

Fill in this information to identify the case:

Debtor 1 Courtyard by Marriott (La Vista, NE)
Debtor 2 _____
(Spouse, if filing)
United States Bankruptcy Court for the: District of Kansas
Case number 16-21140 21142

FILED
Kansas City, KS
JUL 18 2016

Clerk
U.S. Bankruptcy Court

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? Insight Direct USA, Inc.
Name of the current creditor (the person or entity to be paid for this claim)
Other names the creditor used with the debtor Insight

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)
Name <u>Michael L. Walker</u>	Name _____
Number Street <u>6820 S. HARL Ave.</u>	Number Street _____
City State ZIP Code <u>Tempe AZ 85283</u>	City State ZIP Code _____
Contact phone <u>(480) 333-3425</u>	Contact phone _____
Contact email <u>swest2@insight.com</u>	Contact email _____

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: 0 5 1 3

7. How much is the claim? \$ 2,222.85. 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 and services 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:

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 07 12 2016
MM / DD / YYYY

Michael L. Walker
Signature

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

Name Michael L. Walker
First name Middle name Last name

Title Assistant Secretary

Company Insight Direct USA, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 6820 S. HARL Ave.
Number Street

Tempe AZ 85283
City State ZIP Code

Contact phone (480) 333-3425 Email swest2@insight.com



Ship To 10480513

Page 1 of 1

OMALV - Courtyard By Marriott
6524G
Kyle Steenson - GPOS/JC16310-401 - GPOS
12560 WESTPORT PKWY
LA VISTA NE 68128-5610

Invoice

Invoice No. 910628680	Date 16-JUN-2016	Sales Order no. 319939433	Account No. 10480513	Payment Terms Net 45 Days	Due Date 31-JUL-2016	Sales Rep Name Theodore Steinker	Account Clerk Roxanne Josephson
PO No. JC16310-401 - GPOS	PO Release No.		Contract No.	State Contract No.		Ship Via Other/Ground	
FEIN: 36-3948996	BN: 866766850 RT	Service Order No.		Service Rep Name		Original Invoice No.	

Register for Electronic Invoicing at www.insight.com/einvoice

Material	Material Description	Qty	Unit Price	Ext. Price
T A3L791-15-BLK	Belkin patch cable - 15 ft - black - B2B	4	2.65	10.60
T A3L791-25-BLK	Belkin patch cable - 25 ft - black - B2B	1	3.36	3.36
* 99044MSR	KEY INJECTION	4	0.00	0.00
* 97100368-MI	MI-NEW MAGTEK MARRIOTT BOX	4	0.00	0.00

Subtotal 13.96
Ttl Freight Charge 2.04
TAX 1.20
Total Amount Due 17.20
Currency USD

(T) Denotes taxable item * Denotes non-shippable item

PC User Name(s)-If shared or multiple n/a
PCs on order
Customer Reference Number JC16310-401

THANK YOU FOR YOUR ORDER.
FOR ALL INQUIRIES PLEASE CALL 800-934-4477.
The Terms and Conditions and Return Policy and Procedures set forth on
<https://www.insight.com/us/en/terms-conditions/terms-of-sale-products.html>
are specifically incorporated herein.



Please remit checks to:
Insight Direct USA, Inc.
PO BOX 731069
Dallas, TX 75373-1069

Ship To 10480513

OMALV - Courtyard By Marriott
6524G
Kyle Steenson - GPOS/JC16310-401 - GPOS
12560 WESTPORT PKWY
LA VISTA NE 68128-5610

ACCOUNT NO	10480513
INVOICE DATE	16-JUN-2016
INVOICE NUMBER	910628680
BALANCE DUE	17.20
AMOUNT PAID	
CURRENCY	USD

Send address changes to addresschange@insight.com

For proper credit, please return this portion with payment.

Bill to: 40106958
John Q Hammons Hotels
David McDermott - GPOS/JC16310-401 - GPO
300 S JOHN Q HAMMONS PKWY STE 800
SPRINGFIELD MO 65806-2550

Please remit electronically to:
Insight Direct USA, Inc
c/o JPMorgan Chase
Account: 816338339
Swift code: chasus33
Wire ABA: 021000021
ACH ABA: 124001545

00104805138091062868000000001720049700000000000000



Ship To 10480513

Page 1 of 2

OMALV - Courtyard By Marriott
6524G
Kyle Steenson - GPOS/JC16310-401 - GPOS
12560 WESTPORT PKWY
LA VISTA NE 68128-5610

Invoice

Invoice No. 910634932	Date 17-JUN-2016	Sales Order no. 319939433	Account No. 10480513	Payment Terms Net 45 Days	Due Date 01-AUG-2016	Sales Rep Name Theodore Steinker	Account Clerk Roxanne Josephson
PO No. JC16310-401 - GPOS		PO Release No.		Contract No.	State Contract No.	Ship Via United Parcel Services/Ground	
FEIN: 36-3948996		BN: 866766850 RT	Service Order No.	Service Rep Name	Original Invoice No.		

