

Fill in this information to identify the case:

Debtor 1 Oak Creek Distribution LLC

Debtor 2 _____
(Spouse, if filing)

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

Case number 18-30055

FILED
 UNITED STATES BANKRUPTCY COURT
 NORTHERN DISTRICT OF ILLINOIS
 DEC 26 2018

**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? Steve Silver Company
 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>Where should notices to the creditor be sent?</p> <p><u>Steve Silver Co / Bruce King</u> Name <u>1000 Fm 548 North</u> Number Street <u>Forney TX 75126</u> City State ZIP Code Contact phone <u>972-564-2601 (ext 1126)</u> Contact email <u>bking@ssilver.com</u></p>	<p>Where should payments to the creditor be sent? (if different)</p> <p>Name _____ Number Street _____ City State ZIP Code _____ Contact phone _____ Contact email _____</p>
--	---

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: 9308

7. How much is the claim? \$ 22,568.00 . 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.
Goods SOLD

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:

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* 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 12/18/2018
MM / DD / YYYY

Bruce King
Signature

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

Name Bruce A. King
First name Middle name Last name

Title CFO

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

Address 1000 FM 548 North
Number Street

Forney TX 75126
City State ZIP Code

Contact phone 972-564-2601 (ext 1126) Email bking@ssilver.com



1000 FM 548 NORTH
P.O. BOX 1709
FORNEY, TEXAS 75126
PHONE (972) 564-2601 FAX (888) 774-5837

Steve Silver Company
PO Box 205262
Dallas TX 75320-5262

REMIT TO:

INVOICE NUMBER	PAGE NUMBER	INVOICE REPRINT
1815523	1 of 1	DATE 07/03/18

Tag FAX P-U INFO T0- 414-762-6970

1/00000009308

SOLD TO
HOBO
2650 Belvidere Rd.
DONT MAIL OR FAX INVOICES
EMAIL ONLY--CHECK EML BOX
Waukegan IL 60085
847-263-1240

SHIP TO
60455
Bridgeview Warehouse #47
7557 S 78th Avenue
DONT MAIL OR FAX INVOICES
EMAIL ONLY--CHECK EML BOX
Bridgeview IL 60455
414-762-1600

CUSTOMER PO NUMBER	SHIP DATE	SALESPERSON	TERMS	TAX CODE	ORDER NO	WIH	FREIGHT	SHIP VIA
N00020393	07/03/18	156	SSC Net 30		C096X/00	1	C	TPU/FAX P-U

FOB: Collect

AT850SC Anastasia Recliner Sofa, 40 39 1 EA 0.00 299.00 EA 11,661.00
 AT850LC Anastasia Recliner Lovese 26 24 2 EA 0.00 289.00 EA 6,936.00
 AT850CC Anastasia Glider Recliner 21 19 2 EA 0.00 209.00 EA 3,971.00

PACKING LIST REQUIRED FOR ALL DELIVERIES

DO NOT MAIL OR FAX INVOICES

EMAIL INVOICES ONLY.....CHECK EMAIL BOX @ TIME OF INVOICING

FRT: HOBO TO ROUTE, FAX P-U INFO TO 414-762-6970
 TSCA TITLE VI COMPLIANT

INVOICE DUE: 08/02/18

FRT SURCH	BOXES	CUBES	MERCHANDISE	DISCOUNT	TAX	FREIGHT	TOTAL DUE
	82	3,175.80	22,568.00				22,568.00

CUSTOMER ORIGINAL

CUSTOMER SIGNATURE _____ DATE _____

