

Fill in this information to identify the case:

Debtor name: Hammons of South Carolina, LLC

United States Bankruptcy Court for the District of Kansas at Kansas City

Case number (if known): 16-21160

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

RECEIVED

DEC 07 2016

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

04/16

Official Form 410

Proof of Claim

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?
South Carolina Electric & Gas Company (SCE&G)
 Name of the current creditor (the person or entity to paid for this claim)
 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?
 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

<p>Where should notices to the creditor be sent?</p> <p><u>SCE&G</u> Name</p> <p><u>220 Operation Way, MC C222</u> Number Street</p> <p><u>Cayce SC 29033</u> City State ZIP Code</p> <p>Contact phone <u>803-217-9678</u></p> <p>Contact email <u>janet.reyes@scana.com</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>	<p>Where should payments to the creditor be sent? (if different)</p> <p><u>same</u> Name</p> <p>_____ Number Street</p> <p>_____ City State ZIP Code</p> <p>Contact phone _____</p> <p>Contact email _____</p>
--	---

4. Does this claim amend one already filed?
 No
 Yes. Claim number on court claims registry (if known) 41-1 Filed on 8/10/2016
 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: 9821

7. How much is the claim? \$ 23,061.32. 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.
pre petition Utilities

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
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> 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.

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.

\$ 2007.73

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 12/5/2016
MM/DD/YYYY

Janet C. Reyes
Signature

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

Name Janet C. Reyes
First name Middle name Last name

Title Bankruptcy Analyst

Company SCEDG
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 220 Operation Way, Mail Code C222
Number Street

Cayce SC 29033
City State ZIP Code

Contact phone 803-217-9678 Email janet.reyes@scana.com

John Q. Hammons Fall 2006 LLC
Chapter 11 Bankruptcy Filing June 26, 2016
District of Kansas Case #16-21142

South Carolina Electric & Gas Company (SCE&G)						
Account Name	Pre-Petition Account	Address	Pre-Petition Debt	503(b)(9)	Tax ID	Rate
Hammons of SC LLC	x-xxx-xxxx-2418	5035 International Blvd North Charleston, SC 29418-5963	\$23,061.32	\$2,007.73	20-0579821	20 33
SCE&G Totals:			\$23,061.32	\$2,007.73		



SERVICE FOR
 HAMMONS OF SC LLC
 5035 INTERNATIONAL BLVD
 NORTH CHARLESTON SC 29418-5883

ACCOUNT NUMBER
 [REDACTED] 2418
 DATE DUE
 Jul 6 2016

Page 1 of 3
 AMOUNT DUE
 \$23,061.32

www.sceg.com

BUSINESS CUSTOMER SERVICE
 24 HOURS A DAY
 1-800-251-7234, toll-free
 EMERGENCY SERVICE - 24 HOURS A DAY
 Gas leaks, downed lines or power outages
 1-888-333-4465, toll-free
 JUNE STATEMENT GENERATED ON:
 Jun 28 2016

FINAL BILL

ACCOUNT SUMMARY

Previous Bill Amount \$ 19,416.66
 Payment Received 06/22/16 THANK YOU -19,416.66
 Current Charges 23,061.32

Amount Due on 7/6/16 \$23,061.32

A late payment charge of 1.5% may be added to any balance remaining 25 days after billing.

SUMMARY OF CURRENT CHARGES

Electric Charges \$19,748.57
 Gas Charges 3,312.75
 Total Current Charges \$23,061.32

Posting Summary	SERVICE FOR 5035 INTERNATIONAL BLVD			
	ACCOUNT NUMBER	STATEMENT DATE	AMOUNT DUE	DATE DUE
	[REDACTED] 2418	6/28/16	\$23,061.32	7/26/16

PLEASE KEEP THIS PORTION FOR YOUR RECORDS.



