Fill in this information to identi	fy the case:
Debtor 1 _ FP Re	TAIL ASSOCIATES ILC
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for th	e: NORTHEMPoistrict of IL
Case number	046

FILED
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

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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?	CARY SOBIEK Name of the current creditor (the person or entity to be paid for this cla Other names the creditor used with the debtor	aim)
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	Where should notices to the creditor be sent? CARY SOBIEK Name	Where should payments to the creditor be sent? (if different)
	Bankruptcy Procedure (FRBP) 2002(g)	Signature 5104 W BYROD ST Number Street CHGO FL 60641 City State ZIP Code	Number Street
		City State ZIP Code Contact phone <u>123-125 4590</u>	City State ZIP Code Contact phone
		Contact email 650816K @ ATT. NET	Contact email
		Uniform claim identifier for electronic payments in chapter 13 (if you us	se one):
4.	Does this claim amend one already filed?	Ves. Claim number on court claims registry (if known)	Filed on 1 24 2019
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?	

5.	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:
	How much is the claim?	 Segond 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).
	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.
		WAGES/UNCHTION/SICK MTTACHMENT "A"
1		ATTACHMENT A
	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)%
		Grand Fixed
	this claim based on a [ase?	No
	C	Yes. Amount necessary to cure any default as of the date of the petition.
s		
	ght of setoff?	
	L	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:	Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	 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).	5 589074
	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 aft	er the date of adjustment.
Part 3: Sign Below		
The person completing this proof of claim must sign and date it.	Check the appropriate box:	
FRBP 9011(b).	I am the creditor's attorney or authorized agent.	
If you file this claim electronically, FRBP 5005(a)(2) authorizes courts	 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

n date 2 11 2019

Signature

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

my Sobuh

Name	GARY First name	ROBERT Middle name	5	DB1E1(Last name
Title	ASST	MANAGER		
Company	1-10BOC	HOME DURCKS		
	Identify the corporate se	BYROW ST.	rized agent is	a servicer.
Address	5/01 W	Rec		
	Number Street	t		
	SHICAGO	o IL		60641
	City		State	ZIP Code
Contact phone	273-725-	-4590	Email	6 SOBIEK @ ATT. NET

to establish local rules specifying what a signature

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

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3571.

Case 18-30040	Case	18-30046	
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Employee: Gary R. Sobiek	Time Off: Vacation
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Accruals History Report

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DeRamus</td> <td>110</td>	Time Entry Indication0713/018 0713/0180713/018 1000713/018 	Time Error 07/13/2018 0.1 100 100 Moment Actuals Execution 04/21/2019 150 0.4/21/2019 57600 Atomatic Actuals Execution 04/21/2019 0.4/21/2019 57600 57600 Carry Over Rule 04/21/2019 0.4/21/2019 57600 57800 Carry Over Rule 04/21/2019 0.4/21/2019 57800 57800 Time Error 03/29/2018 0.4/21/2018 0.4/21/2018 57800 Time Error 03/29/2018 0.4/21/2018 57800 58800 Time Error 03/29/2013 0.2/21/2019 59800 59800 Time Error 03/29/2018 0.4/21/2018 57800 59800 Time Error 03/27/2017 0.2/21/2019 598000 598000	The Env 07/13/018 - 100 - 100 - 100 - - 100 -	The Function 07/13/2018 0.1 100 Product Detaining Manner, Acruate Execution 67/21/2018 6/21/2018 6/21/2018 6/21/2018 6/21/2018 6/21/2018 Anner, Acruate Execution 67/21/2018 6/21/2018 6/21/2018 6/21/2018 6/21/2018 6/21/2018 Carry Over Rue Per Year Alputtment 07/21/2018 6/20 0/21/2018 6/21/2018	The First Contraction Contraction Contraction Contraction Contraction Forder Lobenus Anomat Accusal Execution 072/1008 0.021/2018 0.021/2018 Forder Lobenus Forder Lobenus Corry Over Male 072/1008 0.021/2018 0.021/2018 Forder Lobenus Forder Lobenus Corry Over Male Forder 072/1008 0.021/2018 0.021/2018 Forder Lobenus Corry Over Male Forder 072/2018 0.021/2018 0.021/2018 Forder Lobenus Corry Over Male Forder 072/2018 0.021/2018 0.021/2018 Forder Lobenus The Erry 072/2018 0.01 0.011/2018 Forder Lobenus The Erry 072/2018 0.01 0.011/2018 Forder Lobenus The Erry 072/2018 0.01 Forder Lobenus Forder Lobenus The Erry 072/2017 0.01 Forder Lobenus Forder Lobenus The Erry 1227/2017 0.01 Forder Lobenus Forder Lobenus The Erry 1227/2017 0.01 Forder Lobenus	17/2018 04:55p	Time Entry	07/15/2018		1.00		Freddie L. 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Case 18-30046 Claim 60-2 Filed 02/15/19 Desc Main Document

