

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 -2 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?

David John Wanker

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)

Where should notices to the creditor be sent?

David Wanker

Name

3640 W. Forest Hill Ave

Number

Street

FRANKLIN

City

WI

State

53132

ZIP Code

Contact phone 414-552-4478Contact email dwanke3640@icloud.com

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

David Wanker

Name

3640 W. Forest Hill Ave

Number

Street

FRANKLIN

City

WI

State

53132

ZIP Code

Contact phone 414-552-4478Contact email dwanke3640@icloud.comUniform 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?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>0607</u>
7. How much is the claim? \$ <u>3462.00</u>	Does this amount include interest or other charges? <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).
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. <u>Unpaid accrued vacation time 15 days of 10 hours per day at \$23.08 per hour</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <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: _____ 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) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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:

Amount entitled to priority

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). \$ _____

☐ 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 12 16 2018
MM / DD / YYYY

David John Wanker
Signature

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

Name

David

John

Wanker

First name

Middle name

Last name

Title

Asst. Manager

Company

Home Owners Bargain Outlet

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

Address

3640 W. Forest Hill Ave

Number

Street

FRANKLIN

City

WI

State

53132

ZIP Code

Contact phone

414-552-4478

Email

dwaner3640@icloud.com

[Submit Request](#) [View History](#)

Balances

TIME OFF	ACCRUED TO		CURRENT ACCRUED	TAKEN	CURRENT BALANCE	SCH	PENDING APPROVAL
Sick	07/17/2019	Days:	14.00	3.00	11.00	0.00	0.00
Vacation	07/17/2019	Days:	20.00	4.00	16.00	0.00	0.00

Approvers

Julie A. Cwik
Michael J. Earl
Robert Menefee
Harry Hulbert
David J. Wanker
Thomas P. Gessner
Harry Hulbert
Harry Hulbert
Melina M. Krstic

For "A" the first time

From March 2017

to the end of 2017

and the end of 2018

and the end of 2019

and the end of 2020

and the end of 2021

and the end of 2022

and the end of 2023

and the end of 2024



To: All Full-Time Employees

From: Michael Earl

Date: 10/23/2019

Re: Changes to Vacation Policy – Effective Immediately

Effective immediately, the following changes and clarifications to the Company's Vacation Policy as set forth in the HOBO Employee Handbook are in effect:

From the date of this notice, full time employees in Illinois and Wisconsin will earn vacation time throughout each year (calculated from your employment anniversary date) in the following manner:

- After completing your 1st full-time year of employment, you will earn up to 1 week of paid vacation per year calculated from your first work anniversary date throughout the year until your next anniversary date at the rate of 0.09615 days per week of employment.
- After completing your 2nd full-time year of employment, and beginning on your second anniversary date, you are entitled to up to 2 weeks of paid vacation per year which shall accrue from your work anniversary date throughout the year until your next anniversary date at the rate of 0.19231 days per week of employment.
- After completing your 5th full-time year of employment, and beginning on your fifth anniversary date, you are entitled to up to 3 weeks of paid vacation per year which shall accrue from your work anniversary date throughout the year until the next anniversary date at the rate of 0.28846 days per week of employment.

The Company reaffirms its policy of not permitting full-time employees to carry vacation time not used into the following year. No exceptions to this "no carryover" policy for vacation earned from the date of this amendment shall be granted.



WILLIAMSON, WILSON & COMPANY, INC.

FW: ACTION REQUIRED - Updates to wage motion

December 17, 2018 at 10:22 AM

From "Gessner, Tom"

To "'menefee830@aol.com'", "'dwanker3640@icloud.com'", "'g777truth@hotmail.com'"

 image001.png 42.64 KB

From: Gessner, Tom

Sent: Saturday, November 3, 2018 11:33 AM

To: 'g777truth@hotmail.com' <g777truth@hotmail.com>

Subject: FW: ACTION REQUIRED - Updates to wage motion

Importance: High

From: Hulbert, Harry

Sent: Saturday, November 3, 2018 9:44 AM

To: Gessner, Tom <tgessner@hoboonline.com>

Subject: FW: ACTION REQUIRED - Updates to wage motion

Importance: High

Here is what I know about vacation.

From: Earl, Mike

Sent: Friday, November 2, 2018 4:49 PM

To: Store Managers <StoreManagers@hoboonline.com>; Stores - HR Coordinator <StoresHR@hoboonline.com>

Cc: Jurewicz, Jerry <jjurewicz@hoboonline.com>; Cwik, Julie <jcwik@hoboonline.com>

Subject: ACTION REQUIRED - Updates to wage motion

Importance: High

Hi Store Managers and HR Coordinators,

Our Attorney's filed a motion in court yesterday seeking permission to pay wages including paid time off, commissions, etc. They were successful in their motion. Therefore: We are allowed to let employees use paid time off including sick, vacation (SEE NOTE BELOW), holiday, bereavement, etc. according to the written policy. We are allowed to payout unused vacation time upon termination according to the written policy. (SEE NOTE BELOW)

We are allowed to pay employees for any time form a prior pay period that was inadvertently missed from that pay period

We are allowed to pay Designers commissions earned on the invoicing of kitchen in October (up through October 26th) on the standard payroll cycle. (From October 27 and on they are going to receive commissions from the Liquidators based on a program that was communicated out to the earlier today.)

