

**Fill in this information to identify the case:**

Debtor 1 <u>Jular Media LLC</u>
Debtor 2 (Spouse, if filing)
United States Bankruptcy Court <u>Northern District of Illinois</u>
Case number: <u>18-30050</u>

FILED  
 U.S. Bankruptcy Court  
 Northern District of Illinois  
 4/29/2019  
 Jeffrey P. Allsteadt, Clerk

**Official Form 410  
 Proof of Claim**

04/19

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>WLS Television Inc.</u>	
	Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor _____	
<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>  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<b>Where should notices to the creditor be sent?</b>	<b>Where should payments to the creditor be sent? (if different)</b>
	<u>WLS Television Inc.</u>	<u>P.O. Box 732384</u>
	Name	Name
	<u>500 S. Buena Vista Street Burbank, CA 91521</u>	<u>Dallas, TX 75373-2384</u>
	Contact phone <u>8185606254</u>	Contact phone <u>8185606254</u>
	Contact email <u>gigi.taloma@disney.com</u>	Contact email <u>gigi.taloma@disney.com</u>
	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 _____ <span style="float: right;">MM / DD / YYYY</span>	
<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**

<p><b>6. Do you have any number you use to identify the debtor?</b></p>	<p><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: _____</p>
<p><b>7. How much is the claim?</b></p>	<p>\$ <u>31479.75</u></p> <p><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).</p>
<p><b>8. What is the basis of the claim?</b></p>	<p>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.</p> <p style="text-align: center;"><u>Advertising Sales</u></p>
<p><b>9. Is all or part of the claim secured?</b></p>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. The claim is secured by a lien on property.</p> <p><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: _____</p> <p><b>Basis for perfection:</b> _____</p> <p>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.)</p> <p><b>Value of property:</b> \$ _____</p> <p><b>Amount of the claim that is secured:</b> \$ _____</p> <p><b>Amount of the claim that is unsecured:</b> \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)</p> <p><b>Amount necessary to cure any default as of the date of the petition:</b> \$ _____</p> <p><b>Annual Interest Rate</b> (when case was filed) _____ %</p> <p><input type="checkbox"/> Fixed  <input type="checkbox"/> Variable</p>
<p><b>10. Is this claim based on a lease?</b></p>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. <b>Amount necessary to cure any default as of the date of the petition.</b> \$ _____</p>
<p><b>11. Is this claim subject to a right of setoff?</b></p>	<p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Identify the property: _____</p>

<b>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply.</i>	<b>Amount entitled to priority</b>
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.	<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 type="checkbox"/> Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
	<input type="checkbox"/> Wages, salaries, or commissions (up to \$13,650*) 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 4/1/22 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 4/29/2019  
MM / DD / YYYY

/s/ Gigi Taloma

Signature

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

Name Gigi Taloma

First name Middle name Last name

Title Collections Account Manager

Company The Walt Disney Company

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

Address 500 S. Buena Vista Street

Number Street

Burbank, CA 91521

City State ZIP Code

Contact phone 8185606254 Email gigi.taloma@disney.com



**Remit Address:**

**WLS-TV**  
**Attn: WLS-505**  
**P.O. Box 732384**  
**Dallas, TX 75373-2384**  
**Main: (312) 750-7777**  
**Billing: (312) 750-7131**

<http://abclocal.go.com/wls>

**Billing Address:**

**JULAR MEDIA LLC DBA HOBO**  
**Attention: Accounts Payable**  
**2650 BELVIDERE ROAD**  
**WAUKEGAN, IL 60085**

# INVOICE

Advertiser	JULAR MEDIA LLC DBA HOBO	Invoice #	C118090636
Product	HOME OWNERS BARGAIN OULET	Invoice Date	09/30/18
Estimate Number		Invoice Month	September 2018
		Invoice Period	08/27/18 - 09/26/18
Property	WLS-TV	Order #	213189
Account Executive	Courtney Del Monico Beneos	Alt Order #	
Sales Office	Chicago Local	Deal #	
Sales Region	Local	Order Flight	08/28/18 - 09/26/18
Billing Calendar	Broadcast	Agency Code	
Billing Type	Cash	Advertiser Code	
Special Handling		Product 1/2	
Agency Ref		Advertiser Ref	

