER MOULDINGS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IF SO, WHAT TYPE? _____
BASE MOULDINGS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IF SO, WHAT TYPE? <u>MATCHING TOE-KICK</u>
OTHER MOULDINGS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IF SO, WHAT TYPE? _____
MATCHING VENEER ENDS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IF SO, WHAT TYPE? _____
FLUSH FINISHED ENDS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NOTE _____
DECORATIVE ENDS?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NOTE _____
SOFT CLOSE HINGES & GLDES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NOTE _____
DOMESTIC CONSTRUCTION (PLYWOOD BOX)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NOTE _____
	<input type="checkbox"/>	<input type="checkbox"/>	IF SO, WHAT TYPE? _____
	<input type="checkbox"/>	<input type="checkbox"/>	IF SO, WHAT TYPE? _____
	<input type="checkbox"/>	<input type="checkbox"/>	NOTE _____

I have read and understand the above. By signing this document,

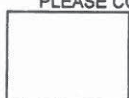
Maula Rangel 9/7/18
Customer Signature Date

[Signature] 9.7.18
Sales Associate Signature Date

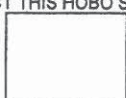
PLEASE CONTACT THIS HOBO STORE WITH ANY QUESTIONS



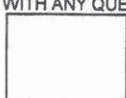
HOBO #21
800 S. 108th
West Allis, WI
PH: (414) 302-4626



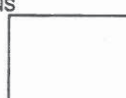
HOBO #23
1693 Plainfield Rd
Crest Hill, IL
PH: (815) 730-8340



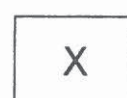
HOBO #24
2650 Belvidere Rd
Waukegan, IL
PH: (847) 263-1612



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Oak Lawn, IL
PH: (708) 423-4656



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



HOBO #22
7630 W. Roosevelt Rd.
Forest Park, IL
PH: (708) 488-9800



WOOD & FINISH ACCEPTANCE

Thank you for your cabinetry purchase at HOBO.

Please read the disclaimer below.

Be aware: NONE OF THE NATURAL OCCURRENCES DESCRIBED BELOW SHALL BE CONSIDERED A REASON FOR REPLACEMENT, RETURN OR REFUND OF YOUR PURCHASE.

In nature, trees will never grow identical to each other and woods from the same tree will often differ in color and grain. For that reason, wood finishes on all products will, at times, vary in color and grain characteristics, sometimes quite drastically.

Heartwood, usually having a slightly reddish-brown color, will result in a gray or blueish appearance. Mineral streaks will appear as a small black stain.

Therefore, we cannot guarantee a match between individual cabinets or pieces on cabinets.

These wood characteristics shall not be considered defects.

Variations must be accepted as the beauty of a natural product that only nature can create.

Under no circumstance will the natural characteristics of wood be considered a defect or warranty issue.

Each specialty finish has been formulated to provide a unique way of enhancing the beauty of wood. To ensure your full understanding and satisfaction with this unique finish process, please review the "Specialty Finish Acceptance Form" (Form C).

Solid hardwoods and hardwood veneers will have variations in color and grain patterns.

Expect differences in each piece of wood used.

Depending on your selection, the colors and grain patterns may be partially to completely visible though the finish and should be accepted as characteristic of the final product.

Exposure to changing temperatures and humidity levels causes hardwoods to naturally expand and contract. Over time, these changes may cause slight separations at the cabinet joints, making visible hairline cracks in these finishes. These hairline cracks do not affect the structural integrity of the cabinet. Natural and artificial lighting conditions and other external elements (e.g., cigarette smoke, grease) can also cause color variations.

Natural Wood Expansion / Contraction

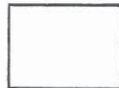
All wood pieces will take on and/or give off moisture to balance their new environments. Some door warping and center panel contraction is considered a normal occurrence. Over time, the product should return to equilibrium. For this reason, we ask that all solid wood products be allowed to process through one complete heating and cooling cycle

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.

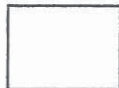
Minku Bhangal 9/7/18
Customer Signature Date

[Signature] 9.7.18
Sales Associate Signature Date

PLEASE CONTACT THIS HOBO STORE WITH ANY QUESTIONS



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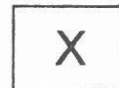
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2650 Belvidere Rd
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PH: (847) 263-1612
FX: (847) 360-9616



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Villa Park, IL
PH: (630) 833-3200
FX: (630) 758-0915



HOBO #22
7630 W. Roosevelt Rd.
Forest Park, IL
PH: (708) 488-9800
FX: (708) 488-8075

COPY TO CUSTOMER - COPY TO FILE - COPY TO VENDOR

PAGE NO: 1

FP Retail Associates LLC
7630 ROOSEVELT RD
FOREST PARK, IL
60130
PHONE: (708) 488-9800

SOLD TO: MARK RANGEL
9232 WASHINGTON AVE.

BROOKFIELD IL 60513

SHIP TO: MARK A RANGEL /

CUSTOMER: 48312 JOB: 000
TERMS: CASH/CHECK/BANKCARD

DATE / TIME: 9/ 7/18 4:56
CLERK: APAL
TERMINAL: 31

REFERENCE: HC K* KWC GTH LIMESTONE U4 1

ORDER: 314226/O

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		5842.32	/EA	5,842.32

CONTINUED...



PAGE NO: 2

FP Retail Associates LLC
7630 ROOSEVELT RD
FOREST PARK, IL
60130
PHONE: (708) 488-9800

SOLD TO: MARK RANGEL
9232 WASHINGTON AVE.

