Fill in this i	Fill in this information to identify the case:							
Debtor 1	Bloomington-Normal Marriott							
Debtor 2 (Spouse, if filing	g)							
United States	Bankruptcy Court for the: District of Kansas							
Case number	16-21140 21140							



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.

1.	Who is the current creditor?	Name of the cur	ct USA, Inc. rent creditor (the person or entity creditor used with the debtor	y to be paid for this cl					
2.	Has this claim been acquired from someone else?	☑ No ☐ Yes. From	n whom?			- 45.5			
3.	Where should notices and payments to the creditor be sent?	Where should	i notices to the creditor be	sent?	Where shou different)	ld payments to the creditor	ZIP Code		
	Federal Rule of	Name			Name				
	Bankruptcy Procedure (FRBP) 2002(g)	6820 S. HA	ARL Ave.						
	(* * * * * * * * * * * * * * * * * * *	Number	Street		Number	Street			
		Tempe	AZ	85283					
		City	State	ZIP Code	City	State	ZIP Code		
		Contact phone	(480) 333-3425	_	Contact phone				
		Contact email	swest2@insight.com	<u></u>	Contact email				
		Uniform claim id	entifier for electronic payments i	in chapter 13 (if you u	se one):				
٠.	Does this claim amend one already filed?	Mo No ☐ Yes. Clair	n number on court claims re	egistry (if known) _		Filed on MM / Di	D / YYYY		
j.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who	made the earlier filing?		· · · · · · · · · · · · · · · · · · ·				

icial Form 410
Proof of Claim
Case 16-21142
Claim 28-1
Filed 08/07/16
Desc Main Doctor Page 1 c

•	ant 2. Give informati	on 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: 1 2 0 3
7.	How much is the claim?	\$
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	⊠ No
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.
11	. Is this claim subject to a	Ø No
	right of setoff?	☐ Yes. Identify the property:

12. Is all or part of the claim entitled to priority under	☑ No								
11 U.S.C. § 507(a)?	Yes. Check	one:			Amount entitled to priority				
A claim may be partly priority and partly	Domest 11 U.S.	\$							
nonpriority. For example, in some categories, the law limits the amount entitled to priority.		2,850* of deposits toward purch II, family, or household use. 11		ty or services for	\$				
,	bankrup	salaries, or commissions (up to toty petition is filed or the debto C. § 507(a)(4).			\$				
	☐ Taxes o	r penalties owed to governmen	tal units. 11 U.S.C. § 507(a)(8).	\$				
	☐ Contribu	utions to an employee benefit p	an. 11 U.S.C. § 507(a)(5).		\$				
	Other. S	Specify subsection of 11 U.S.C.	§ 507(a)() that applies.		\$				
	* Amounts a	are subject to adjustment on 4/01/19	and every 3 years after that for ca	ases begun on or aft	er the date of adjustment.				
Part 3: Sign Below									
January Sign Below									
The person completing this proof of claim must	Check the appro	priate box:							
sign and date it. FRBP 9011(b).	l am the cre								
• •		I am the creditor's attorney or authorized agent.							
If you file this claim electronically, FRBP 5005(a)(2) authorizes courts	□ 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.								
to establish local rules specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> 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,	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. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.								
3571.	Executed on dat	e 0112 2016							
	<u>Much</u> Signature	al L. Was	lker						
	Print the name	of the person who is complet	ing and signing this claim:						
	Name	Michael L. Walker First name	Middle name	Last name					
	Title	Assistant Secretary							
	Company	Insight Direct USA, Inc	the company if the authorized agr	ent is a servicer.					
		• •	•						
	Address	6820 S. HARL Ave.							
		Tempe	AZ	85283					
		City	State	ZIP Code					
	Contact phone	(480) 333-3425	Email	swest2@	Dinsight.com				
	Contact priorio	,							

BMIMC - Bloomington-Normal Marriott Steve Meilinger - GPOS/JC16746-401 201 BROADWAY NORMAL IL 61761-3200



Invoice

Invoice No. 910610800	Date 13-JUN-20		Account No. 10511203	_	nt Terms 5 Days	Due Date 28-JUL-2016	Sales Rep Name Theodore Steinker	Account Clerk
PO No. JC16746-401		PO Release N	lo.	Contract S19704		tate Contract No.	Ship Via Ground/ESD	
FEIN: 36-39489	996	BN: 866766850 RT	Service Orde	er No.	Servic	e Rep Name	Original Inv	oice No.

