

Fill in this information to identify the case:

Debtor name: Johna @ Hammons  
United States Bankruptcy Court for the District of Kansas at Kansas City  
Case number (if known): 16-21142

See Appendix A to bar date notice for list of debtors and case numbers.

**RECEIVED**  
**JUN 01 2018**  
**BMC GROUP**

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**

**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, except for administrative expenses under 11 U.S.C. § 503(b)(9).

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?

PR Marketing LLC  
Name of the current creditor (the person or entity to paid for this claim)  
Other name the creditor used with the debtor: ASAP Personnel Services

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?

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

PR Marketing LLC  
Name  
10301 N Rodney Parkham, Ste A3  
Number Street  
Little Rock, Ar 72227  
City State ZIP Code

PR Marketing LLC  
Name  
10301 N Rodney Parkham, Ste 3  
Number Street  
Little Rock, Ar 72227  
City State ZIP Code

Contact phone 501 531 2727  
Contact email crobertson@asapworksforme.com

Contact phone 501 531 2727  
Contact email crobertson@asapworksforme.com

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? \$ 4,158.35. 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 (staffing)

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 all that apply:

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.

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

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?

No

Yes. Indicate the amount of your claim arising from the value of any goods received by the Debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ \_\_\_\_\_

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

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.

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

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.

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 5-21-18  
MM / DD / YYYY

Charles D Robertson  
Signature

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

Name Charles D Robertson  
First name Middle name Last name

Title President

Company PR Marketing LLC  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 10301 N Rodney Lacham Ste A-3  
Number Street

Little Rock, Ar 72227  
City State ZIP Code

Contact phone 501-537-2727 Email crobertson@asapworksforme.com



# INVOICE

Customer ID	PO Number
881	

Invoice Date	Invoice Number	WK Ending
06/17/2016	62454	06/11/2016

EMBASSY SUITES HOT SPRINGS  
 ATTN: KURT SCHATZL  
 400 CONVENTION  
 HOT SPRINGS NATIONAL, AR 71901-

EMBASSY SUITES HOT SPRINGS  
 ATTN: KURT SCHATZL  
 400 CONVENTION  
 HOT SPRINGS NATIONAL, AR 71901

Reference	Description				Amount
	COPELAND, FRANK	R	37.17	11.71	435.26
	JENKINS, VICKIE M.	R	40.00	11.71	468.40
	JENKINS, VICKIE M.	OT	0.75	17.57	13.18
Page 1 of 1					916.84

*Please return this portion with your payment. Disregard this notice if payment has been made.*

TERMS: Due upon receipt. Pay this amount within 15.00 days or a 1.50% charge will be added to your account.

Customer ID	PO Number
881	

Invoice Date	Invoice Number	WK Ending
06/17/2016	62454	06/11/2016

**REMIT TO:**  
 ASAP  
 Charles Robertson  
 ASAP PERSONNEL SERVICES  
 P O Box 2139  
 CONWAY, AR 72003  
 501-537-2727 Phone  
 501-537-2733 Fax

<b>INVOICE TOTAL</b>	<b>916.84</b>
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# INVOICE

Customer ID	PO Number
881	

Invoice Date	Invoice Number	WK Ending
06/17/2016	62455	06/11/2016

EMBASSY SUITES HOT SPRINGS  
 ATTN: KURT SCHATZL  
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 HOT SPRINGS NATIONAL, AR 71901-

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 ATTN: KURT SCHATZL  
 400 CONVENTION  
 HOT SPRINGS NATIONAL, AR 71901

Reference	Description	Amount
	BARRON, ANTASIA M. R 11.73 11.71	137.36
	HAMILTON, ALICIA S. R 6.15 11.71	72.02
	JOHNSON, LINDSEY N. R 15.08 11.71	176.59
	MARSILLETT, ASHLEY R 30.47 11.71	356.80
meal	MARSILLETT, ASHLEY OPY 1.00 -16.00	-16.00
	NEVELS, FREEDOM N. R 16.73 11.71	195.91
incentive	NEVELS, FREEDOM N. OPY 1.00 0.73	0.73
meal	NEVELS, FREEDOM N. OPY 1.00 -16.00	-16.00
	ROBINSON, JONNIE M. R 19.27 11.71	225.65
	SAFEE-ULLAH, AJEENAH L. R 4.67 11.71	54.69
meal	SAFEE-ULLAH, AJEENAH L. OPY 1.00 -16.00	-16.00
Page 1 of 1		1171.75