CUSTOMER: 48312 JOB: 000
TERMS: CASH/CHECK/BANKCARD

DATE / TIME: 9/ 7/18 4:56
CLERK: APAL
TERMINAL: 31

BROOKFIELD IL 60513 312-342-7682 REFERENCE: HC K* KWC GTH LIMESTONE U4 1

SHIP TO: MARK A RANGEL /

ORDER: 314226/O

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 DISCOUNT: \$1,168.46 SELECTION: GEORGETOWN HDF - LIMESTONE - SOFT CLOSE HINGES/ GLIDES - PLYWOOD CONSTRCTION (DOMESTIC OPTION) - DOORS ROUTED		1168.46	/EA	-1,168.46

CONTINUED...



PAGE NO: 3

FP Retail Associates LLC
7630 ROOSEVELT RD
FOREST PARK, IL
60130
PHONE: (708) 488-9800

DATE / TIME: 9/ 7/18 4:56
CLERK: APAL
TERMINAL: 31

CUSTOMER: 48312 JOB: 000
TERMS: CASH/CHECK/BANKCARD

SOLD TO: MARK RANGEL
9232 WASHINGTON AVE.

BROOKFIELD IL 60513 312-342-7682 REFERENCE: HC K* KWC GTH LIMESTONE U4 1

SHIP TO: MARK A RANGEL /

ORDER: 314226/O

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
			FOR GLASS - GLASS BY OTHERS CUSTOMER: MARK & KELLY RANGEL 9232 WASHINGTON AVE. BROOKFIELD, IL. 60513 MARK: 312.342.7682 (CALL 1ST) KELLY: 708.785.2082 SP: DEBI ALPORT BY JW				

TAXABLE 4673.86
NON-TAXABLE 0.00
SUB-TOTAL 4673.86

TAX AMOUNT 467.39
TOTAL 5141.25

DEPOSIT AMT 1641.25
BALANCE DUE 3500.00

BANKCARD PAYMENT

1641.25

BKCRD# XXXXXXXXXXXXX9169
MID: 324990119996
APP: 026275
XR: 314234

X _____



THANK YOU FOR SHOPPING AT HOBO
HOBO 22
7630 ROOSEVELT RD
FOREST PARK, IL
60130
(708) 488-9800

09/07/18 4:58PM APAL 31 DEPOSIT

SUB-TOTAL:\$ 4673.86 TAX: \$ 467.39
TOTAL: \$ 5141.25
HELP CARD USD\$ 3500.00
DEPOSIT : 3500.00
PRIOR DEP : 1641.25



ORDER# 314226/22
CUST NO: 48312
Customer Copy

Acct: MARK RANGEL
REF: HC K* KWC GTH LIMESTONE U4 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.
- HOBO 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
subscriber benefits and savings!!!

THANK YOU FOR SHOPPING AT HOBO
HOBO 22
7630 ROOSEVELT RD
FOREST PARK, IL
60130
(708) 488-9800

09/07/18 4:56PM APAL 31- ORDER

SUB-TOTAL:\$ 4673.86 TAX: \$ 467.39
TOTAL: \$ 5141.25
BC AMT: \$ 1641.25

BK CARD#: XXXXXXXXXXXX9169
MID: 324990119996
AUTH: 026275 AMT: \$ 1641.25
Host reference #:314234 Bat#

Authorizing Network: VISA

Chip Read
CARD TYPE:VISA EXPR: XXXX
AID : A0000000031010
TVR : 8080008000
IAD : 06010A03602000
TSI : 6800
ARC : 00
MODE : Issuer
CVM :
Name : VISA DEBIT
ATC :0141
AC : BA448B0348320C4C
TxnID/ValCode: 066271

Bank card USD\$ 1641.25
DEPOSIT : 1641.25



ORDER# 314226/22
CUST NO: 48312

THANK YOU MARK A RANGEL
FOR YOUR PATRONAGE

Name : X
I agree to pay above total amount
according to card issuer agreement
(merchant agreement if credit voucher)
Acct: MARK RANGEL
REF: HC K* KWC GTH LIMESTONE U4 1

Customer Copy

- ALL RETURNS AND EXCHANGES MUST BE IN
ORIGINAL CONDITION IN FACTORY SEALED
CARTON AND ACCOMPANIED BY ORIGINAL
REGISTER RECEIPT WITHIN 30 DAYS OF
PURCHASE.
- HOBO RESERVES THE RIGHT TO DENY ANY
RETURN OR EXCHANGE AND MAY REQUEST
IDENTIFICATION TO A CUSTOMER OF SERVICE

Northern District of Illinois Claims Register

[18-30046 FP Retail Associates LLC](#)

Honorable Judge: Jacqueline P. Cox

Chapter: 11

Office: Chicago

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (27210837)
MARK A RANGEL
9232 WASHINGTON AVE.
BROOKFIELD, IL 60513

Claim No: 14
Original Filed
Date: 11/27/2018
Original Entered
Date: 11/28/2018

Status:
Filed by: CR
Entered by: Maria Garcia
Modified:

Amount claimed: \$5141.25

Priority claimed: \$2850.00

History:

[Details](#) [14-1](#) 11/27/2018 Claim #14 filed by MARK A RANGEL, Amount claimed: \$5141.25 (Garcia, Maria)

Description:

Remarks:

Claims Register Summary

Case Name: FP Retail Associates LLC

Case Number: 18-30046

Chapter: 11

Date Filed: 10/25/2018

Total Number Of Claims: 1

Total Amount Claimed*	\$5141.25
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	\$2850.00	
Administrative		