Case 18-30052 Claim 24-1 Filed 12/14/18 Desc Main Document Page 1 of 18

Fill in this information to identify the case:	
Debtor 1 KLS Acquisition Corp. dba Home Owners Bargain Outlet,	HOBO
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Northern District of Illinois Case number <u>18-30052</u>	FILED UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS DEC 14 2018
Official Form 410	JEFFREY P. ALLSTEADT, CLERK TEAM - CA

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?	Eagle Home Products, Inc. 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?	Where should notices to the creditor be sent? Eagle Home Products, Inc.	Where should payments to the creditor be sent? (if different)
	Federal Rule of	Name	Name
	Bankruptcy Procedure (FRBP) 2002(g)	One Arnold Drive	
	(11(01))2002(g)	Number Street	Number Street
		Huntington NY 11743	
		City State ZIP Code	City State ZIP Code
		Contact phone (631) 673 3500	Contact phone
		Contact email Custserv@eaglehomeproducts.com	Contact email
		Uniform claim identifier for electronic payments in chapter 13 (if you us	
4.	Does this claim amend one already filed?	☑ No □ Yes. Claim number on court claims registry (if known)	
			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? 	

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?	 \$11,770.86 Does this amount include interest or other charges? Do Do Dyse. Attach statement itemizing interest, fees, expenses, or other
		charges required by Bankruptcy Rule 3001(c)(2)(A).
3.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
	claim?	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.
		Coode cold
		Goods sold
).	Is all or part of the claim	No No
	secured?	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
0.	Is this claim based on a	2 No
	lease?	□ Yes. Amount necessary to cure any default as of the date of the petition. \$
1.	Is this claim subject to a	2 No
	right of setoff?	
		Yes. Identify the property:

12. Is all or part of the claim	M No	
entitled to priority under 11 U.S.C. § 507(a)?	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).	\$
	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 date of adjustment.

	-	
Part	3:	

Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

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.

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.

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 12/11/2018 MM / DD / YYYY Signature

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

Name	Robert Chemtob			
	First name	Middle name		Last name
Title	VP			
Company	Eagle Home Pro	ducts, Inc.		
	Identify the corporate se	rvicer as the company if the aut	horized age	ent is a servicer.
Address	One Arnold Drive	9		
	Number Street			
	Huntington		NY	11743
	City		State	ZIP Code
Contact phone	<u>(631) 673 3500</u>		Email (custserv@eaglehomeproducts.com

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Eagle Home Products, Inc. One Arnold Drive, Huntington, NY 11743 Tel: (631) 673-3500 / Fax: (631) 673-6700 email: CustServ@EagleHomeProducts.com

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2650 Belvidere Road Waukegan, IL 60085

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OCUNCUSTOMER PURCHASE ORDER NO. Best Way SHIP VIA Net 30 Days TERMS 8/28/18 DATE SHIPPED SLMN 1 6 SLMN 2 100565 -000 PICK TICKET NO.

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Eagle Home Products, Inc. One Arnold Drive, Huntington, NY 11743 Tel: (631) 673-3500 / Fax: (631) 673-6700 email: CustServ@EagleHomeProducts.com

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Tel: (631) 673-3500	One Arnold Drive,	Eagle Home
Tel: (631) 673-3500 / Fax: (631) 673-6700	One Arnold Drive, Huntington, NY 11743	Eagle Home Products, Inc.

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email: CustServ@EagleHomeProducts.com

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EAGLE HOME PRODUCTS INC.

Date

Permanent post office address of shipper

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Packing list provided by shipper

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Merchandise received in good condition

One Arnold Drive, Huntington New York 11743

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Case 18-30052 Claim 24-1 Filed 12/14/18 Desc Main Document Page 15 of 18