Page 5 of 8

Generated: 12/20/2018 02:48p Generated By: Michael J. Earl Page 1 of 1

PayServ*

Bradenton

Sorted By: Added Descending

Store: 22 Name: Sobiek, Gary FT Employment Date: 4/21/2002

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As you can imagine, I've been inundated with similar requests and I'm trying my best to explain it as I've instructed. Hopefully this will clarify the insane way we will have to calculate this for each person:

Vacation Accruals. Despite the way the policy is written, Illinois law says we are accruing time. therefore During your 1st year of employment you are accruing 0.09615 days of vacation per week. (5 days

- During years 2-5 you are accruing 0.19231 days of vacation per week (10 days per year)
- During year 6 and on you are accruing 0.28846 days of vacation per week (15 days per year)

Bankruptcy law allows us to payout on your last check any time you accrued in the 180 days before we f time you used during that 180 days (04/28/2018 to 10/25/2018). I apologize for the formats of the accr rounding issues, but this should give you a good idea of how your vacation payout is being calculated to bankruptcy orders.

Between 04/28/2018 and 10/25/2018 you: Accrued 0.28846 vacation days per week for 26 week or 75 hours of vacation Accrued 0.28846 vacation days per week for 26 week or 75 hours of vacation Totaling 75 hours of vacation accrued over the 180 days prior to filing bankruptcy

Between 04/28/2018 and 10/25/2018 you used 140 hours of vacation.

you will need to file a bankruptcy claim for all your accrued vacation time)
you will need to file a bankruptcy claim for all your accrued vacation time)

From 10/25/2018 to present (11/16/2018) you are: Accruing 0.28846 days of vacation per week for 0 weeks or 0 hours of vacation Accruing 8.65004 hours of vacation since 10/25/2018 Totaling 8.65004 hours of vacation since 10/25/2018

f you were to leave today your final paycheck would include **0** vacation hours plus **8.65004** vac acation hours plus vacation hours guaranteed in an offer letter for a grand total of **8.65** vacat

ou are entitled to file a bankruptcy claim for any time accrued that we are not allowed to par R will provide a record to each employee after termination that shows how much you accru u can complete a claim in the bankruptcy. United States Bankruptcy Court Northern District of Illinois

Jeffrey P. Allsteadt, Clerk of Court



Date: 02/07/2019

Gary Sobiek 5104 W Bryon St Chicago, IL 60641

Letter to Filer:

Case Number, *if applicable*: 18-30046 Case Name, *if applicable*: FP Retail Associates LLC

RETURN CHECK / MONEY ORDER / CASHIER'S CHECK

Unsigned

Debtor(s) or Company check unacceptable

No fee is required

OTHER: Please refer to last page – ADDITIONAL INFORMATION section.

NEW BANKRUPTCY CASE

We were unable to process your case because the following documents are missing and required at case opening:

Voluntary Petition (Official Form 101 or 201)

No form of payment (one of the following is required)

Full Filing Fee

Application/Order for Individuals to Pay the Filing Fee in Installments (Official Form 103A)

Application/Order to Have the Chapter 7 Filing Fee Waived (Official Form 103B)

OTHER: Please refer to last page – ADDITIONAL INFORMATION section.

