Case 18-30047 Claim 15-1 Filed 01/03/19 Desc Main Document Page 1 of 4

Fill in this information to identify the case:					
Debtor 1	Hillcrest Enterprises, LLC				
Debtor 2 (Spouse, if filing)					
United States E	Bankruptcy Court for the: Northern District of Illinois - Eastern Div				
Case number	18-30047				

UNITED STATES BANKRUPTCY COLUMNORTHERN DISTRICT OF ILLINOIS

JAN -3 2019

JEFFREY P. ALLSTEADT, CLEF...

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** Who is the current creditor? Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor Has this claim been No. acquired from ☐ Yes. From whom? someone else? Where should notices Where should notices to the creditor be sent? Where should payments to the creditor be sent? (if and payments to the different) creditor be sent? Feder I Rule of Name Bankruptcy Procedure (FRBP) 2002(g) Number City State ZIP Code Contact phone 630-7010-0363 Contact phone (A YAHOO · (OM Contact email Uniform claim identifier for electronic payments in chapter 13 (if you use one): Does this claim amend one already filed? Yes. Claim number on court claims registry (if known) _ MM / DD 5. Do you know if anyone No else has filed a proof Yes. Who made the earlier filing? of claim for this claim?

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?	\$ 12,221.11 Does this amount include interest or other charges?				
	☐ 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.				
	GDODS SOLD				
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 <i>Mortgage Proof of Claim</i>				
	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: \$				
	Amount necessary to cure any default as of the date of the petition:				
	Annual Interest Rate (when case was filed)% □ Fixed				
	Annual Interest Rate (when case was filed)%				
	Annual Interest Rate (when case was filed)% □ Fixed				
0. Is this claim based on a lease?	Annual Interest Rate (when case was filed)% Fixed Variable				
1	Annual Interest Rate (when case was filed)% Fixed Variable No Yes. Amount necessary to cure any default as of the date of the petition. \$\				
	Annual Interest Rate (when case was filed)% Fixed Variable No Yes. Amount necessary to cure any default as of the date of the petition. \$\				

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?		k 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.	Domes 11 U.S.	\$				
	Up to \$ persons	\$				
-	☐ Wages, bankrup 11 U.S.	\$				
	☐ Taxes of	\$				
	☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).					
	Other. S	\$				
		are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after	or the date of adjustment			
		and easily of the angle of the	ine date of adjustment.			
Part 3: Sign Below						
The person completing this proof of claim must	Check the appro	priate box:				
sign and date it.	I am the cre	ditor.				
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. 					
to establish local rules	— , a a gadrantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the					
A person who files a fraudulent claim could be	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.					
fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 12/24/2018					
		Jaskin Kuu.				
	Signature					
	Print the name of	of the person who is completing and signing this claim:				
	Name	JASBIR First name Middle name Last name				
	Title	Third land				
	Company					
		Identify the corporate servicer as the company if the authorized agent is a servicer.				
	Address	6645 FOXTREE AVE				
		WOODRIDGE IZ 6051	7			
		City State ZIP Code	50 0			
	Contact phone	630-706-0363 Email JKALI	IER (W YAHOO			

and a motor

and the same of th

1.11

Bulker Strong Savaka

Northern District of Illinois Claims Register

18-30047 Hillcrest Enterprises LLC

Honorable Judge: Jacqueline P. Cox **Chapter:** 11

Office: Eastern Division

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (27421199) Claim No: 15 Status:
JASBIR KAUR Original Filed Filed by: CR

6645 FOXTREE AVE Date: 01/03/2019 Entered by: Kimetha Collier

WOODRIDGE, IL 60517 Original Entered Modified:

Date: 01/04/2019

Amount claimed: \$12221.11

History:

Details 15-1 01/03/2019 Claim #15 filed by JASBIR KAUR, Amount claimed: \$12221.11 (Collier, Kimetha)

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*	\$12221.11
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		