

Fill in this information to identify the case:

Debtor 1 \_\_\_\_\_  
Debtor 2 \_\_\_\_\_  
(Spouse, if filing)  
United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
Case number \_\_\_\_\_

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BMC GROUP

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? The Waldinger Corporation  
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? [X] No [ ] Yes. From whom? \_\_\_\_\_  
3. Where should notices and payments to the creditor be sent? Rick Blackledge  
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)  
Where should notices to the creditor be sent? Rick Blackledge  
Name: Rick Blackledge  
Address: 8802 S 121st Street, La Vista NE 68128  
City: La Vista, State: NE, ZIP Code: 68128  
Contact phone: 402-679-5105  
Contact email: rick.blackledge@waldinger.com  
Where should payments to the creditor be sent? (if different)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
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? [X] 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? [X] 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: 2 0 9 2

7. How much is the claim? \$ 17,658.00 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, Invoice Attached

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:** Construction Lien filed 10/4/16  
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:** \$ 17,658.00

**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:** \$ 0.00

**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:

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 11/17/2017  
MM / DD / YYYY

  
\_\_\_\_\_  
Signature

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

Name Adam Michael McConnell  
First name Middle name Last name

Title Division Controller

Company The Waldinger Corporation  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 8802 S 121st Street  
Number Street

La Vista NE 68128  
City State ZIP Code

Contact phone 402-537-4761 Email adam.mcconnell@waldinger.com

# APPLICATION AND CERTIFICATE FOR PAYMENT

TO OWNER: John Q Hammons Hotels&Resorts  
 300 John Q Hammons Pkwy  
 Springfield, MO 65806

PROJECT: Embassy - 30 ton Condenser  
 1040 P St  
 Lincoln, NE 68508

APPLICATION NO: 2  
 PERIOD TO: 6/14/2016  
 PROJECT NOS: JC16788  
 202-C01  
 DISTRIBUTION TO:  
 OWNER  
 ARCHITECT  
 CONTRACTOR

FROM CONTRACTOR: The Waldigner Corporation  
 8802 South 121st Street  
 LaVista, NE 68128-5529

VIA ARCHITECT:

CONTRACT DATE: 3/2/2016  
 INVOICE NUMBER: 33032S-002  
 JOB ID: 33032S

CONTRACT FOR: Embassy Suites - Kitchen Condensing Unit

## CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. Continuation sheet is attached.

1. ORIGINAL CONTRACT SUM	\$	44,632.00
2. Net change by Change Orders	\$	0.00
3. CONTRACT SUM TO DATE (Line 1 + 2)	\$	44,632.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on Detail Sheets)	\$	44,632.00

## 5. RETAINAGE

a. 0.00 % of Completed Work (Columns D + E on Detail Page)	\$	0.00
b. 0.00 % of Stored Material (Column F on Detail Page)	\$	0.00
Total Retainage (Line 5a + 5b or Total in Column I of Detail Page)	\$	0.00

6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total) \$ 44,632.00

## 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT

(Line 6 from prior Certificate) \$ 26,974.00

8. CURRENT PAYMENT DUE \$ 17,658.00

## 9. BALANCE TO FINISH, INCLUDING RETAINAGE

(Line 3 less Line 6) \$ 0.00

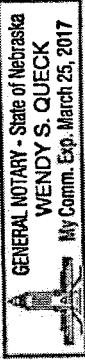
CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	0.00	0.00
Total approved this Month	0.00	0.00
<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>
NET CHANGES by Change Order		0.00

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR: The Waldigner Corporation

By: *[Signature]* Date: 6/14/2016

State of: Nebraska  
 County of: Sarpy  
 Subscribed and sworn to before me this 14 day of June, 2016



Notary Public: *[Signature]*  
 My Commission expires:

## ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED \$ 17,658.00

(Attach explanation if the amount certified differs from the amount applied for. Initial all figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:

By: \_\_\_\_\_ Date: \_\_\_\_\_

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

FINAL WAIVER OF LIEN

Project No.: JC 16788-202  
Address: The Waldinger Corporation  
4226 South 80th Street  
Omaha, NE 68127

Date of Contract: 3-24-16  
Contract No.: \_\_\_\_\_  
Owner: John Q Hammons Hotels  
1040 P St  
Lincoln NE 68508

Date of Final App. For Payment: 06/14/2016  
Scope of Work: Replace Condensing Unit and coil

Balance Due -Final Payment: \$17,658.00  
Final Contract Value: \$44,632.00

The undersigned Contractor hereby acknowledges that when the Final Payment is paid, it represents payment in full for all labor, materials, supplies and equipment furnished by Contractor in connection with the above Project in accordance with its Contract, ("its Work"). In consideration of the amounts and sums previously received, and upon payment of the Final Payment;