ACCOUNT NUMBER
 [REDACTED] 2418
 DATE OF BANK DRAFT
 Jul 6 2016
 AMOUNT TO BE DRAFTED
 \$23,061.32

[REDACTED] 16 BD 180316852 EP

HAMMONS OF SC LLC
 DBA RESIDENCE INN CHARLESTON AIRPORT
 MAIL CODE C222
 220 OPERATION WAY
 WEST COLUMBIA SC 29033

Thank you for using SCE&G's Electronic Banking Service.
 Your bank draft is set up for:
 Fifth Third Bank





CUSTOMER SERVICE
1-800-251-7234
STATEMENT DATE
Jun 28 2016

ACCOUNT NUMBER
██████████ 2418
DATE DUE
Jul 6 2016

Page 2 of 3
AMOUNT DUE
\$23,061.32

www.sceg.com

Payment Options

By Mail: Pay by check or money order in the enclosed envelope.

Online: Visit scceg.com to pay directly from your bank account or credit card.

By Phone: Call 1-800-450-9160, toll-free, 24 hours a day to pay using your credit card, debit card or directly from your bank account. There is a fee of \$3.50 per transaction that BillMatrix receives for providing this service. Additional limitations may apply.

Business Office :

MARK CLARK OFFICE, 4481 LEEDS PLACE WEST, CHARLESTON HEIGHTS SC 29405

Authorized Payment Agencies: Visit an authorized payment location near you to pay in person. There is no fee associated with service at an authorized payment location.

PIGGLY WIGGLY #182, 8780 RIVERS AVE, NORTH CHARLESTON SC 29408

ALL SC AND NC WALMARTS

Unauthorized Payment Agencies: Additional payment centers may exist in your area that are not SCE&G authorized payment locations. While these unauthorized locations may accept your SCE&G payment, they will charge a fee for doing so, and your payment will be delayed in reaching SCE&G.

CURRENT CHARGES

Electric Charges

RATE PLAN
020 - Medium General Service

METER NO.	BILLING PERIOD	DAYS	CURRENT	PREVIOUS	CONSTANT	KWH	KW	KVA
002169723	06/24/16-06/24/16	31	85543	81089	40	178,160	0	0
002169723	06/24/16-06/26/16	2	85891	85543	40	13,920	378	400

Bill Demand of 400 kVA is maximum measured peak.

Basic Facilities Charge	205.00
First 75,000 kWh X \$ 0.053230	3,992.25
Next 117,080 kWh X \$ 0.048880	5,722.87
400 kVA X \$ 18.950000	7,580.00
Renewable Energy Resources	1.27
Franchise Fee 4.00% paid to the City of North Charleston	700.06
State Sales Tax at 8.50 %	1,547.12
Total Electric Charges	\$19,748.57

Gas Charges

RATE PLAN
033 - Medium General Svc

BILLING PERIOD	DAYS	CURRENT	PREVIOUS	P-COMP	USAGE(CCF)	BTU FACTOR	THERMS
METER NO. 000164879							
5/24/16 - 6/24/16	31	(6189	- 3763)	X 1.33741	= 3,245		
METER NO. 000164879							
6/24/16 - 6/26/16	2	(6398	- 6242)	X 1.33741	= 209		
TOTAL USAGE					3,454	X 1.0280	= 3,551

Basic Facilities Charge	28.13
Base - 3,551 Therms X \$ 0.818830	2,907.67
Franchise Fee 4.00% paid to the City of North Charleston	117.43
State Sales Tax at 8.50 %	259.52
Total Gas Charges	\$3,312.75



CUSTOMER SERVICE
1-800-251-7234
STATEMENT DATE
Jun 28 2016

ACCOUNT NUMBER
[REDACTED] 2418
DATE DUE
Jul 6 2016

Page 3 of 3
AMOUNT DUE
\$23,061.32

www.sceg.com

Thank you for being our customer. This is your final bill with us. Please contact your SCE&G office if we can help in meeting any of your future energy needs.

Electronic check conversion. When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.



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: 12/23/2016

Trustee:

Last Date to file (Govt):

Creditor: (8535260)
South Carolina Electric & Gas
Company ("SCE&G")
220 Operation Way, MC 222
Cayce, SC 29033

Claim No: 41
Original Filed
Date: 08/10/2016
Original Entered
Date: 08/10/2016
Last Amendment
Filed: 12/08/2016
Last Amendment
Entered: 12/08/2016

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

Amount claimed: \$23061.32

Priority claimed: \$2007.73

History:

[Details](#) [41-1](#) 08/10/2016 Claim #41 filed by South Carolina Electric & Gas Company ("SCE&G"), Amount claimed: \$23061.32 (Lawson, Patricia)

