

Fill in this information to identify the case:

Debtor 1 ~~Robert Gousset~~ Hillcrest Enterprises LLC

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: North District of Illinois

Case number 18-30047

FILED
 UNITED STATES BANKRUPTCY COURT
 NORTHERN DISTRICT OF ILLINOIS
 NOV 16 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?

Robert Gousset
 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?

Robert Gousset
 Name
61 Freesia CT
 Number Street
Romeoville Ill 60446
 City State ZIP Code

Contact phone 630 803 6358

Contact email megooseu@gmail.com

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? \$ 7933.98 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.
8/13/18 Ordered new kitchen cabinets. Told 4-6 weeks never recieved casihets.

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)?

☒ No

☐ Yes. Check one:

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.

☐ 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). \$ _____

☐ 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 09 2018
MM / DD / YYYY

Signature

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

Name

Robert IS Gousset
First name Middle name Last name

Title

customer

Company

None

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

Address

61 Freesia CT
Number Street

Romeoville
City

IL
State

60446
ZIP Code

Contact phone

630 803 6358

Email

meagoosea@gmail.com

PROOF OF CLAIM FILING INFORMATION FOR

MORGAN ADMINISTRATION, INC.

CASE NO. 18-30039

US BANKRUPTCY COURT, NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

Debtor Name	Case Number
Morgan Administration, Inc.	18-30039
Belvidere Associates LLC	18-30043
Deforab LLC	18-30057
FP Retail Associates LLC	18-30046
Hillcrest Enterprises, LLC	18-30047
Jular Media LLC	18-30050
KLS Acquisition Corp.	18-30052
Loomis Enterprises LLC	18-30053
North Avenue Associates LLC	18-30054
Oak Creek Distribution LLC	18-30055
OL Enterprises LLC	15-30056

General Bar Date: TBD

General Administrative Bar Date: TBD

Governmental Bar Date: TBD

NOTE: The Bar Date motion has not been filed. Until such time, you may send completed Proofs of Claims to:

US Bankruptcy Court – Northern District of Illinois – Eastern Division
Everett McKinley Dirksen United States Courthouse
219 South Dearborn Street
Chicago, IL 60604

PAGE NO: 1

HOB0 23
1693 PLAINFIELD RD
CREST HILL, IL 60403

PHONE: (815) 730-8340

SOLD TO: **BOB GOUSSET**
61 FREESIA CT

CUSTOMER: 21949
 TERMS: CASH/CHECK/BANKCARD

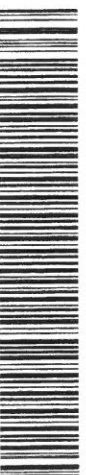
DATE / TIME: 8/13/18 5:18
 CLERK: BLOP
 TERMINAL: 61

ROMEOVILLE IL 60446
 630-803-6358
 SHIP TO: **GOUSSET/ROBERT**
 REFERENCE: K* KWC JMTWN VH & SL DK 1

ORDER: 302995/P

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		8970.81	/EA	8,970.81

CONTINUED...



PAGE NO: 2

HOBO 23
1693 PLAINFIELD RD
CREST HILL, IL 60403

PHONE: (815) 730-8340

SOLD BOB GOUSSET
 TO: 61 FREESIA CT

CUSTOMER: 21949
 TERMS: CASH/CHECK/BANKCARD

JOB: 000

DATE / TIME: 8/13/18 5:18

CLERK: BLOP

TERMINAL: 61

ROMEOVILLE IL 60446 630-803-6358
 SHIP TO: GOUSSET/ROBERT
 REFERENCE: K* KWC JMTWN WH & SL DK 1

ORDER: 302995/P

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
			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. JAMESTOWN WHITE FOR MAIN RUNS JAMESTOWN SLATE FOR ISLAND ROLL OUTS IN UC182490L SHELVES IN UC182490R FURNITURE BASE MOLDING FOR ISLAND ONLY SOFT CLOSE DOORS AND DRAWERS				
CONTINUED...							



HOBO 23
1693 PLAINFIELD RD
CREST HILL, IL 60403

PHONE: (815) 730-8340

PAGE NO. 3

SOLD TO: **BOB GOUSSET**
61 FREESIA CT

CUSTOMER: 21949
 TERMS: CASH/CHECK/BANKCARD

DATE / TIME: 8/13/18 5:18
 CLERK: BLOP
 TERMINAL: 61

SHIP TO: **ROMEOVILLE IL 60446**
GOUSSET/ROBERT
 630-803-6358
 REFERENCE: K* KWC JMTWN WH & SL DK 1

ORDER: 302995/P

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
-1	EA	SOKW % OFF	5 PIECE DRAWER FRONTS CUSTOMER BOB GOUSSET 61 FREESIA CT ROMEOVILLE, IL 60446 630-803-6358 DESIGNER DENISE KUBAS KOUNTRY WOOD % OFF DISCOUNT CREDIT RETURN PER JOHN MORRIS, HONORING 20% SALE DISCOUNT AMOUNT OF \$1794.16 DESIGNER DENISE KUBAS		1794.16	/EA	-1,794.16 R
CASH PAYMENT				4000.00	TAXABLE		
BANKCARD PAYMENT				3750.78	NON-TAXABLE		
TOTAL					SUB-TOTAL		
DEPOSIT AMT					TAX AMOUNT		
BALANCE DUE					TOTAL		

