

Fill in this information to identify the case:

Debtor 1 John Q Hammons Fall 2006 LLC
Debtor 2 _____
(Spouse, if filing)
United States Bankruptcy Court for the: District of Kansas
Case number 16-21142/ Robert D. Berger

FILED
Kansas City, KS
SEP 12 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? Dow Jones & Company Inc
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?
 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?
Dow Jones & Company Inc
Name
PO Box 300
Number Street
Princeton NJ 08543
City State ZIP Code
Contact phone 609-520-4000
Contact email Accountsreceivable@dowjones.com
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?
 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? _____

JQH Ct ID
00047

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: 6 1 3 7

7. How much is the claim? \$ 215.00. 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

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:

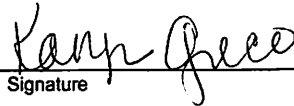
- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

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 09/07/2016
MM / DD / YYYY


Signature

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

Name Karyn Greco
First name Middle name Last name

Title Senior Director - Global Finance

Company Dow Jones & Company Inc
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address PO Box 300
Number Street

Princeton NJ 08543
City State ZIP Code

Contact phone 609-520-4000 Email accountsreceivable@dowjones.com

INVOICE

Page 1 of 3

INVOICE NUMBER	INVOICE DATE
96716566	07/11/2016
ACCOUNT NUMBER	PO NUMBER
236137	
INVOICING PERIOD	
06/01/2016 TO 06/30/2016	

MARRIOTT HOTEL & CONV CENTER
ACCOUNTS PAYABLE
201 BROADWAY AVE
NORMAL, IL 61761

AMOUNT DUE

USD 110.00

NET DUE 30 DAYS

AMENITY INVOICE SUMMARY			
GROSS AMOUNT:	USD 110.00	RETURN/S/NA CREDIT:	USD 0.00
TAX:	USD 0.00	TERMS:	NET DUE 30 DAYS
		AMOUNT DUE:	USD 110.00

THE WALL STREET JOURNAL						
DATE	DRAW	S/NA	RETURNS	RATE (USD)	SALE	AMOUNT (USD)
Acct: 236137 - MARRIOTT HOTEL & CONV CENTER						
06/01/2016	20	0	0	0.2500	20	5.00
06/02/2016	20	0	0	0.2500	20	5.00
06/03/2016	20	0	0	0.2500	20	5.00
06/06/2016	20	0	0	0.2500	20	5.00
06/07/2016	20	0	0	0.2500	20	5.00
06/08/2016	20	0	0	0.2500	20	5.00
06/09/2016	20	0	0	0.2500	20	5.00
06/10/2016	20	0	0	0.2500	20	5.00
06/13/2016	20	0	0	0.2500	20	5.00
06/14/2016	20	0	0	0.2500	20	5.00

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or +1-800-DOWJONES

SEE REVERSE SIDE FOR INSTRUCTIONS AND DOW JONES RETURN POLICY

PLEASE NOTE YOUR ACCOUNT NUMBER AND INVOICE NUMBER ON THE REMITTANCE

BILL - TO NAME	
MARRIOTT HOTEL & CONV CENTER	
ACCOUNT NUMBER	
236137	
INVOICE NUMBER	INVOICE DATE
96716566	07/11/2016

TERMS: Net Due 30 Days

AMOUNT DUE: USD 110.00

PLEASE SEND YOUR REMITTANCE TO:
ACCOUNTSRECEIVABLE@DOWJONES.COM
DOW JONES & CO.
WALL ST JRNL OR BARRONS
PO BOX 4137
NEW YORK NY 10261-4137

WIRE INSTRUCTIONS:
JP MORGAN CHASE ABA#: 021000021
DOW JONES & CO. ACCT NO. 140024880
WIRE TRANSFER SWIFT: CHASUS33

4 02 11 000002361372 96716566 5 000011000

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Page 2 of 3

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06/15/2016	20	0	0	0.2500	20	5.00
06/16/2016	20	0	0	0.2500	20	5.00
06/17/2016	20	0	0	0.2500	20	5.00
06/20/2016	20	0	0	0.2500	20	5.00
06/21/2016	20	0	0	0.2500	20	5.00
06/22/2016	20	0	0	0.2500	20	5.00
06/23/2016	20	0	0	0.2500	20	5.00
06/24/2016	20	0	0	0.2500	20	5.00
06/27/2016	20	0	0	0.2500	20	5.00
06/28/2016	20	0	0	0.2500	20	5.00
06/29/2016	20	0	0	0.2500	20	5.00
06/30/2016	20	0	0	0.2500	20	5.00
	440	0	0		440	110.00
TOTAL	440	0	0		440	110.00