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881	

Invoice Date	Invoice Number	WK Ending
06/17/2016	62455	06/11/2016

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 ASAP  
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 P O Box 2139  
 CONWAY, AR 72003  
 501-537-2727 Phone  
 501-537-2733 Fax

INVOICE TOTAL	1171.75
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# INVOICE

Customer ID	PO Number
881	

Invoice Date	Invoice Number	WK Ending
06/24/2016	62530	06/18/2016

EMBASSY SUITES HOT SPRINGS  
 ATTN: KURT SCHATZL  
 400 CONVENTION  
 HOT SPRINGS NATIONAL, AR 71901-

EMBASSY SUITES HOT SPRINGS  
 ATTN: KURT SCHATZL  
 400 CONVENTION  
 HOT SPRINGS NATIONAL, AR 71901

Reference	Description	R			Amount
	COPELAND, FRANK	R	37.55	11.71	439.71
	JENKINS, VICKIE M.	R	37.75	11.71	442.05
Page 1 of 1					881.76

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Customer ID	PO Number
881	

Invoice Date	Invoice Number	WK Ending
06/24/2016	62530	06/18/2016

**REMIT TO:**  
 ASAP  
 Charles Robertson  
 ASAP PERSONNEL SERVICES  
 P O Box 2139  
 CONWAY, AR 72003  
 501-537-2727 Phone  
 501-537-2733 Fax

INVOICE TOTAL	881.76
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# INVOICE

Customer ID	PO Number
881	

Invoice Date	Invoice Number	Wk Ending
06/24/2016	62531	06/18/2016

EMBASSY SUITES HOT SPRINGS  
 ATTN: KURT SCHATZL  
 400 CONVENTION  
 HOT SPRINGS NATIONAL, AR 71901-

EMBASSY SUITES HOT SPRINGS  
 ATTN: KURT SCHATZL  
 400 CONVENTION  
 HOT SPRINGS NATIONAL, AR 71901

Reference	Description				Amount
	JOHNSON, LINDSEY N.	R	15.45	11.71	180.92
	MARSILLET, ASHLEY	R	28.38	11.71	332.33
meal	MARSILLET, ASHLEY	OPY	1.00	-16.00	-16.00
	NEVELS, FREEDOM N.	R	35.87	11.71	420.04
meal	NEVELS, FREEDOM N.	OPY	1.00	-16.00	-16.00
	POLAND, REBECCA J.	R	6.43	11.71	75.30
	ROBINSON, JONNIE M.	R	5.65	11.71	66.16
	STUART, TWILLA L.	R	13.77	11.71	161.25
meal	STUART, TWILLA L.	OPY	1.00	-16.00	-16.00
Page	1 of 1				1188.00

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Customer ID	PO Number
881	

Invoice Date	Invoice Number	Wk Ending
06/24/2016	62531	06/18/2016

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ASAP  
 Charles Robertson  
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 P O Box 2139  
 CONWAY, AR 72003  
 501-537-2727 Phone  
 501-537-2733 Fax

INVOICE TOTAL	1188.00
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# 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:* (8998611)      **Claim No:** 804      *Status:*  
PR MARKETING LLC      *Original Filed*      *Filed by:* CR  
10301 N RODNEY PARHAM      *Date:* 06/01/2018      *Entered by:* Terri Marshall  
RD, STE A3      *Original Entered*      *Modified:*  
LITTLE ROCK, AR 72227      *Date:* 06/01/2018

Amount claimed: \$4158.35

*History:*

[Details](#)    [804-](#) 06/01/2018 Claim #804 filed by PR MARKETING LLC, Amount claimed: \$4158.35 (Marshall, Terri)

*Description:* (804-1) Services performed (Staffing)

*Remarks:* (804-1) ECF by Claims Agent 6/1/18

## 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>	\$4158.35
<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>		