En harry Ciler datal	
Debtor name: Embassy Suites Hotel	
United States Bankruptcy Court for the District of Kansas at Kansas City	
Case number (If known): 16 - 2/142	RECEIVED
See Appendix A to bar date notice for list of debtors and case numbers.	MAR 0 6 2017
	BMC GROUP
Official Form 410	If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again. THIS SPACE IS FOR COURT USE ONLY
Proof of Claim	04/16

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.

The original of this completed form (faxes not accepted), together with accompanying documentation, must be either (a) delivered to the Claims and Noticing Agent at the address set forth on the Bar Date Notice, or (b) filed using the online Document Filing System (CM/ECF) of the United States Bankruptcy Court for the District of Kansas, in either event so as to be received no later than 5:00 p.m. CST on the December 23, 2016.

### Part 1: Identify the Claim

1. Who is the current creditor?	TD TNDUSTRIES Name of the current creditor (the person or entity to paid for this of	alaim)
	Other name 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?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	NACM Southwest Name 751 Plaza Blud.
	Number Street	<u>751 PIAZA BIUD.</u> Number Street <u>CoppELL TX 75019</u> City State ZIP Code
	City State ZIP Code	
	Contact phone	Contact phone <u>972-518-0322</u> Contact email <u>Arra</u> <u>dang@N</u> acmSw.c
	Contact email	Contact email <u>Canq@</u> NacmSw.C
	Uniform claim identifier for electronic payments in chapte	er 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? Case 16. Official Form 410	No Yes. Who made the earlier filing?	JQH Cti ID

Part 2: Give inform	ation about the Claim as of the Date the Case Was Filed				
6. Do you have any number you use to identify the debtor?	No $\mathcal{P}$ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: $\mathcal{I} \mathcal{T} \mathcal{I} \mathcal{I}$				
7. How much is the claim?	\$ \$1,357.47 . 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 - WAIK IN COOLER				
9. Is all or part of the claim secured?	No         Yes. The claim is secured by a lien on property.         Nature of property:         Attachment (Official Form 410-A) with this Proof of Claim.         Motor vehicle         Other. Describe:         Hats for perfection:         Attachment (official Form 410-A) with this Proof of Claim.         Attachment (Official Form 410-A) with this Proof of Claim.         Motor vehicle         Other. Describe:         Hats 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:       \$				
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:				

· ·

Case 16-21142 Claim 775-1 Filed 03/06/17 Desc Main Document Page 2 of 7 Official Form 410

· ·	1				
12. Is all or part of the claim	No				
entitled to priority under 11 U.S.C. § 507(a)?	_	k all that apply:	Amount entitled to priority		
A claim may be partly	Domes	tic support obligations (including alimony and child support) under .C. § 507(a)(1)(A) or (a)(1)(B).	\$		
priority and partly nonpriority. For example, in some categories, the		2,850* of deposits toward purchase, lease, or rental of property or services for al, family, or household use. 11 U.S.C. §507(a)(7).	\$		
law limits the amount entitled to priority.	bankru	, salaries, or commissions (up to \$12,850*) earned within 180 days before the ptcy petition is filed or the debtor's business ends, whichever is earlier. .C. § 507(a)(4).	\$		
	Taxes	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$		
	Contrib	utions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$		
	Other.	Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$		
		re subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or af	ter the date of adjustment.		
13. Is all or part of the	No				
claim entitled to administrative priority	Yes.Indica	te the amount of your claim arising from the value of any goods received by			
pursuant to	which	ebtor within 20 days before the date of commencement of the above case, in the goods have been sold to the Debtor in the ordinary course of such	\$		
11 U.S.C. § 503(b)(9)?	Debto	r's business. Attach documentation supporting such claim.			
Part 3: Sign Below					
The person completing this proof of claim must	Check the appro	opriate box:			
sign and date it.	I am the cre	editor.			
FRBP 9011(b).	I am the creditor's attorney or authorized agent.				
If you file this claim electronically, FRBP	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
5005(a)(2) authorizes courts to establish local rules	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
specifying what a signature is.	I understand that	at an authorized signature on this Proof of Claim serves as an acknowledgmer	nt that when calculating the		
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.				
fraudulent claim could be fined up to \$500,000,	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.				
imprisoned for up to 5 years, or both.	I declare under penalty of perjury that the foregoing is true and correct.				
18 U.S.C. §§ 152, 157, and 3571.	Executed on da	te MM / DD / YYYY			
	Signature				
	Print the name	of the person who is completing and signing this claim:			
	Name	First name Middle name	Last name		
	Title				
	Company	Identify the corporate servicer as the company if the authorized agent is a se	rvicer.		
	Address	Number Street			
		Number Street			
		City Stat	e ZIP Code		