[Details](#) [41-2](#) 12/08/2016 Amended Claim #41 filed by South Carolina Electric & Gas Company ("SCE&G"), Amount claimed: \$23061.32 (Marshall, Terri)

Description: (41-1) Pre-petition utilities
(41-2) Services Performed

Remarks: (41-2) amends claim 41, filed in Hammons of South Carolina LLC (16-21160)

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*	\$23061.32
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	\$2007.73	
Administrative		

Fill in this information to identify the case:

Debtor 1 John Q. Hammons Fall 2006, LLC

Debtor 2 dba Hammons of SC LLC
(Spouse, if filing)

United States Bankruptcy Court for the: District of Kansas

Case number 16-21142

Official Form 410

Proof of Claim

12/15

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?	<u>South Carolina Electric & Gas Company ("SCE&G")</u> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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? <u>SCANA Services, Inc.</u> Name <u>220 Operation Way, Mail Code C222</u> Number Street <u>Cayce SC 29033</u> City State ZIP Code Contact phone <u>(803) 217-8997</u> Contact email <u>Patricia.Lawson@</u>	Where should payments to the creditor be sent? (if different) _____ Name _____ Number Street _____ 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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: 9 8 2 1

7. How much is the claim? \$ 23,061.32. 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.
Pre-petition utilities

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

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 \$2,775* 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 \$12,475*) 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 4/01/16 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 08/09/2016
MM / DD / YYYY

/s/ Patricia L. Lawson

Signature

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

Name Patricia Lynne Lawson
First name Middle name Last name

Title Senior Paralegal

Company SCANA Services, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 220 Operation Way, MC 222
Number Street

Cayce, SC 29033
City State ZIP Code

Contact phone (803) 217-8997 Email Patricia.Lawson@scana.com

John Q. Hammons Fall 2006 LLC
Chapter 11 Bankruptcy Filing June 26, 2016
District of Kansas Case #16-21142

South Carolina Electric & Gas Company (SCE&G)					
Account Name	Pre-Petition Account	Address	Pre-Petition Debt	Tax ID	Rate
Hammons of SC LLC	x-xxx-xxxx-2418	5035 International Blvd North Charleston, SC 29418-5963	\$23,061.32	20-0579821	20 33
SCE&G Totals:			\$23,061.32		



SERVICE FOR
 HAMMONS OF SC LLC
 5035 INTERNATIONAL BLVD
 NORTH CHARLESTON SC 29418-5963

ACCOUNT NUMBER
 [REDACTED] 2418

DATE DUE
 Jul 6 2016

AMOUNT DUE
 \$23,061.32

www.sceg.com

BUSINESS CUSTOMER SERVICE
 24 HOURS A DAY
 1-800-251-7234, toll-free
 EMERGENCY SERVICE - 24 HOURS A DAY
Gas leaks, downed lines or power outages
 1-888-333-4465, toll-free
 JUNE STATEMENT GENERATED ON:
 Jun 28 2016

FINAL BILL

ACCOUNT SUMMARY

Previous Bill Amount	\$ 19,416.66
Payment Received 06/22/16 THANK YOU	-19,416.66
Current Charges	23,061.32

Amount Due on 7/6/16 \$23,061.32

A late payment charge of 1.5% may be added to any balance remaining 25 days after billing.

SUMMARY OF CURRENT CHARGES

Electric Charges	\$19,748.57
Gas Charges	3,312.75
Total Current Charges	\$23,061.32

PLEASE KEEP THIS PORTION FOR YOUR RECORDS.

Posting Summary	SERVICE FOR 5035 INTERNATIONAL BLVD			
	ACCOUNT NUMBER	STATEMENT DATE	AMOUNT DUE	DATE DUE
	[REDACTED] 2418	6/28/16	\$23,061.32	7/26/16



ACCOUNT NUMBER
 [REDACTED] 2418
 DATE OF BANK DRAFT
 Jul 6 2016
 AMOUNT TO BE DRAFTED
 \$23,061.32

[REDACTED] 16 BD 180316852 EP

HAMMONS OF SC LLC
 DBA RESIDENCE INN CHARLESTON AIRPORT
 MAIL CODE C222
 220 OPERATION WAY
 WEST COLUMBIA SC 29033

Thank you for using SCE&G's Electronic Banking Service.
 Your bank draft is set up for:
 Fifth Thrd Bank





www.sceg.com

CUSTOMER SERVICE
1-800-251-7234
STATEMENT DATE
Jun 28 2016

ACCOUNT NUMBER
[REDACTED] 2418
DATE DUE
Jul 6 2016

Page 2 of 3
AMOUNT DUE
\$23,061.32

Payment Options

By Mail: Pay by check or money order in the enclosed envelope.