7750.78
 0.00

BKCRD# XXXXXXXXXXXX3104

3750.78

TAX AMOUNT

574.13
7750.78

MID: 324191420995
 APP: 98503P
 XR: 303041



PAGE NO: 1

HOBO 23
1693 PLAINFIELD RD
CREST HILL, IL 60403

PHONE: (815) 730-8340

SOLD **BOB GOUSSET**
 TO: **61 FREESIA CT**

CUSTOMER: 21949
 TERMS: CASH/CHECK/BANKCARD

JOB: 000

DATE / TIME: 9/17/18 9:49
 CLERK: CKIN
 TERMINAL: 61

ROMEDEVILLE IL 60446
 630-803-6358
 SHIP TO: **GOUSSET/ROBERT**
 REFERENCE: K* KWC JMTWN WH & SL DK 1

ORDER: 302995/P

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		9182.85	/EA	9,182.85

CONTINUED...



Bob
SOH's
MBR's

PAGE NO: 2

HOB0 23
1693 PLAINFIELD RD
CREST HILL, IL 60403

PHONE: (815) 730-8340

SOLD **BOB GOUSSET**
 TO: **61 FREESIA CT**

CUSTOMER: 21949
 TERMS: CASH/CHECK/BANKCARD

DATE / TIME: 9/17/18

9:49

CLERK: CKIN

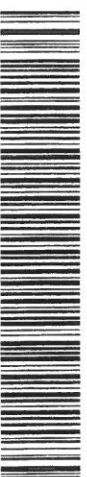
TERMINAL: 61

ROME0VILLE IL 60446
 630-803-6358
 SHIP TO: **GOUSSET/ROBERT**
 REFERENCE: K* KWC JMTWN WH & SL DK 1

ORDER: 302995/P

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
			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. JAMESTOWN WHITE FOR MAIN RUNS JAMESTOWN SLATE FOR ISLAND ROLL OUTS IN UC182490L SHELVES IN UC182490R FURNITURE BASE MOLDING FOR ISLAND ONLY SOFT CLOSE DOORS AND DRAWERS				

CONTINUED...



HOB0 23
1693 PLAINFIELD RD
CREST HILL, IL 60403

PHONE: (815) 730-8340

PAGE NO: 3

SOLD BOB GOUSSET
 TO: 61 FREESIA CT

CUSTOMER: 21949
 TERMS: CASH/CHECK/BANKCARD

DATE / TIME: 9/17/18 9:49
 CLERK: CKIN
 TERMINAL: 61

ROME0VILLE IL 60446
 630-803-6358
 SHIP TO: GOUSSET/ROBERT
 REFERENCE: K* KWC JMTWN WH & SL DK 1

ORDER: 302995/P

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
-1	EA	SOKW % OFF	5 PIECE DRAWER FRONTS CUSTOMER BOB GOUSSET 61 FREESIA CT ROME0VILLE, IL 60446 630-803-6358 DESIGNER DENISE KUBAS KOUNTRY WOOD % OFF DISCOUNT CREDIT RETURN PER JOHN MORRIS, HONORING 20% SALE DISCOUNT AMOUNT OF \$1794.16 DESIGNER DENISE KUBAS		1836.57	/EA	-1,836.57 R

PRIOR DEPOSIT
 DEPOSIT AMT 7750.78
 BALANCE DUE 183.20
 0.00

BANKCARD PAYMENT

183.20

TAXABLE 7346.28
 NON-TAXABLE 0.00
 SUB-TOTAL 7346.28

TAX AMOUNT 587.70
TOTAL 7933.98

xPhone Transaction

BKCRD# XXXXXXXXXXXX0365
 MID: 324191420995
 APP: 09581P
 XR: 316496



Northern District of Illinois Claims Register

[18-30047 Hillcrest Enterprises LLC](#)

Honorable Judge: Jacqueline P. Cox

Chapter: 11

Office: Chicago

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (27311806)

Claim No: 4

Status:

Robert Gousset

Original Filed

Filed by: CR

61 Freesia CT

Date: 11/16/2018

Entered by: Shante Boyd

Romeoville IL 60446

Original Entered

Modified:

Date: 11/19/2018

Amount claimed: \$7933.98

History:

[Details](#) [4-1](#) 11/16/2018 Claim #4 filed by Robert Gousset, Amount claimed: \$7933.98 (Boyd, Shante)

Description:

Remarks:

Claims Register Summary

Case Name: Hillcrest Enterprises LLC

Case Number: 18-30047

Chapter: 11

Date Filed: 10/25/2018

Total Number Of Claims: 1

Total Amount Claimed*	\$7933.98
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		