Register for Electronic Invoicing at www.insight.com/einvoice

Material	Material Description	Qty	Unit Price	Ext. Price
ADVINTN	CONFIGURATION ORDER			
T J9782A#ABA	HPE 2530-24 Switch - switch - 24 ports - managed - desktop, rack-mountable, wall-mountable Serial #:CN63FPF345;CN63FPF277	2	263.36	526.72
*T 95-SWITCH-SMALL	4U HW BUILD IOS UPDATE CONFIG FILE LOAD	2	50.00	100.00
T 30056015-KD	MARRIOTT - DYNAPRO EMV USB, NFC, SIG CAP	4	349.13	1,396.52

Subtotal 2,023.24
Ttl Freight Charge 28.53
TAX 153.88
Total Amount Due 2,205.65
Currency USD

(T) Denotes taxable item * Denotes non-shippable item

PC User Name(s)-If shared or multiple n/a
PCs on order
Customer Reference Number JC16310-401



Please remit checks to:
Insight Direct USA, Inc.
PO BOX 731069
Dallas, TX 75373-1069

Ship To 10480513

OMALV - Courtyard By Marriott
6524G
Kyle Steenson - GPOS/JC16310-401 - GPOS
12560 WESTPORT PKWY
LA VISTA NE 68128-5610

Send address changes to addresschange@insight.com

For proper credit, please return this portion with payment.

ACCOUNT NO	10480513
INVOICE DATE	17-JUN-2016
INVOICE NUMBER	910634932
BALANCE DUE	2,205.65
AMOUNT PAID	
CURRENCY	USD

Bill to: 40106958
John Q Hammons Hotels
David McDermott - GPOS/JC16310-401 - GPO
300 S JOHN Q HAMMONS PKWY STE 800
SPRINGFIELD MO 65806-2550

Please remit electronically to:
Insight Direct USA, Inc
c/o JPMorgan Chase
Account: 816338339
Swift code: chasus33
Wire ABA: 021000021
ACH ABA: 124001545

001048051380910634932300002205650497000000000000000



Ship To 10480513

Page 2 of 2

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6524G
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Invoice

Invoice No. 910634932	Date 17-JUN-2016	Sales Order no. 319939433	Account No. 10480513	Payment Terms Net 45 Days	Due Date 01-AUG-2016	Sales Rep Name Theodore Steinker	Account Clerk Roxanne Josephson
PO No. JC16310-401 - GPOS		PO Release No.		Contract No.	State Contract No.	Ship Via United Parcel Services/Ground	
FEIN: 36-3948996		BN: 866766850 RT	Service Order No.	Service Rep Name	Original Invoice No.		

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Material	Material Description	Qty	Unit Price	Ext. Price
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THANK YOU FOR YOUR ORDER.
FOR ALL INQUIRIES PLEASE CALL 800-934-4477.
The Terms and Conditions and Return Policy and Procedures set forth on
<https://www.insight.com/us/en/terms-conditions/terms-of-sale-products.html>
are specifically incorporated herein.

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):**

<i>Creditor:</i> (8533210) Insight Direct USA, Inc. Michael L. Walker 6820 S Harl Ave Tempe, AZ 85283	Claim No: 27 <i>Original Filed</i> <i>Date:</i> 08/07/2016 <i>Original Entered</i> <i>Date:</i> 08/07/2016	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> Terri Marshall <i>Modified:</i>
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Amount claimed: \$2222.85		
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History:
[Details](#) [27-1](#) 08/07/2016 Claim #27 filed by Insight Direct USA, Inc., Amount claimed: \$2222.85 (Marshall, Terri)

Description: (27-1) Goods Sold/Services Performed (Courtyard La Vista NE)
Remarks: (27-1) KSB Filed 7/18/16; ECF by Claims Agent 8/7/2016

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*	\$2222.85
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		