- 1 Contractor hereby releases and forever discharges the Owner and its heirs and successors, and assigns, and John Q. Hammons Management LLC and its successors and assigns from any and all claims, demands, liens and claims of lien whatsoever arising out of said Contract and its Work.
- 2 Contractor will, at its sole cost and expense, forever defend, indemnify and hold harmless the Owner and its heirs, successors and assigns and John Q. Hammons Management LLC and its successors and assigns from any and all claims and demands and will defend against and obtain the discharge of any and all liens, claims of lien and notices to withhold payment made by others arising out of or in connection with its Work, including without limitation, those claimed or asserted by an employee, supplier, or Contractor of Contractor.
- 3 Contractor affirms with respect to its Work that:
  - 3.1 All labor employed thereon or in connection therewith and all payroll taxes and charges such as Withholding Taxes, Social Security Taxes, and Workers' Compensation, Disability and Unemployment Taxes and/or Insurance Premiums and all applicable union fringe benefits have been paid in full;
  - 3.2 All materials, tools, equipment, supplies and services furnished and used upon or in connection with its Work have been paid for in full, and all sales, use, excise and similar taxes on or in connection with the same have been fully paid;
  - 3.3 All Work has been properly performed in a good and workmanlike manner and all material furnished is of the specified quality, all in accordance with the plan specifications and the Contract and that all guarantees applicable to its Work are in full force and will remain so for the period required pursuant to the Contract but no less than 1 year from final payment;
  - 3.4 There are no outstanding and/or unpaid payment applications, invoices, retentions, holdbacks, expenses employed in the execution of its Work, backcharges or unbilled work or materials against Owner or John Q. Hammons Management LLC as of the Date of Final Payment Application for Payment;
  - 3.5 Any materials which have been supplied or incorporated in its Work were either taken from Contractor's fully paid or open stock or were fully paid for and supplied as stated on the Final Application for Payment or Invoice.

The person executing this Final Release and Lien Waiver represents that he/she has full authority to execute such Waiver, and it will be binding on its/his/her or their heirs, successors and assigns.

On this 30<sup>th</sup> day of June 2016 before me appeared Darrin Mitchell  
who is the \_\_\_\_\_ of The Waldinger Corporation  
and who did execute this Final Lien Waiver, Controller - Omaha Division

Wendy S. Queck  
Notary Public

By: [Signature]  
Title: Darrin Mitchell  
Controller - Omaha Division

My Commission Expires: 



Recording requested by, and  
when recorded return to:

\_\_\_\_\_  
(Name or Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

Inst # 2016041291 Tue Oct 04 14:33:44 CDT 2016  
Filing Fee: \$16.00  
Lancaster County, NE Assessor/Register of Deeds Office CONSLN  
cbooks  
Pages 2



Above Space for Official Use Only

### CONSTRUCTION LIEN

<b>Contracting Owner with Address:</b> Hammons of Lincoln, LLC 300 John Q. Hammons Parkway Springfield, Mo 65806	<b>Lien Claimant and Address:</b> The Waldinger Corp 8802 South 121st St La Vista, Ne 68128-5529 Phone: 402 Fax:
<b>Property Subject to the Lien:</b> Embassy Suites 1040 P St Lincoln, Ne 68509  <input checked="" type="checkbox"/> Legal Description attached.	<b>Person/Entity with Whom Claimant Contracted (with address):</b> Joe Morrissey/Joe Loeffelbein 300 John Q Hammons Parkway Springfield, Mo 65806

MAL

1. A general description of the services performed and materials furnished:

Install 30 ton condensing unit

2. The contract price or agreed upon estimate: \$44,632.00

3. The principal amount due through 07/14/16 ("due date") is \$ 44,632.00, after deducting just credits and offsets, and including change orders. The total price of the work performed was \$ 44,632.00, less payments of \$ .00.

4. The approximate date claimant's services or materials were last furnished was:

(a) 06/18/16 (date), or

(b) If this time has not yet occurred (claimant has not completed its work), the estimated date of completion is:


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OCT 12 2016

Dated: 10/04/16

The Waldinger Corp  
(Name of Claimant/Co. Furnishing Labor and Material)

Name & Title: Darrin Mitchell - Controller

  
(Signature)

**Notary**

STATE OF NEBRASKA

COUNTY OF Sarpy )SS

The foregoing instrument was acknowledged before me, a Notary Public, on this date:

10-4-16, by Darrin Mitchell  
Controller - Omaha Division (name) as  
\_\_\_\_\_  
(title) of Lien Claimant.

Wendy Queck  
Notary Public



**LEGAL DESCRIPTION**

LINCOLN ORIGINAL, BLOCK 35, Lot 3 - 4, & E1/2  
LOT 9 & LOTS 10-12 & LOTS A-H WALSH PUTNAM  
& BROCKS SUB IN BLOCK 35 & LOTS A-E  
COUNTY CLERKS SUB OF LOTS 5-6 BLOCK 35 &  
LOTS A-F SCHABERG & MENLOVES SUB IN  
BLOCK 35

*LINCOLN  
To Waldinger  
To 03351  
To some*

# District of Kansas Claims Register

[16-21142 John Q. Hammons Fall 2006, LLC](#)

**Judge:** Robert D. Berger

**Chapter:** 11

**Office:** Kansas City

**Last Date to file claims:**

**Trustee:**

**Last Date to file (Govt):**

*Creditor:* (8864364)  
THE WALDINGER  
CORPORATION  
RICK BLACKLEDGE  
8802 S 121ST STREET  
LA VISTA NE, 68128

**Claim No:** 797  
*Original Filed*  
*Date:* 11/21/2017  
*Original Entered*  
*Date:* 11/21/2017

*Status:*  
*Filed by:* CR  
*Entered by:* Terri Marshall  
*Modified:*

Amount claimed: \$17658.00

Secured claimed: \$17658.00

*History:*

[Details](#) [797-1](#) 11/21/2017 Claim #797 filed by THE WALDINGER CORPORATION, Amount claimed: \$17658.00 (Marshall, Terri )

*Description:* (797-1) Services Performed

*Remarks:* (797-1) ECF by Claims Agent 11/21/2017

## 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

<b>Total Amount Claimed*</b>	\$17658.00
<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>	\$17658.00	
<b>Priority</b>		
<b>Administrative</b>		