Contact phone

Case 16-21142 Claim 775-1 Filed 03/06/17 Desc Main Document Page 3 of 7

Email



Invoice Number	Terms	Invoice Date
0001195607	Net 30	3/28/2016
Service Date	3/8/20	016
Wo	ork Order Number	

Work Address:

### EMBASSY SUITES 7600 JOHN Q. HAMMONS FRISCO TX 75034

Customer Reference Number	Customer Number	Invoice Total
	EMBASUIT11	\$293.09

Description of Service

Service Reach-in cooler is tripping the gfi outlet.

	Quantity	Price	Ext. Price
Labor	2.25	\$95.00	\$213.75
D295 Regular		Labor Total	<b>\$213.75</b>
Additional Charges	1.00	\$12.00	\$12.00
Kit - Clean Up	1.00	\$45.00	\$45.00
Truck Charge	Additio	nal Charges Total	<b>\$57.00</b>

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Thank you for giving us the opportunity to serve you. We apprec	iate your business. Sales Total	\$270.7 \$22.3
	Pay This Amount	\$293.09
National Service Call Center: (800) 864-7717	Arizona L37, ROC246535, L39, ROC246533 Austin TACLA26883C, M16684, EC21229	
Arizona         480/449-7690         Fort Worth         817/306-6500           Austin         512/445-6060         Houston         713/939-1986           Dallas         972/888-9500         San Antonio         210/656-5511	Dallas TACLA26339C, M16723, TEC17889 Ft. Worth TACLA17611C, M19925, E231510 Houston TACLA904C, M10945,	
Please visit us at: www.tdindustries.com	SanAntonio TACLA20309C, M17938, EC22166	
TO VIEW OR PAY ONLINE GO TO: http://tdindustries.billtrust.com	USE THIS ENROLLMENT TOKEN: DPZ LK	R MBX

Case 16-21142 Claim 775-1 Filed 03/06/17 Desc Main Document Page 4 of 7



Invoice Number	Terms	Invoice Date
0001207011	Net 30	5/17/2016
Service Date	5/3/20	016
Wo	ork Order Number	

Work Address:

### EMBASSY SUITES 7600 JOHN Q. HAMMONS FRISCO TX 75034

Customer Reference Number	Customer Number	Invoice Total
	EMBASUIT11	\$267.38

Description of Service

rvice Check out main bar cooler for proper operation.

2	Quantity	Price	Ext. Price
Labor	2.00	\$95.00	\$190.00
D341 Regular		Labor Total	<b>\$190.00</b>
Additional Charges	1.00	\$12.00	\$12.00
Kit - Clean Up	1.00	\$45.00	\$45.00
Truck Charge	Additiona	I Charges Total	<b>\$57.00</b>

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Thank vou	for giving us the op	portunity to serve you. We appreciate	your business. Sales Tota	
			Pay This Amount	\$267.38
Natio	nal Service Call	Center: (800) 864-7717	Arizona L37, ROC246535, L39, ROC246533	
Arizona Austin Dallas	480/449-7690 512/445-6060 972/888-9500	Fort Worth 817/306-6500 Houston 713/939-1986 San Antonio 210/656-5511	Austin TACLA26883C, M16684, EC21229 Dallas TACLA26339C, M16723, TEC17889 Ft. Worth TACLA17611C, M19925, E231510 Houston TACLA904C, M10945,	
Plea	ase visit us at: w	/ww.tdindustries.com	SanAntonio TACLA20309C, M17938, EC221	66
VIEW OR PAY	ONLINE GO TO:	http://tdindustries.billtrust.com	USE THIS ENROLLMENT TOKEN:	DPZ LKR MBX

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Invoice Number	Terms	Invoice Date
0001211763	Net 30	6/6/2016
Service Date	5/31/2	016
Wo	ork Order Number	

Work Address:

