

Fill in this information to identify the case:

Debtor 1 KLS Acquisition Corp.Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: Northern District of Illinois - Eastern Div

Case number 18-30052**FILED**
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

JAN 29 2019

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?

Name of the current creditor (the person or entity to be paid for this claim) Spiro KosovaOther names the creditor used with the debtor NA

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?

Name Spiro KosovaNumber 1775 Street Jean Marie CtCity Brookfield State WI ZIP Code 53005Contact phone 414-400-1039Contact email entelakosova@gmail.com

Where should payments to the creditor be sent? (if different)

Name Same

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? \$ 2,670.41 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.

Refunds. - The check I received for my merchandise return wasn't covered. I couldn't deposit the check.

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:

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).

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 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

MM / DD / YYYY

Signature

Spiro Kosova

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

Name

Spiro

First name

Middle name

Kosova

Last name

Title

Company

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

Address

Number

Street

City

State

ZIP Code

Contact phone

Email

1775 Jean Marie CtBrookfieldWI53005414-400-1039entelakosova@gmail.com

THANK YOU FOR SHOPPING AT HOBBO
HOBBO 21
800 S. 108TH ST.
WEST ALLIS, WI 53214
(414) 302-4626

08/14/18 1:47PM AGUT 24 SALE

1187706 -40 CT 63.22 CT S R
4" R.D NORTHPLANK NATURL SG 1 -2528.80
Orig: I05884/21 07/20/18 TX:
SUB-TOTAL:\$ -2528.80 TAX: \$ -141.61
TOTAL: \$ -2670.41
CHECK REQUEST USD\$ -2670.41



==>> JRNL#I20985/21 <<==
CUST NO: 4315
Customer Copy

Acct: SPIRO KOSOVA
- ALL RETURNS AND EXCHANGES MUST BE IN
ORIGINAL CONDITION IN FACTORY SEALED
CARTON AND ACCOMPANIED BY ORIGINAL
REGISTER RECEIPT WITHIN 30 DAYS OF
PURCHASE.
- HOBBO RESERVES THE RIGHT TO DENY ANY
RETURN OR EXCHANGE AND MAY REQUEST
IDENTIFICATION AS A CONDITION OF RETURN
OR EXCHANGE.
- SPECIAL ORDER, CUSTOM, AND
MANUFACTURER DIRECT ITEMS ARE
NON-REFUNDABLE.
- GIFT CARDS ARE NON-REFUNDABLE AND LOST
OR STOLEN GIFT CARDS ARE
NON-REPLACEABLE.
- PLEASE SEE FULL RETURN POLICY FOR
ADDITIONAL EXCLUSIONS / LIMITATIONS
- Text BARGAIN to 555888 to join the
Bargain Squad and receive exclusive
subscriber benefits and savings!!!

I have all the originals of the documents provided.
Please let me know if you will need them.

Thank you
Spiro Kosova.

PAGE NO: 1

HOBO 21
800 S. 108TH ST.
WEST ALLIS, WI 53214
PHONE: (414) 302-4626

SOLD TO:
SPIRO KOSOVA
1775 JEAN MARIE CT

BROOKFIELD WI 53005
414-595-7017

CUSTOMER: 4315
TERMS: CASH/CHECK/BANKCARD

JOB: 000

DATE / TIME: 8/14/18
CLERK: AGUT
TERMINAL: 24

1:48

CREDIT MEMO: 120985/M

QUANTITY	UM	ITEM	DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
-40	CT	1187706	4" R.O NORTHPLANK NATURL SG 18SF CREDIT RETURN MFG part# 961360 UPC # 829298613606 Orig: I05884/21 07/20/18 TX:		63.22	/CT	-2,528.80
CHECK REQUEST			2670.41 ** AMOUNT RETURNED TO CUSTOMER **	2670.41	TAXABLE NON-TAXABLE SUB-TOTAL		-2528.80 0.00 -2528.80
					TAX AMOUNT TOTAL		-141.61 -2670.41