Online: Visit scceg.com to pay directly from your bank account or credit card.

By Phone: Call 1-800-450-9160, toll-free, 24 hours a day to pay using your credit card, debit card or directly from your bank account. There is a fee of \$3.50 per transaction that BillMatrix receives for providing this service. Additional limitations may apply.

Business Office :

MARK CLARK OFFICE, 4481 LEEDS PLACE WEST, CHARLESTON HEIGHTS SC 29405

Authorized Payment Agencies:

Visit an authorized payment location near you to pay in person. There is no fee associated with service at an authorized payment location.

PIGGLY WIGGLY #182, 8780 RIVERS AVE, NORTH CHARLESTON SC 29408

ALL SC AND NC WALMARTS

Unauthorized Payment Agencies:

Additional payment centers may exist in your area that are not SCE&G authorized payment locations. While these unauthorized locations may accept your SCE&G payment, they will charge a fee for doing so, and your payment will be delayed in reaching SCE&G.

CURRENT CHARGES

Electric Charges

RATE PLAN
020 - Medium General Service

METER NO.	BILLING PERIOD	DAYS	CURRENT	PREVIOUS	CONSTANT	KWH	KW	KVA
002169723	05/24/16-06/24/16	31	85543	81089	40	178,160	0	0
002169723	06/24/16-06/26/16	2	85891	85543	40	13,920	378	400

Bill Demand of 400 kVA is maximum measured peak.

Basic Facilities Charge	205.00
First 75,000 kWh X \$ 0.053230	3,992.25
Next 117,080 kWh X \$ 0.048880	5,722.87
400 kVA X \$ 18.950000	7,580.00
Renewable Energy Resources	1.27
Franchise Fee 4.00% paid to the City of North Charleston	700.06
State Sales Tax at 8.50 %	1,547.12

Total Electric Charges \$19,748.57

Gas Charges

RATE PLAN
033 - Medium General Svc

BILLING PERIOD	DAYS	CURRENT	PREVIOUS	P-COMP	USAGE(CCF)	BTU FACTOR	THERMS
METER NO. 000164879							
5/24/16 - 6/24/16	31	(6189	- 3763)	X 1.33741	= 3,245		
METER NO. 000164879							
6/24/16 - 6/26/16	2	(6398	- 6242)	X 1.33741	= 209		
TOTAL USAGE					3,454	X 1.0280	= 3,551

Basic Facilities Charge	28.13
Base - 3,551 Therms X \$ 0.818830	2,907.67
Franchise Fee 4.00% paid to the City of North Charleston	117.43
State Sales Tax at 8.50 %	259.52

Total Gas Charges \$3,312.75



www.sceg.com

CUSTOMER SERVICE

1-800-251-7234

STATEMENT DATE

Jun 28 2016

ACCOUNT NUMBER

██████████2418

DATE DUE

Jul 6 2016

Page 3 of 3

AMOUNT DUE

\$23,061.32

Thank you for being our customer. This is your final bill with us. Please contact your SCE&G office if we can help in meeting any of your future energy needs.

Electronic check conversion. When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.



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> (8535260) South Carolina Electric & Gas Company ("SCE&G") 220 Operation Way, MC 222 Cayce, SC 29033	Claim No: 41 <i>Original Filed</i> Date: 08/10/2016 <i>Original Entered</i> Date: 08/10/2016	<i>Status:</i> Filed by: CR Entered by: Patricia L Lawson Modified:
Amount claimed: \$23061.32		

History:

Details	41-1	08/10/2016 Claim #41 filed by South Carolina Electric & Gas Company ("SCE&G"), Amount claimed: \$23061.32 (Lawson, Patricia)
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Description: (41-1) Pre-petition utilities

Remarks:

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*	\$23061.32
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		