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Name	Eagle Home Products Inc. 631 673-350)0	Carrier's Pro No		13chlo
Of	One Arnold Drive, Huntington New York 11		Shipper's Bill of Li	ading N	NO. 42023
Comien	Frad Runner		Consignee's Refe	rence/f	PO No
Carrier_			No.		100.560
Consigned	to Hobo 47				
Destinatio	on Street 1555 Software 1600	" must appear before consignee's name. State of	-	Co	unty of
Delivering	Rida in TI	60455			
U	-) ·				
HANDLING	Shipment Information PACKAGES KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND (Subject to Correction)	EXCEPTIONS *WEIGHT (Subject to Corr		Cube (Optional)	For Freight Collect Shipments:
UNITS NO. TYPE	NO. TYPE 115 (Subject to Correction)			(Optional)	If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following
20	C3 Klasticticity Halice	03 132			statement: The carrier may decline to make delivery of
	10 × 00000317	63			this shipment without payment of freight and all other lawful charges
Car	her must call for delide	zing appoint	to ant	5	(Signature-of Consignor.)
	(708) -924-9155				Shipper Certification-This is to certify that the above named materials are properly classified,
					described, packaged, marked and labeled, and are in proper condition for transportation accord-
				1	ing to the applicable regulations of the DOT.
	3				Per Date Carrier Certification-Carrier acknowledges
. FUE	i pertmust sign for a	WE COUNT			receipt of packages and required placards. Carrier certifies emergency response
					information was made available and/or carrier has the DOT emergency response guidebook or equivalent document in the vehicle.
PIECES	88 total and 3 studs	132	0 4041		
	the rate is dependent on value, shippers are required to state specifically in writing the applicable. applicable.	iability Limitation for loss or damag	ge on this shipment	may be	Per
	lectared value of the property is specifically stated by the shipper to be not exceeding NOTE (3) Combe so marked a	nmodities requiring special or additional care or and packaged as to ensure safe transportation	attention in handling or stow with ordinary care. See Se	wing must ic.	Package Nos. Date Freight charges are to be PREPAID
	per " 2(e) of NMFC 1	Item: 360.			unless marked collect. CHECK BOX IF COLLECT
Notify if proble	m enroute or at deliveryFax No.	Tel. No. (1	for informational purpos	se only)	
Send freight b	il! to:		late Zip		C.O.D. charge to be paid by Shipper D Consignee D
Shipper	Carrier				C.O.D. SHIPMENT
	Per	EAGLE HOME PRO			C.O.D. Amt
	rnold Drive, Huntington New York 11743		DUCISINC.		Collection Fee
	signate Hazardous Materials as defined in DOT Regulations.	Pennanem p	dist once address of	Shipper	Total Charges
		Trucker Initial			
		TA			Time Inc. Of
e	Merchandise received in good condition				Time In:
	Merchandise received on pallets	JP.			//
	merchanuise received on pallets				
۰	Packing list provided by shipper	JHC_			Time Out:

- Bill of Lading received by driver
- Driver is responsible for carton count and for any necessary strapping to prevent pallets and cartons from movement.
- Packing list is provided on last pallet loaded and clearly marked. Shipper not responsible for carrier repositioning of pallets.

2 Date

Driver Signature

Trailer Number

10/26/2018

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Case 18-30052 Claim 24-1 Filed 12/14/18 Desc Main Document

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PLEASE REMIT PROMPTLY TO:
Dondaumon PRO NO.
ROADRUNNER TRANSPORTATION SERVICES
CUSTOMER SERVICE: 855-228-0096 WWW.RRIS.COM 8/03/18 PAGE 1 OF 1 DELIVERY REC
B S EAGLE HOME PRODUCTS INC C HOBO STORES 47
H 1 ARNOLD DR 7557 S 78TH AVE
O R S
B/L No: 32736419 P.O.No: 100360 Spec Inst:CFA 708 924 9155 Manifesti 2314341 See Addl references below. Diverse Service of the service
Orig: NYM Dest: CHI - RDFS CHI KUVEN - QUCEDO
NO. PIECES / MAL
3 PLT STC 88 CAS PLASTIC & RUBBER ARTICLES NAME: 1,320 156600-6 NOTIFY CHARGE SIGNATURE: 1,320 LINEHAUL SURCHARGE Fuel Surcharge DATE: D-1X PO# n2102 BOL:42629 DEL:N000021702 SKIDS: PCS: ACCESSORIALS WILL NOT BE PAID UNLESS PRE-APPROVED OR NOTED ON THE BOL APPT 0 IN10.25 OUT DRIVER DRIVER DRIVER DATE: D.10.25 OUT
3 < T O T A L S
LI FREIGHT DESCRIBED ABOVE RECEIVED IN GOOD CONDITION AND SHRINKWRAP/BANDING INTACT EXCEPT AS NOTED Any Additional Service May Result In Additional Charg
UE DATE 8/08/18 DATE DELIVERED IN Please Initial Services Performed
IN DEL LIFTGATE SORT/SEG
RINTED NAME DRIVER: DRIVER CHK# OTHER CHK#
DERAL & CARRETA REGULATIONS REQUIRE PAYMENT WITHIN 15 DAYS - ACCOUNT MUST BE WITHIN CREDIT TERMS TO MAINTAIN APPLICABLE DISCOUNT.

08/07/18 01:54 i

Northern District of Illinois Claims Register

18-30052 KLS Acquisition Corp.

Honorable Judge: Jacqueline P. Cox

Office: Chicago

Trustee:

Chapter: 11

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

Creditor: (27220821) EAGLE HOME PRODUCTS, INC ONE ARNOLD DRIVE HUNTINGTON, NY 11743

Claim No: 24 Original Filed Date: 12/14/2018 Original Entered Date: 12/14/2018 Status: Filed by: CR Entered by: Kevin Lyons Modified:

Amount claimed: \$11770.86

History:

Details 24-1 12/14/2018 Claim #24 filed by EAGLE HOME PRODUCTS, INC, Amount claimed: \$11770.86 (Lyons, Kevin)

Description:

Remarks:

Claims Register Summary

Case Name: KLS Acquisition Corp. Case Number: 18-30052 Chapter: 11 Date Filed: 10/25/2018 Total Number Of Claims: 1

Total Amount Claimed* \$11770.86

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		