Example: if your anniversary date is July 7 and you were awarded 10 days on July 7, and since July 7th you used 5 days, then you only have 5 days available to use or get paid out. Any amount you had in your record from a prior year is ineligible to be paid out.

NOTE UNDER NO CIRCUMSTANCE IS ANYONE OTHER THAN ME OR JULIE CWIK ALLOWED TO APPROVE VACATION TIME OFF IN THE SYSTEM BECAUSE THE SYSTEM BALANCE INCLUDES CARRY OVER AND IT WOULD BE A VIOLATION OF FEDERAL LAW TO APPROVE ANY VACATION TIME THAT WOULD BE CONSIDERED CARRYOVER. DO NOT UNDER ANY CIRCUMSTANCE APPROVE VACATION PAY! I'M TRYING TO GET PAYSERV TO CHANGE THE SYSTEM SO NONE OF YOU GET THE EMAILS OR HAVE THE ABILITY TO APPROVE VACATION TIME SO NO ONE INADVERTENTLY APPROVES TIME THAT WE ARE NOT ALLOWED TO GIVE.

Michael J Earl, SPHR, SHRM-SCP
Director of Human Resources
Home Owners Bargain Outlet



Official Form 309F (For Corporations or Partnerships)

Notice of Chapter 11 Bankruptcy Case

12/17

For the debtor listed above, a case has been filed under chapter 11 of the Bankruptcy Code. An order for relief has been entered.

This notice has important information about the case for creditors, debtors, and trustees, including information about the meeting of creditors and deadlines. Read both pages carefully.

The filing of the case imposed an automatic stay against most collection activities. This means that creditors generally may not take action to collect debts from the debtor or the debtor's property. For example, while the stay is in effect, creditors cannot sue, assert a deficiency, repossess property, or otherwise try to collect from the debtor. Creditors cannot demand repayment from the debtor by mail, phone, or otherwise. Creditors who violate the stay can be required to pay actual and punitive damages and attorney's fees.

Confirmation of a chapter 11 plan may result in a discharge of debt. A creditor who wants to have a particular debt excepted from discharge may be required to file a complaint in the bankruptcy clerk's office within the deadline specified in this notice. (See line 11 below for more information.) To protect your rights, consult an attorney. All documents filed in the case may be inspected at the bankruptcy clerk's office at the address listed below or through PACER (Public Access to Court Electronic Records at www.pacer.gov).

The staff of the bankruptcy clerk's office cannot give legal advice.

Do not file this notice with any proof of claim or other filing in the case.

1. Debtor's full name	KLS Acquisition Corp.	
2. All other names used in the last 8 years	dba Home Owners Bargain Outlet, dba HOBO	
3. Address	2650 Belvidere Rd Waukegan, IL 60085	
4. Debtor's attorney Name and address	Jonathan P Friedland Sugar Felsenthal Graiss & Helsinger LLP 30 North LaSalle Street Suite 3000 Chicago, IL 60602	Contact phone 312-704-9400 Email: jfriedland@sfigh.com
5. Bankruptcy clerk's office Documents in this case may be filed at this address. You may inspect all records filed in this case at this office or online at www.pacer.gov .	Eastern Division 219 S Dearborn 7th Floor Chicago, IL 60604	Hours open: 8:30 a.m. until 4:30 p.m. except Saturdays, Sundays and legal holidays. Contact phone 1-866-222-8029 Date: 10/31/18
6. Meeting of creditors The debtor's representative must attend the meeting to be questioned under oath. Creditors may attend, but are not required to do so.	December 12, 2018 at 01:30 PM The meeting may be continued or adjourned to a later date. If so, the date will be on the court docket.	Location: 219 South Dearborn, Office of the U.S. Trustee, 8th Floor, Room 802, Chicago, IL 60604

For more information, see page 2 >

Northern District of Illinois Claims Register

[18-30056 OL Enterprises LLC](#)

Honorable Judge: Jacqueline P. Cox

Chapter: 11

Office: Eastern Division

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (27419305)
DAVID JOHN WANKER
3640 W. FOREST HILL AVE
FRANKLIN, WI 53132

Claim No: 18
Original Filed
Date: 01/02/2019
Original Entered
Date: 01/03/2019

Status:
Filed by: CR
Entered by: Kimetha Collier
Modified:

Amount claimed: \$3462.00

History:

[Details](#) [18-1](#) 01/02/2019 Claim #18 filed by DAVID JOHN WANKER, Amount claimed: \$3462.00 (Collier, Kimetha)

Description:

Remarks:

Claims Register Summary

Case Name: OL Enterprises LLC

Case Number: 18-30056

Chapter: 11

Date Filed: 10/25/2018

Total Number Of Claims: 1

Total Amount Claimed*	\$3462.00
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		