CORRECTION(S) REQUIRED

Alias Summons:

Amended Adversary Complaint:

Adversary Proceeding Coversheet:

Amended Petition to Correct:

Letter to	Filer -	- Page 2
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Motior	to	Redact	and	Proposed	Order ¹
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	OTHER: Please refer to ADDITIONAL INFORMATION section below.
DEFIC	ENCY – Please make all necessary corrections to the document(s) listed below:
	Amended Schedule/List of Creditors is deficient for payment. Please submit payment.
	Motion is deficient for payment. Please submit payment.
	Notice of Motion – please complete and submit.
	Proposed Order – please complete and submit.
	OTHER: Please refer to ADDITIONAL INFORMATION section below.
INFOR	MATION
	CREDIT BUREAU – The bankruptcy court does NOT perform any activities with the credit bureaus. You must contact the individual credit bureaus for their procedure for removing your bankruptcy filing from their credit report.
	No record of the case name or number exists in our court; therefore we cannot process your request and we're returning the enclosed documents to you.
	Case name/number is missing. Please provide the case name/number.
	There are several debtors listed. Please provide the correct case number.

ADDITIONAL INFORMATION:

Correct the second page of your claim #60 (priority section should be one dollar amount.)

Make sure to mark your claim as Amended.

IF APPLICABLE

Include the name of the debtor/joint debtor, the case number, the signature of the debtor/joint debtor on all required documents.

Include the signature of the attorney representing the debtor/joint debtor.

FORM OF PAYMENT REQUIREMENT – Cashier's check or money order payable to Clerk, U. S. Bankruptcy Court.

Mail the required document(s) or payment listed above, including this Letter to my attention at:

Deputy Clerk M

Marilynn Camacho

Contact Number 312-697-7428

¹ A motion to redact personal information prohibited under Fed.R. Bankr. P. 9037(A) should be filed without notice of motion and without serving other parties. The motion must be accompanied by a redacted version of the filed document and a proposed order requiring the clerk to substitute the redacted document for the un-redacted document. A proposed order can be found on the courts website http://www.ilnb.uscourts.gov under Forms/Local Bankruptcy Forms titled Order to Redact. We are attaching a sample of the order.

Northern District of Illinois Claims Register

18-30046 FP Retail Associates LLC

10 500 10			
Honorable	Judge: Jacquel	line P. Cox Cha	pter: 11
Office: Eas	stern Division	Last	Date to file claims:
Trustee:			Date to file (Govt):
<i>Creditor:</i> GARY SOBI 5104 W. BYF CHICAGO, I	RON ST.	Claim No: 60 Original Filed Date: 02/06/2019 Original Entered Date: 02/06/2019 Last Amendment Filed: 02/15/2019 Last Amendment Entered: 02/15/2019	Status: Filed by: CR Entered by: Kimetha Collier Modified: 02/07/2019
Amount clai	imed: \$5890.74		
Priority clai	imed: \$5890.74		
	<u>2</u> 02/15/2019 Ame	•	OBIEK, Amount claimed: (Collier, Kimetha) y GARY SOBIEK, Amount claimed: \$5890.74 (Collier,
Description:			
Domarka (60	1) $2/7/2010$ Inc.	armost DDE Eiler Notifi	ad to File on Amondod Claim (ma)

Remarks: (60-1) 2/7/2019.....Incorrect PDF, Filer Notified to File an Amended Claim (mc) (60-2) 2/7/2019.....Incorrect PDF, Filer Notified to File an Amended Claim (mc)

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*	\$5890.74
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	\$5890.74	
Administrative		

Case 18-30046 Claim 60-1 Filed 02/06/19 Desc Main Document Page 1 of 4

Fill in this information to identify the case:				
Debtor 1	FP Retail Associates LLC			
Debtor 2 (Spouse, if filing)				
United States	Bankruptcy Court for the: Northern District of Illinois - Eastern Div			
Case number	18-30046			

UNITED STATES BANK NORTHERN DISTRIC	
FEB 0 6 2	V UF ILLINDIS

JEFFREY P. ALLSTEADT, CLERK TEAM - CA

Official Form 410

Part 1:

Proof of Claim

Identify the 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.