Line	Channel	Description	Time	Day	Date	Length	Air Time	Ad-ID	Rate	Reconciliation	Ref #
1	WLS	ABC7 News @ 5a M-F	5a-6a		08/27/18 to 09/02/18	1x	-TWTF--				
	WLS			W	08/29/18	:15	5:43 AM	HOBOKI TLB15	\$300.00		3
						:15	5:45 AM	HOBOKI TSL15	\$300.00		
2	WLS	M-F 6a-9a Rotation	6a-9a		08/27/18 to 09/02/18	2x	-TWTF--				
	WLS			W	08/29/18	:15	7:27 AM	HOBOKI TLB15	\$500.00		5
						:15	7:28 AM	HOBOKI TSL15	\$500.00		
	WLS			F	08/31/18	:15	6:11 AM	HOBOKI TLB15	\$500.00		4
						:15	6:12 AM	HOBOKI TSL15	\$500.00		
	WLS			W	09/05/18	:15	6:15 AM	HOBOKI TLB15	\$500.00		10
						:15	6:16 AM	HOBOKI TSL15	\$500.00		
	WLS			F	09/07/18	:15	8:53 AM	HOBOKI TLB15	\$500.00		6
						:15	8:55 AM	HOBOKI TSL15	\$500.00		
	WLS			Tu	09/11/18	:15	6:41 AM	HOBOKI TF15R	\$500.00		12
						:15	6:42 AM	HOBOKI TSL15	\$500.00		
	WLS			Th	09/13/18	:15	7:28 AM	HOBOKI TF15R	\$500.00		13
						:15	7:28 AM	HOBOKI TSL15	\$500.00		
3	WLS	8a-10a Sa-Su ABC7 News	8a-10a Sa-Su		08/27/18 to 09/02/18	1x	-----SS				
	WLS			Su	09/02/18	:30	9:12 AM	HOBOKI TLB30	\$1,000.00		2
	WLS			Sa	09/08/18	:30	8:40 AM	HOBOKI TF30R	\$1,000.00		16
	WLS			Su	09/16/18	:30	9:13 AM	HOBOKI TLB30	\$1,000.00		17
4	WLS	ABC7 Nws 4-5:30p Rot M-F	4p-530p		08/27/18 to 09/02/18	1x	MTWTF--				

We warrant that the actual broadcast information shown on this invoice was taken from the program log.



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Line	Channel	Description	Time	Day	Date	Length	Air Time	Ad-ID	Rate	Reconciliation	Ref #
4	WLS	ABC7 Nws 4-5:30p Rot M-F	4p-530p	F	08/31/18	:15	4:27 PM	HOBOKI TLB15	\$650.00		2
						:15	4:29 PM	HOBOKI TSL15	\$650.00		
			09/03/18 to 09/09/18	1x	MTWTF--						
	WLS		M	09/03/18	:15	4:40 PM	HOBOKI TLB15	\$650.00		15	
				:15	4:42 PM	HOBOKI TSL15	\$650.00				
		09/10/18 to 09/16/18	1x	MTWTF--							
WLS		Th	09/13/18	:15	4:38 PM	HOBOKI TLB15	\$650.00		18		
				:15	4:40 PM	HOBOKI TSL15	\$650.00				
5	WLS	Wheel of Fortune	626p-656p		08/27/18 to 09/02/18	1x	-TWTF--				
				WLS	Tu	08/28/18	:15	6:53 PM	HOBOKI TLB15	\$1,100.00	
				:15	6:54 PM	HOBOKI TSL15	\$1,100.00				
6	WLS	ABC7 News @ 10p M-F	M-F 10-1035P		08/27/18 to 09/02/18	1x	-TWTF--				
				WLS	F	08/31/18	:15	10:22 PM	HOBOKI TLB15	\$1,500.00	
				:15	10:22 PM	HOBOKI TSL15	\$1,500.00				
7	WLS	Sun LN 10-11p	10-11p		08/27/18 to 09/02/18	1x	-----S				
				WLS	Su	09/02/18	:15	11:34 PM	HOBOKI TLB15	\$1,200.00	
				:15	11:35 PM	HOBOKI TSL15	\$1,200.00				
8	WLS	Cubs In-Game / Brewers	various		09/10/18 to 09/16/18	1x	--W----				
				WLS	W	09/12/18	:15	9:43 PM	HOBOKI TLB15	\$2,365.00	
				:15	9:44 PM	HOBOKI TSL15	\$2,365.00				
10	WLS	Cubs In-Game / White Sox	various		09/17/18 to 09/23/18	1x	-----S				
				WLS	Su	09/23/18	:15	3:50 PM	HOBOKI TF15R	\$2,365.00	
				:15	3:51 PM	HOBOKI TSL15	\$2,365.00				

