

UNITED STATES BANKRUPTCY COURT	PROOF OF CLAIM
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Name of Debtor: <b>John R. Hammans Fall 2006, LLC</b>	Case Number: <b>16-21154</b> <b>16-21166</b> <b>16-21167</b> <b>16-21173</b> <b>16-21187</b> <b>16-21204</b>
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**RECEIVED**

**OCT 06 2016**

**BMC GROUP**

NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property):  
**Heritage Food Service Group**

COURT USE ONLY

Check this box if this claim amends a previously filed claim.

Court Claim Number: \_\_\_\_\_  
*(if known)*

Filed on: \_\_\_\_\_

Name and address where notices should be sent:  
**Heritage Food Service Group**  
**5130 Executive Blvd.**  
**Fort Wayne, IN 46808**  
Telephone number: \_\_\_\_\_ email: \_\_\_\_\_  
**(216) 496-7659 Karen.blackville@heritagefoodservice.com**

Name and address where payment should be sent (if different from above):  
  
Telephone number: \_\_\_\_\_ email: \_\_\_\_\_

Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.

1. Amount of Claim as of Date Case Filed: \$ 7237.97

If all or part of the claim is secured, complete item 4.

If all or part of the claim is entitled to priority, complete item 5.

Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.

2. Basis for Claim: Goods Sold  
(See instruction #2)

3. Last four digits of any number by which creditor identifies debtor:  
8046

3a. Debtor may have scheduled account as:  
\_\_\_\_\_  
(See instruction #3a)

3b. Uniform Claim Identifier (optional):  
\_\_\_\_\_  
(See instruction #3b)

4. Secured Claim (See instruction #4)  
Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

Nature of property or right of setoff:  Real Estate  Motor Vehicle  Other  
Describe: \_\_\_\_\_

Value of Property: \$ \_\_\_\_\_

Annual Interest Rate \_\_\_\_\_ %  Fixed or  Variable  
(when case was filed)

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ \_\_\_\_\_

Basis for perfection: \_\_\_\_\_

Amount of Secured Claim: \$ \_\_\_\_\_

Amount Unsecured: \$ \_\_\_\_\_

5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.

<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier - 11 U.S.C. § 507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507 (a)(5).
<input type="checkbox"/> Up to \$2,600* 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"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507 (a)(____).

Amount entitled to priority:  
\$ 1,581.29

\*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the

6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See



7. Documents: Attached are 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. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

8. Signature: (See instruction #8)

Check the appropriate box.

- I am the creditor.     I am the creditor's authorized agent.     I am the trustee, or the debtor,     I am a guarantor, surety, indorser, or other codebtor.  
(Attach copy of power of attorney, if any.)    (or their authorized agent.    (See Bankruptcy Rule 3005.)  
(See Bankruptcy Rule 3004.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Karen Blackwell  
Title: Collections Representative  
Company: Heritage Food Service Group  
Address and telephone number (if different from notice address above):  
\_\_\_\_\_  
\_\_\_\_\_

Karen Blackwell    10/3/16  
(Signature)    (Date)

Telephone number: \_\_\_\_\_ email: \_\_\_\_\_

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

#### INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

#### Items to be completed in Proof of Claim form

##### Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

##### Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

##### 1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

##### 2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

##### 3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

##### 3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

##### 3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

##### 4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

##### 5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a):

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

##### 6. Credits:

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.

##### 7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

##### 8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

## DEFINITIONS

## INFORMATION

**Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

**Creditor**

A creditor is a person, corporation, or other entity to whom debtor owes a debt that was incurred before the date of the bankruptcy filing. See 11 U.S.C. §101 (10).

**Claim**

A claim is the creditor's right to receive payment for a debt owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

**Proof of Claim**

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

**Secured Claim Under 11 U.S.C. § 506 (a)**

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien.

A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

**Unsecured Claim**

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

**Claim Entitled to Priority Under 11 U.S.C. § 507 (a)**

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

**Redacted**

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor must show only the last four digits of any social-security, individual's tax-identification, or financial-account number, only the initials of a minor's name, and only the year of any person's date of birth. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information.