#### EMBASSY SUITES 7600 JOHN Q. HAMMONS FRISCO TX 75034

Customer Reference Number	Customer Number	Invoice Total
	EMBASUIT11	\$581.04

Description of Service

rvice Walk-in cooler not cooling

	Quantity	Price	Ext. Price
Labor D295 Regular	2.25	\$95.00 Labor Total	\$213.75 <b>\$213.75</b>
Additional Charges			
Kit - Clean Up	1.00	\$12.00	\$12.00
Refrigerant, R22	7.00	\$38.00	\$266.00
Truck Charge	1.00	\$45.00	\$45.00
	Additional	Charges Total	\$323.00

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Thank you for giving us the op	portunity to serve you. We appreciate	your business. Sales Total	
		Pay This Amount	\$581.04
National Service Call	Center: (800) 864-7717	Arizona L37, ROC246535, L39, ROC246533	
Arizona 480/449-7690 Austin 512/445-6060 Dallas 972/888-9500	Fort Worth 817/306-6500 Houston 713/939-1986 San Antonio 210/656-5511	Austin TACLA26883C, M16684, EC21229 Dallas TACLA26339C, M16723, TEC17889 Ft. Worth TACLA17611C, M19925, E231510 Houston TACLA904C, M10945,	
Please visit us at: w	ww.tdindustries.com	SanAntonio TACLA20309C, M17938, EC221	66
VIEW OR PAY ONLINE GO TO:	http://tdindustries.billtrust.com	USE THIS ENROLLMENT TOKEN:	DPZ LKR MBX

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SER\	/ICE INVOI	CE
Invoice Number	Terms	Invoice Date
0001217024	Net 30	7/1/2016
Service Date	6/16/2	016
Wo	ork Order Number	
	1551003	

. . \*

Work Address:

### EMBASSY SUITES 7600 JOHN Q. HAMMONS FRISCO TX 75034

Customer Reference Number	Customer Number	Invoice Total
	EMBASUIT11	\$215.96

Description of Service

Service Install customer's water cooled ice maker on the 14th floor.

	Quantity	Price	Ext. Price
Labor	1.50	\$95.00	\$142.50
D295 Regular		Labor Total	<b>\$142.50</b>
Additional Charges	1.00	\$12.00	\$12.00
Kit - Clean Up	1.00	\$45.00	\$45.00
Truck Charge	Additiona	I Charges Total	<b>\$57.00</b>

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Thank you for	aiving us the op	portunity to serve	you. We appreciate	your business.	Sales Total Tax Total	\$199.5 \$16.4
	ग्रीक समय मार्ग्स				Pay This Amount	\$215.96
		Center: (800) 8		Arizona L37, ROC24653 Austin TACLA26883C, M		
Austin 5	480/449-7690 512/445-6060 972/888-9500		817/306-6500 713/939-1986 210/656-5511	Dallas TACLA26339C, M Ft. Worth TACLA17611C Houston TACLA904C, M	116723, TEC17889 2, M19925, E231510	
Please	e visit us at: w	www.tdindustrie	es.com	SanAntonio TACLA2030		1
TO VIEW OR PAY ON	LINE GO TO:	http://tdindustri	es.billtrust.com	USE THIS ENROLLME	NT TOKEN:	DPZ LKR MBX

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# District of Kansas Claims Register

## 16-21142 John Q. Hammons Fall 2006, LLC

Judge: Robert D. Berger Office: Kansas City

## **Trustee:**

Creditor: (8621571) TD Industries PO Box 300008 Dallas, TX 75303-0008

## Chapter: 11 Last Date to file claims: Last Date to file (Govt):

Claim No: 775 Original Filed Date: 03/06/2017 Original Entered Date: 03/06/2017 Status: Filed by: CR Entered by: Terri Marshall Modified:

Amount claimed: \$1357.47

History:

 $\frac{\text{Details}}{\underline{1}} \quad \frac{775}{\underline{1}} \quad 03/06/2017 \text{ Claim #775 filed by TD Industries, Amount claimed: $1357.47 (Marshall, Terri )}$ 

*Description:* (775-1) Services Performed (listed debtor name is Embassy Suites Hotel) *Remarks:* (775-1) ECF by Claims Agent 3/6/2017

## **Claims Register Summary**

Case Name: John Q. Hammons Fall 2006, LLC Case Number: 16-21142 Chapter: 11 Date Filed: 06/26/2016 Total Number Of Claims: 1

Total Amount Claimed*	\$1357.47
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		