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Line	Channel	Description	Time	Day	Date	Length	Air Time	Ad-ID	Rate	Reconciliation	Ref #
10	WLS	Cubs In-Game / White Sox	various								
12	WLS	ABC7 News @ 5a M-F	5a-6a								
					09/03/18 to 09/09/18	1x	MTWTF--				
	WLS			Tu	09/04/18	:15	5:16 AM	HOBOKI TLB15	\$288.00		1
						:15	5:17 AM	HOBOKI TSL15	\$287.00		
13	WLS	M-F 6a-9a Rotation	6a-9a								
					08/27/18 to 09/02/18	1x	-TWTF--				
	WLS			Tu	08/28/18	:30	6:42 AM	HOBOKI TLB30	\$1,000.00		1
					09/03/18 to 09/09/18	1x	MTWTF--				
	WLS			F	09/07/18	:30	6:11 AM	HOBOKI TLB30	\$1,000.00		2
					09/10/18 to 09/16/18	1x	MTWTF--				
	WLS			M	09/10/18	:30	8:28 AM	HOBOKI TF30R	\$1,000.00		3
14	WLS	ABC7 News @ 10p M-F	M-F 10-1035P								
					09/03/18 to 09/09/18	1x	MTWTF--				
	WLS			W	09/05/18	:15	10:12 PM	HOBOKI TLB15	\$1,450.00		1
						:15	10:13 PM	HOBOKI TSL15	\$1,450.00		
15	WLS	M-Su 4a-5p Rotator	4:00 AM-6:00 AM								
					08/27/18 to 09/02/18	2x	-----SS				
	WLS			Sa	09/01/18	:30	4:29 AM	HOBOKI TLB30	\$0.00		1
	WLS			Su	09/02/18	:30	4:50 AM	HOBOKI TLB30	\$0.00		2
16	WLS	Sa-Su 5a-10a Rot	Sa-Su 5a-10a Rot								
					09/03/18 to 09/09/18	2x	-----SS				
	WLS			Sa	09/08/18	:00			<del>\$0.00</del> Credited		4
	WLS			Su	09/09/18	:30	5:50 AM	HOBOKI TLB30	\$0.00		3
17	WLS	ABC7 Nws 4-5:30p Rot M-F	4p-530p								
					09/03/18 to 09/09/18	1x	MTWTF--				
	WLS			W	09/05/18	:00			<del>\$0.00</del> Credited		1
18	WLS	ABC7 News@1030p Sa	1030p-1130p								