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

Material	Material Description	Qty	Unit Price	Ext. Price
*T R18-04301-SLP	Microsoft Windows Server 2012 - License - 1 device CAL - Select, Select Plus - Single Language Media Type: ESD	8	19.20	153.60
T 21040108	MagTek USB Swipe Reader with Keyboard Emulation - magnetic card reader - USB Serial #:X05478N	1	43.37	43.37
	Subtotal			196 97

Subtotal	190.97
Ttl Freight Charge	14.62
TAX	15.27
Total Amount Due	226.86
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

JC16746-401

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

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/JC16746-401 300 S JOHN Q HAMMONS PKWY STE 800 SPRINGFIELD MO 65806-2550 Ship To 10511203

BMIMC - Bloomington-Normal Marriott Steve Meilinger - GPOS/JC16746-401 201 BROADWAY NORMAL IL 61761-3200

ACCOUNT NO	10511203
INVOICE DATE	13-JUN-2016
INVOICE NUMBER	910610800
BALANCE DUE	226.86
AMOUNT PAID	
CURRENCY	USD

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

Wire ABA: 021000021 ACH ABA: 124001545

Ship To 10511203

Page 1 of 1

BMIMC - Bloomington-Normal Marriott Steve Meilinger - GPOS/JC16746-401 201 BROADWAY NORMAL IL 61761-3200

Invoice

Invoice No. 910633705	Date 17-JUN-201	Sales Order no. 319939212	Account No. 10511203	Payment Net 45		Due Date 01-AUG-2016	Sales Rep Name Theodore Steinker	Account Clerk
PO No. JC16746-401	1	PO Release N	lo.	Contract N S1970435			Ship Ground	
FEIN: 36-39489	996	BN: 866766850 RT	Service Orde	er No. Service Rep Name Origin		Original Inve	oice No.	

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

Material	Material Description	Qty	Unit Price	Ext. Price
*T KV3-00367-SLP	Windows Enterprise - Upgrade & software assurance - 1 license - Select Plus - Single Language Media Type: ESD	1	251.50	251.50
*T 021-10559-SLP	Microsoft Office Standard 2016 - License - 1 PC - Select Plus - Win - Single Language Media Type: ESD	1	264.71	264.71
	Subtotal		251.50	516.21

TAX 40.01
Total Amount Due 556.22
Currency USD

PC User Name(s)-If shared or multiple n/a

PCs on order Customer Reference Number

JC16746-401

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are specifically incorporated herein.



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For proper credit, please return this portion with payment.

Bill to: 40106958

John Q Hammons Hotels David McDermott - GPOS/JC16746-401 300 S JOHN Q HAMMONS PKWY STE 800 SPRINGFIELD MO 65806-2550

Ship To 10511203

BMIMC - Bloomington-Normal Marriott Steve Metlinger - GPOS/JC16746-401 201 BROADWAY NORMAL II 61761-3200

NORMAL IL 61761-3200

ACCOUNT NO	10511203
INVOICE DATE	17-JUN-2016
INVOICE NUMBER	910633705
BALANCE DUE	556.22
AMOUNT PAID	
CURRENCY	USD

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

Wire ABA: 021000021 ACH ABA: 124001545

⁽T) Denotes taxable item

Denotes non-shippable item

BMIMC - Bloomington-Normal Marriott Steve Meilinger - GPOS/JC16746-401 201 BROADWAY NORMAL IL 61761-3200



Invoice

Invoice No. 910641804	Da 20-JUN		Sales Order no. 319939212	Account No. 10511203	_	nt Terms 5 Days	s	Due Date 04-AUG-2016	Sales Rep Name Theodore Steinker		Account Clerk
PO No. JC16746-401			PO Release N	lo.	Contract No. State Contract N		ate Contract No.	. Ship Via United Parcel Services/Gro			
FEIN: 36-39489	96	BN:	866766850 RT	Service Orde	er No.	Sen	vice	Rep Name		Original Invo	oice No.