X *[Signature]*



PAGE NO: 1

HOB0 21
800 S. 108TH ST.
WEST ALLIS, WI 53214
PHONE: (414) 302-4626

DATE / TIME: 7/18/18 2:33
CLERK: YCAP
TERMINAL: 22

CUSTOMER: 4315 JOB: 000
TERMS: CASH/CHECK/BANKCARD

114-595-7017 REFERENCE: IN STOCK SOLD HOLD D60

ORDER: 805884/M

THANK YOU FOR SHOPPING AT HOB0
HOB0 21
800 S. 108TH ST.
WEST ALLIS, WI 53214
(414) 302-4626

07/16/18 2:33PM YCAP 22 ORDER

SUB-TOTAL \$ 2528.80 TAX: \$ 141.61
TOTAL: \$ 2670.41
CASH TEND: 2671.00 CHANGE: .59
DEPOSIT : 2670.41



ORDER# 805884/21

CUST NO: 4315

Customer Copy

ACCT: SPIRO KOSOVA
REF: IN STOCK SOLD HOLD D60
- ALL RETURNS AND EXCHANGES MUST BE IN ORIGINAL CONDITION IN FACTORY SEALED CARTON AND ACCOMPANIED BY ORIGINAL REGISTER RECEIPT WITHIN 30 DAYS OF PURCHASE.
- HOB0 RESERVES THE RIGHT TO DENY ANY RETURN OR EXCHANGE AND MAY REQUEST IDENTIFICATION AS A CONDITION OF RETURN OR EXCHANGE.
- SPECIAL ORDER, CUSTOM, AND MANUFACTURER DIRECT ITEMS ARE NON-REFUNDABLE.
- GIFT CARDS ARE NON-REFUNDABLE AND LOST OR STOLEN GIFT CARDS ARE NON-REPLACEABLE.
PLEASE SEE FULL RETURN POLICY FOR ADDITIONAL EXCLUSIONS / LIMITATIONS
- Text 9ARGAIN to 555888 to join the Bargain Squad and receive exclusive subscriber benefits and savings!!!

Returned
8-14-18
temp

** CHANGE GIVEN **

CASH PAYMENT

0.41
0.00

DESCRIPTION	SUGG	PRICE	/PER	EXTENSION
4" R.O NORTHPLANK NATURL SG 18SF		63.22	/CT	2,528.80

MFG part# 961360
UPC # 829298613606
SALESMAN GIUSEPPE
63.22 PER DAVE

TAXABLE	2528.80
NON-TAXABLE	0.00
SUB-TOTAL	2528.80
TAX AMOUNT	141.61
TOTAL	2670.41

X^{Chubla} Tavor



THIS CHECK CONTAINS MULTIPLE SECURITY FEATURES DESIGNED TO DETECT DUPLICATION OR ALTERATION

CHECK NO. 46018 CHECK DATE 09/01/18 KOS17 VENDOR NO.

K.L.S. ACQUISITION CORP.
DBA H.O.B.O.
2650 BELVIDERE ROAD
WAUKEGAN, IL 60085

CHECK NO. 046018

TWO THOUSAND SIX HUNDRED SEVENTY AND 41/100 DOLLARS

MB Financial Bank, N.A. 2-173
CHICAGO, IL 60607 710

CHECK AMOUNT

\$*****2,670.41

PAY
TO THE
ORDER OF
SPIRO KOSOVA
1775 JEAN MARIE CT
BROOKFIELD, WI 53005-

VOID AFTER 90 DAYS

Leo L. Kosova

AUTHORIZED SIGNATURE

MP

⑈046018⑈ ⑆071001737⑆ 0691 63480⑈

Northern District of Illinois Claims Register

[18-30052 KLS Acquisition Corp.](#)

Honorable Judge: Jacqueline P. Cox

Chapter: 11

Office: Eastern Division

Last Date to file claims:

Trustee:

Last Date to file (Govt):

<i>Creditor:</i> (27221673) SPIRO KOSOVA 1775 JEAN MARIE CT BROOKFIELD, WI 53005	Claim No: 86 <i>Original Filed</i> <i>Date:</i> 01/29/2019 <i>Original Entered</i> <i>Date:</i> 01/29/2019	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> Kimetha Collier <i>Modified:</i>
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Amount claimed: \$2670.41

History:

[Details](#) [86-1](#) 01/29/2019 Claim #86 filed by SPIRO KOSOVA, Amount claimed: \$2670.41 (Collier, Kimetha)

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*	\$2670.41
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		