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18	WLS	ABC7 News@1030p Sa	1030p-1130p		08/27/18 to 09/02/18	1x	-----S-				
	WLS			Sa	09/01/18	:00			\$0.00	Credited	1
19	WLS	Sa-Su 11p-2a Rotator	11p-2a Rotator		08/27/18 to 09/02/18	4x	-----SS				
	WLS			Sa	09/01/18	:30	1:45 AM	HOBOKI TLB30	\$0.00		3
	WLS			Sa	09/01/18	:30	2:05 AM	HOBOKI TLB30	\$0.00		1
	WLS			Su	09/02/18	:00			\$0.00	Credited	2
	WLS			Su	09/02/18	:30	1:52 AM	HOBOKI TLB30	\$0.00		4
20	WLS	Sa-Su 11p-2a Rotator	11p-2a Rotator		09/03/18 to 09/09/18	4x	-----SS				
	WLS			Sa	09/08/18	:30	1:40 AM	HOBOKI TLB30	\$0.00		3
	WLS			Sa	09/08/18	:30	1:58 AM	HOBOKI TF30R	\$0.00		1
	WLS			Su	09/09/18	:30	11:45 PM	HOBOKI TF30R	\$0.00		2
	WLS			Su	09/09/18	:30	12:21 AM	HOBOKI TLB30	\$0.00		4
21	WLS	Sa-Su 11a-5p Rot	11a-5p		08/27/18 to 09/02/18	1x	-----SS				
	WLS			Su	09/02/18	:30	2:17 PM	HOBOKI TLB30	\$0.00		1
22	WLS	Cubs In-Game	various		09/10/18 to 09/16/18	1x	--W----				
	WLS			W	09/12/18	:15	10:24 PM	HOBOKI TLB15	\$0.00		1
23	WLS	2a-4a	2a-4a		09/10/18 to 09/16/18	3x	-----S-				
	WLS			Sa	09/15/18	:15	2:04 AM	HOBOKI TLB15	\$0.00		2
	WLS			Sa	09/15/18	:15	2:19 AM	HOBOKI TSL15	\$0.00		3
	WLS			Sa	09/15/18	:15	2:59 AM	HOBOKI TF15R	\$0.00		1
24	WLS	400a-500a M-F rotation	4a-5a		09/24/18 to 09/30/18	2x	-TW----				
	WLS			Tu	09/25/18	:15	4:11 AM	HOBOKI TLB15	\$0.00		1

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24	WLS	400a-500a M-F rotation	4a-5a								
	WLS			W	09/26/18	:15	4:10 AM	HOBOKI TLB15	\$0.00		2
25	WLS	M-F 5a-9a Rotation	5a-9a								
				09/24/18 to 09/30/18		2x	-TW----				
	WLS			Tu	09/25/18	:00			<del>\$0.00</del>	Credited	1
	WLS			W	09/26/18	:00			<del>\$0.00</del>	Credited	2
26	WLS	Live w/Kelly & Ryan 9-10a	9a-10a								
				09/24/18 to 09/30/18		2x	-TW----				
	WLS			Tu	09/25/18	:00			<del>\$0.00</del>	Credited	1
	WLS			W	09/26/18	:00			<del>\$0.00</del>	Credited	2
27	WLS	The View	10a-11a								
				09/24/18 to 09/30/18		1x	-TW----				
	WLS			W	09/26/18	:00			<del>\$0.00</del>	Credited	1
28	WLS	General Hospital	2p-3p								
				09/24/18 to 09/30/18		1x	-TW----				
	WLS			W	09/26/18	:00			<del>\$0.00</del>	Credited	1
29	WLS	M-F 3-4p	3p-4p								
				09/24/18 to 09/30/18		1x	-TW----				
	WLS			W	09/26/18	:00			<del>\$0.00</del>	Credited	1

Aired Spots **40**

Gross Total **\$37,035.00**  
Agency Commission **\$5,555.25**  
Net Amount Due **\$31,479.75** **Due and payable NET 30 Days from Invoice Date**

We warrant that the actual broadcast information shown on this invoice was taken from the program log.



# Northern District of Illinois Claims Register

[18-30050 Jular Media LLC](#)

**Honorable Judge:** Jacqueline P. Cox

**Chapter:** 11

**Office:** Eastern Division

**Last Date to file claims:**

**Trustee:**

**Last Date to file (Govt):**

*Creditor:* (27793225)  
WLS Television Inc.  
500 S. Buena Vista Street  
Burbank, CA 91521

**Claim No:** 26  
*Original Filed*  
*Date:* 04/29/2019  
*Original Entered*  
*Date:* 04/29/2019

*Status:*  
*Filed by:* CR  
*Entered by:* EPoc ADI  
*Modified:*

Amount claimed: \$31479.75

*History:*

[Details](#) [26-1](#) 04/29/2019 Claim #26 filed by WLS Television Inc., Amount claimed: \$31479.75 (ADI, EPoc)

*Description:*

*Remarks:*

## Claims Register Summary

**Case Name:** Jular Media LLC

**Case Number:** 18-30050

**Chapter:** 11

**Date Filed:** 10/25/2018

**Total Number Of Claims:** 1

<b>Total Amount Claimed*</b>	\$31479.75
<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.**

	<b>Claimed</b>	<b>Allowed</b>
<b>Secured</b>		
<b>Priority</b>		
<b>Administrative</b>		