

Fill in this information to identify the case:

Debtor 1 Loomis Enterprises LLC

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Illinois

Case number 18-30053

**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?** ML Matthews Distribution Inc.  
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)**

<p><b>Where should notices to the creditor be sent?</b></p> <p><u>ML Matthews Distribution Inc.</u> Name <u>23 Stonehill Road</u> Number Street <u>Oswego IL 60543</u> City State ZIP Code Contact phone <u>630-551-1112 x 17</u> Contact email <u>ederen@mlmatthews.com</u></p>	<p><b>Where should payments to the creditor be sent? (if different)</b></p> <p><u>ML Matthews Distribution Inc.</u> Name <u>23 Stonehill Road</u> Number Street <u>Oswego IL 60543</u> City State ZIP Code Contact phone <u>630-551-1112 x 17</u> Contact email <u>ederen@mlmatthews.com</u></p>
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Uniform claim identifier for electronic payments in chapter 13 (if you use one):  
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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? \$ 1986.00. 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.  
services performed

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

**A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.**

Yes. Check one:

<input type="checkbox"/> 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 \$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<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 4/01/19 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 12 20 2018  
MM / DD / YYYY

Signature 

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

Name John Ruddy  
First name Middle name Last name

Title Attorney for Creditor ML Matthews Distribution Inc.

Company Ruddy, King & Petersen Law Group, LLC.  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 2631 Ginger Woods Parkway, Suite 101  
Number Street

Aurora IL 60502  
City State ZIP Code

Contact phone 630-820-0333 Email jruddy@ruddyking.com

Receivable Collections Report

**Customer = Hobo #27 and converted to US** **Loomis Enterprises, LLC**

M. L. Matthews Distribution Inc.

23 Stonehill Rd.

Oswego, IL 60543

Tel: (630) 551-1112

Fax: (630) 551-1114

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Customer	Order #	Cust Ref #	TRIP #	Date	Days
Hobo #27	PRO-1117146	T000010392	1067413	5/31/2017	517
Hobo #27	PRO-1126410	T000011237	1070418	1/24/2018	279
Hobo #27	PRO-1135397	Overpayment on check 29068	--MULTIPLE--	8/11/2018	80
Hobo #27	PRO-1136269	T000012087	1071495	9/30/2018	30
Hobo #27	PRO-1137121	T000012176	1071497	9/30/2018	30
Hobo #27	PRO-1137123	T000012191	1071497	9/30/2018	30
Hobo #27	PRO-1137126	T000012201	1071497	9/30/2018	30
Hobo #27	PRO-1136267	T000012088	1071508	10/7/2018	23
Hobo #27	PRO-1137189	521758/T - Tajnai	1071514	10/7/2018	23
Hobo #27	PRO-1137321	T000012207	1071529	10/10/2018	20
Hobo #27	PRO-1137190	T000012112	1071541	10/12/2018	18
Hobo #27	PRO-1137323	T000012192	1071547	10/12/2018	18
Hobo #27	PRO-1137620	527134/T	1071547	10/12/2018	18
Hobo #27	PRO-1137320	T000012179	1071554	10/17/2018	13
Hobo #27	PRO-1137710	528005/T	1071561	10/17/2018	13
Hobo #27	PRO-1137775	T000012220, 12238, 27coop825	1071561	10/17/2018	13
Hobo #27	PRO-1137307	523694/T	1071570	10/21/2018	9
Hobo #27	PRO-1137770	T000012180	1071570	10/21/2018	9
Hobo #27	PRO-1137814	530622/T	1071570	10/21/2018	9
Hobo #27	PRO-1137917	T000012210	1071589	10/24/2018	6
Hobo #27	PRO-1137920	T000012152, 12151	1071589	10/24/2018	6

**Grand Totals**

**18-30053**

**Total**

\$40.00
\$40.00
(\$140.00)
\$224.00
\$238.00
\$40.00
\$42.00
\$140.00
\$40.00
\$40.00
\$182.00
\$154.00
\$40.00
\$196.00
\$126.00
\$40.00
\$84.00
\$266.00
\$70.00
\$40.00
\$84.00
\$1,986.00

# Northern District of Illinois Claims Register

[18-30053 Loomis Enterprises LLC](#)

**Honorable Judge:** Jacqueline P. Cox      **Chapter:** 11  
**Office:** Eastern Division      **Last Date to file claims:**  
**Trustee:**      **Last Date to file (Govt):**

<i>Creditor:</i> (27393497)	<b>Claim No: 8</b>	<i>Status:</i>
ML Matthews Distribution Inc.	<i>Original Filed</i>	<i>Filed by:</i> CR
23 Stonchill Road	<i>Date:</i> 12/20/2018	<i>Entered by:</i> John C Ruddy
Oswego, IL 60543	<i>Original Entered</i>	<i>Modified:</i>
	<i>Date:</i> 12/20/2018	

Amount claimed: \$1986.00

*History:*

[Details](#) [8-1](#) 12/20/2018 Claim #8 filed by ML Matthews Distribution Inc., Amount claimed: \$1986.00 (Ruddy, John)

*Description:*

*Remarks:*

## Claims Register Summary

**Case Name:** Loomis Enterprises LLC  
**Case Number:** 18-30053  
**Chapter:** 11  
**Date Filed:** 10/25/2018  
**Total Number Of Claims:** 1

<b>Total Amount Claimed*</b>	\$1986.00
<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.**

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