1. Who is the current creditor?	GARY SOBIEX 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?				
8. 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? $ \begin{array}{c} GARM & SOBIEK \\ Name \\ Slog & W BYROW ST \\ Number & Street \\ \hline CIFICACO & FL & GOGHI \\ City & State & ZIP Code \\ Contact phone & 773 & 725 & 4590 \\ Contact email & GOBIEK & ATT, NET \\ Uniform claim identifier for electronic payments in chapter 13 (if you under the sentence of th$	Where should payments to the creditor be sent? (if different) Name Number Street City State ZIP Code Contact phone			
Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known)	Filed on			
Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?				

6	Part 2: Give Information	n 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?	 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.
9	Is all or part of the claim secured?	No 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:
	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 clain entitled to priority unde 11 U.S.C. § 507(a)?	n INO T Yes. Check one:				
A claim may be partly priority and partly nonpriority. For example, in some categories, the	 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 dependent toward purchases have been been aligned. 	Amount entitled to priority \$			
law limits the amount entitled to priority.	□ 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).	\$ 1586 44			
	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	er the data of adjustment			
Part 3: Sign Below					
The person completing this proof of claim must	Check the appropriate box:				
sign and date it.	I am the creditor.				
FRBP 9011(b).	I am the creditor's attorney or authorized agent.				
If you file this claim electronically, FRBP	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
5005(a)(2) authorizes courts to establish local rules	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
specifying what a signature is.	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 gradit for any serves as an acknowledgment that when calculating the				
A person who files a fraudulent claim could be fined up to \$500,000, mprisoned for up to 5	amount of the claim, the creditor gave the debtor credit for any payments received toward the del I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the infor and correct.				
years, or both.					

I declare under penalty of perjury that the foregoing is true and correct.

1 23 2019 MM / DD / YYYY

Executed on date

18 U.S.C. §§ 152, 157, and

3571.

any Schick Signature

DARY irst name

ASS-

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

- 1	м	d	r	E	ıe

Title

R	SOBJEK
Middle name	Last name
MAUACER	

FILED OUT TO THE BEST OF MY ABBLITY

Company

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

Address

	the date	ionzeu ageni	is a servicer.
Address	SIDY W BYROPST Number Street		
	CHICAGO	PL	60641
	City	State	ZIP Code
Contact phone	773-7254590 773-203,4471	Email	GSOBIEK @ KTT. NE

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LAST DAY CHECK 22.15 VAC HOURS PAID		×	ا ⊷ ع

	Case 18-30046	Claim 60-1 Part 2			6/19	Desc Document Continued	Page
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From:	Earl, Mike (mearl@hoboonline.		SE	74	1850	0046	
To:	gsobiek@att.net	GP	rny	SOB	SIELC		
Date:	Monday, December 24, 2018, 1						

Attached is your last pay Statement and your vacation accrual report.

On your last pay check you would have received:

- 1. Vacation Time accrued in the 180 days prior to filing bankruptcy (10/25/2018) less time used during that same 180 days.
- 2. Vacation Time accrued since 10/25/2018 through to your termination date.

You can file a claim in the bankruptcy for any time you accrued that was not included in your final payout. Please be aware that the attached Vac Accrual Report only shows vacation time accrued through to your last anniversary date as well as vacation time taken through to your last day worked. This does not show time accrued from your last anniversary date through to your last day of employment which you will need to manually calculate.

VACATION TIME ACCRUED since your last anniversary date

count the number of full weeks worked since your last anniversary date (For example: 7 weeks and 3 days that will round down to 7 weeks. 7 weeks and 4 days will round up to 8 weeks)

Multiply that by

0.069615 days per week if this is your first year of FULL TIME employment

0.19231 days per week if this is your 2nd through 5th year of FULL TIME employment

0.28846 days per week if this is your 6th or greater year of FULL TIME employment

- 1. From the attached accrual report: Days Authorized Days Taken = Balance accrued through your last anniversary date
- 2. Add the VACATION TIME ACCRUED since your last anniversary date Calculated above
- 3. Multiply the total by your standard daily hours
 - a. 8 hours per day for hourly, warehouse or corporate staff.
 - b. 10 hours per day for salaried STORE management.
- 4. Multiple that by your hourly rate (you can find that in PayServ:
 - a. https://secure2.saashr.com/ta/PayServ173001.login?rnd=ZIE
- 5. Subtract the vacation payout on your last pay statement (attached)
- 6. The result is what you accrued that was not paid out.