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

Material ADVINTN-COI		Material Description		Unit Price	Ext. Price
		CONFIGURATION ORDER WITH COI PARTS			
•	PROFILE-2	LODGING PROFILE *FOR MARRIOTT*	1	0.00	0.00
•	INST-MIW7IMAGE	MICROSOFT WIN7 32-BIT IMAGE LOAD MARRIOTT INTERNATIONAL	1	0.00	0.00
•	INST-OFFICE10STD	INSTALL - MICROSOFT OFFICE 2010 STANDARD *MARRIOTT*	1	0.00	0.00
Т	10FLS0JG00-MI	MARRIOTT INTERNATIONAL DESKTOP TC M900 I56500T 8G 256 SSD W10DG Serial #:10FLS0JG00MJ03ZG48	1	632.00	632.00
•	95-MAR	IL LAB CONFIG / INSTALL SERVICE PACK MARRIOTT	1	60.00	60.00
AD	VINTN	CONFIGURATION ORDER			
Т	J9782A#ABA	HPE 2530-24 Switch - switch - 24 ports - managed - desktop, rack-mountable, wall-mountable Serial #:CN63FPF3Q7;CN63FPF3G5	2	263.36	526.72
•	95-SWITCH-SMALL	4U HW BUILD IOS UPDATE CONFIG FILE LOAD	2	50.00	100.00



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

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/JC16746-401 300 S JOHN Q HAMMONS PKWY STE 800 SPRINGFIELD MO 65806-2550

Ship To 10511203

BMIMC - Bloomington-Normal Marriott Steve Meilinger - GPOS/JC16746-401 201 BROADWAY

NORMAL IL 61761-3200

ACCOUNT NO	10511203
INVOICE DATE	20-JUN-2016
INVOICE NUMBER	910641804
BALANCE DUE	1,423.44
AMOUNT PAID	
CURRENCY	USD

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

Wire ABA: 021000021 ACH ABA: 124001545



BMIMC - Bloomington-Normal Marriott Steve Meilinger - GPOS/JC16746-401 201 BROADWAY NORMAL IL 61761-3200

Invoice

Invoice No. 910641804	Date 20-JUN-2016	Sales Order no. 319939212	Account No. 10511203	Paymen Net 45		Due Date 04-AUG-2016	Sales Rep Name Theodore Steinker	Account Clerk
PO No. JC16746-40	1	PO Release N	lo.	Contract N	lo. Si	ate Contract No.	Ship United Parcel S	Via ervices/Ground
FEIN: 36-3948	996 BN	: 866766850 RT	Service Orde	er No.	Service	e Rep Name	Original Inv	oice No.

	Material	Material Description	Qty	Unit Price	Ext. Price
_			Subtotal		1,318.72
			Ttl Freight Charge		14.92
			TAX		89.80
			Total Amount Due		1,423.44
			Currency		USD

⁽T) Denotes taxable item

PC User Name(s)-If shared or multiple n/a

PCs on order Customer Reference Number

JC16746-401

THANK YOU FOR YOUR ORDER. FOR ALL INQUIRIES PLEASE CALL 800-934-4477.

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^{*} Denotes non-shippable item

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:

Last Date to file (Govt):

Creditor: (8533210) Insight Direct USA, Inc. Michael L. Walker 6820 S Harl Ave Tempe, AZ 85283 Claim No: 28 Original Filed Date: 08/07/2016 Original Entered Date: 08/07/2016

Status: Filed by: CR

Date: 08/07/2016 Entered by: Terri Marshall

Modified:

Amount claimed: \$2206.52

History:

Details 28-1 08/07/2016 Claim #28 filed by Insight Direct USA, Inc., Amount claimed: \$2206.52 (Marshall, Terri)

Description: (28-1) Goods Sold/Services Performed (Bloomington-Normal) Remarks: (28-1) 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*	\$2206.52
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		