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201 BROADWAY AVE
NORMAL, IL 61761

AMOUNT DUE
USD 110.00
NET DUE 30 DAYS

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GROSS AMOUNT: USD 110.00 RETURN/S/NA CREDIT: USD 0.00 TERMS: NET DUE 30 DAYS
TAX: USD 0.00 AMOUNT DUE: USD 110.00

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COMMENTS:	AMOUNT DUE	USD	110.00
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INVOICE

INVOICE NUMBER	INVOICE DATE
96711050	06/13/2016
ACCOUNT NUMBER	PO NUMBER
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05/01/2016 TO 05/31/2016	

MARRIOTT HOTEL & CONV CENTER
ACCOUNTS PAYABLE
201 BROADWAY AVE
NORMAL, IL 61761

AMOUNT DUE
USD 105.00
NET DUE 30 DAYS

AMENITY INVOICE SUMMARY					
GROSS AMOUNT:	USD 105.00	RETURN/S/NA CREDIT:	USD 0.00	TERMS:	NET DUE 30 DAYS
TAX:	USD 0.00			AMOUNT DUE:	USD 105.00

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DATE	DRAW	S/NA	RETURNS	RATE (USD)	SALE	AMOUNT (USD)
Acct: 236137 - MARRIOTT HOTEL & CONV CENTER						
05/02/2016	20	0	0	0.2500	20	5.00
05/03/2016	20	0	0	0.2500	20	5.00
05/04/2016	20	0	0	0.2500	20	5.00
05/05/2016	20	0	0	0.2500	20	5.00
05/06/2016	20	0	0	0.2500	20	5.00
05/09/2016	20	0	0	0.2500	20	5.00
05/10/2016	20	0	0	0.2500	20	5.00
05/11/2016	20	0	0	0.2500	20	5.00
05/12/2016	20	0	0	0.2500	20	5.00
05/13/2016	20	0	0	0.2500	20	5.00

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TERMS: Net Due 30 Days
AMOUNT DUE: USD 105.00

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201 BROADWAY AVE
NORMAL, IL 61761

AMOUNT DUE
USD 105.00
NET DUE 30 DAYS

AMENITY INVOICE SUMMARY

GROSS AMOUNT: USD 105.00 **RETURN/S/NA CREDIT:** USD 0.00 **TERMS:** NET DUE 30 DAYS
TAX: USD 0.00 **AMOUNT DUE:** USD 105.00

THE WALL STREET JOURNAL						
DATE	DRAW	S/NA	RETURNS	RATE (USD)	SALE	AMOUNT (USD)
05/16/2016	20	0	0	0.2500	20	5.00
05/17/2016	20	0	0	0.2500	20	5.00
05/18/2016	20	0	0	0.2500	20	5.00
05/19/2016	20	0	0	0.2500	20	5.00
05/20/2016	20	0	0	0.2500	20	5.00
05/23/2016	20	0	0	0.2500	20	5.00
05/24/2016	20	0	0	0.2500	20	5.00
05/25/2016	20	0	0	0.2500	20	5.00
05/26/2016	20	0	0	0.2500	20	5.00
05/27/2016	20	0	0	0.2500	20	5.00
05/31/2016	20	0	0	0.2500	20	5.00
	420	0	0		420	105.00
TOTAL	420	0	0		420	105.00

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AMOUNT DUE: USD 105.00

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AMOUNT DUE
USD 105.00
NET DUE 30 DAYS

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GROSS AMOUNT:	USD 105.00	RETURN/S/NA CREDIT:	USD 0.00
TAX:	USD 0.00	TERMS:	NET DUE 30 DAYS
		AMOUNT DUE:	USD 105.00

COMMENTS:	AMOUNT DUE	USD	105.00
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AMOUNT DUE: USD 105.00

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DOW JONES & CO. ACCT NO. 140024880
WIRE TRANSFER SWIFT: CHASUS33

4 02 11 000002361372 96711050 9 000010500

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> (8565364) Dow Jones & Company Inc PO Box 300 Princeton, NJ 08543	Claim No: 83 <i>Original Filed</i> Date: 09/20/2016 <i>Original Entered</i> Date: 09/20/2016	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> Terri Marshall <i>Modified:</i>
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Amount claimed: \$215.00				
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History:

Details	83-1	09/20/2016	Claim #83 filed by Dow Jones & Company Inc, Amount claimed: \$215.00 (Marshall, Terri)
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Description: (83-1) services performed

Remarks: (83-1) KSB Filed 9/12/16; ECF by Claims Agent 9/20/2016

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*	\$215.00
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		