Michael J Earl, SPHR, SHRM-SCP

Director of Human Resources

Home Owners Bargain Outlet



2650 Belvidere Road Waukegan, IL 60085 PH: 847-263-1240 ext 12 FX: 847-263-9170

Case 18-30046
Vacation BalanceClaim 60-1 Part 2
3 of 5Filed 02/06/19
3 of 5Desc Document Continued
Page
3 of 5Page
Page
Page
Store: 22Store: 22
Name: Sobiek, Gary
FT Employment Date: 4/21/2002Case # 18 30046

As you can imagine, I've been inundated with similar requests and I'm trying my best to explain it as I've been instructed. Hopefully this will clarify the insane way we will have to calculate this for each person:

Vacation Accruals. Despite the way the policy is written, Illinois law says we are accruing time. therefore:

- During your 1st year of employment you are accruing 0.09615 days of vacation per week. (5 days per year)
- During years 2-5 you are accruing 0.19231 days of vacation per week (10 days per year)
- During year 6 and on you are accruing 0.28846 days of vacation per week (15 days per year)

Bankruptcy law allows us to payout on your last check any time you accrued in the 180 days before we filed less any time you used during that 180 days (04/28/2018 to 10/25/2018). I apologize for the formats of the accruals and rounding issues, but this should give you a good idea of how your vacation payout is being calculated to comply with the bankruptcy orders.

Between 04/28/2018 and 10/25/2018 you: Accrued **0.28846** vacation days per week for **0** weeks or **0** hours of vacation Accrued **0.28846** vacation days per week for **26** week or **75** hours of vacation Totaling **75** hours of vacation accrued over the 180 days prior to filing bankruptcy

Between 04/28/2018 and 10/25/2018 you used 140 hours of vacation.

75 vacation hours accrued – **140** vacation hours used = **0** vacation hours available for payout on your last paycheck. (If you used more than you accrued you are not eligible for cash payout of vacation time on our last check but it does mean you will need to file a bankruptcy claim for all your accrued vacation time)

From 10/25/2018 to present (11/16/2018) you are:

Accruing **0.28846** days of vacation per week for **0** weeks or **0** hours of vacation Accruing **0.28846** days of vacation per week for **0** weeks or **8.65004** hours of vacation Totaling **8.65004** hours of vacation since 10/25/2018

If you were to leave today your final paycheck would include **0** vacation hours plus **8.65004** vacation hours or **8.65** total vacation hours plus vacation hours guaranteed in an offer letter for a grand total of **8.65** vacation hours.

You are entitled to file a bankruptcy claim for any time accrued that we are not allowed to payout as described above. HR will provide a record to each employee after termination that shows how much you accrued that was not paid out so you can complete a claim in the bankruptcy.

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GARY SUBIER

	Case	18-30046 Claim	-	Filed 02/06/19 5 of 5	Desc Document Continued	Page
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Northern District of Illinois Claims Register

Chapter: 11

Last Date to file claims:

Last Date to file (Govt):

18-30046 FP Retail Associates LLC

Honorable Judge: Jacqueline P. Cox

Office: Eastern Division

Trustee:

Creditor: (27512985) GARY SOBIEK 5104 W. BYRON ST. CHICAGO, IL 60641

Claim No: 60 Original Filed Date: 02/06/2019 Original Entered Date: 02/06/2019 Status: Filed by: CR Entered by: Kimetha Collier Modified:

No amounts claimed

History:

Details 60-1 02/06/2019 Claim #60 filed by GARY SOBIEK, Amount claimed: (Collier, Kimetha)

Description: Remarks: (60-1) Amount Unknown, will do Amend

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

No Amounts Claimed