**Evidence of Perfection**

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

**Acknowledgment of Filing of Claim**

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system ([www.pacer.nsc.uscourts.gov](http://www.pacer.nsc.uscourts.gov)) for a small fee to view your filed proof of claim.

**Offers to Purchase a Claim**

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.

HFE 22046

- OWES TRUS

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF KANSAS

Case number (if known) \_\_\_\_\_ Chapter 11

Check if this an amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Chateau Catering Co., Inc.

2. All other names debtor used in the last 8 years  
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 43-1777021

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>300 John Q. Hammons Parkway</u> <u>Suite 900</u> <u>Springfield, MO 65806</u> <small>Number, Street, City, State &amp; ZIP Code</small>	<small>P.O. Box, Number, Street, City, State &amp; ZIP Code</small>  <b>Location of principal assets, if different from principal place of business</b> <u>415 North State Highway 265 Branson, MO 65616</u> <small>Number, Street, City, State &amp; ZIP Code</small>
	<u>Greene</u> <small>County</small>	

5. Debtor's website (URL) \_\_\_\_\_

6. Type of debtor  
 Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
 Partnership (excluding LLP)  
 Other. Specify: \_\_\_\_\_



# Statement

Page: 1  
 Statement Date: 07/11/2016  
 Customer Number: HFE22046

Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Customer:

CHATEAU ON THE LAKE RESORT  
 ACCOUNTS PAYABLE  
 415 N ST HWY 265  
 BRANSON, MO 65616 US

Telephone: (417) 334-1161 Ext.  
 Fax: (417) 339-5566 Ext.

Contact: LARRY LYTLE

Salesperson: Kari Bramlett

Date	Date Due	Invoice No.	Description	Amount	Balance
5/26/2016	6/10/2016	0003646282-IN	PO856993 Payment Terms: NET 15	205.11	205.11
6/3/2016	6/18/2016	0003657592-IN	POJQH853997 Payment Terms: NET 15	253.91	253.91
6/9/2016	6/24/2016	0003665941-IN	POJQH853996 Payment Terms: NET 15	276.78	276.78
6/10/2016	6/25/2016	0003667992-IN	POJQH53996 Payment Terms: NET 15	83.82	83.82
6/22/2016	7/7/2016	0003686384-IN	PO864108 Payment Terms: NET 15	345.34	345.34
Balance Due USD					1,164.96

\*\* Payment by National Account Parent

Balance Due	Current	Over 30 Days	Over 45 Days	Over 60 Days	Over 75 Days
1,164.96	345.34	614.51	205.11	0.00	0.00



Please remit payment to: PO Box 71595 Chicago IL 60694-1594  
 For Questions, please call (800) 458-5593

Your immediate attention to all balances over 30 days is appreciated.

As a reminder, accounts with balances over 45 days are at risk of being placed on credit hold.

Thank you for your business.



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003646282  
Date: 5/26/2016  
Salesperson: KariB  
Customer: HFE22046

Sold To	Ship To
CHATEAU ON THE LAKE RESORT ACCOUNTS PAYABLE 415 N ST HWY 265 BRANSON, MO 65616 US	CHATEAU ON THE LAKE RESORT 415 N ST HWY 265 ATTN LARRY LYTLE BRANSON, MO 65616 US

Customer P.O.	Ship Via	F.O.B	Terms
856993	FED EX GROUND	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W59311510</b>				
CHA109069	CHAMPION THERMOSTAT	1.00	182.87	182.87

LAST ITEM

LeadUPS Tracking Number: 023843715911183

Subtotal	182.87
Shipping and Handling	6.00
Sales Tax	16.24
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 205.11</b>

Contact: LARRY LYTLE



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593





# Invoice



Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Page: 1  
 Number: 0003657592  
 Date: 6/3/2016  
 Salesperson: KariB  
 Customer: HFE22046

Sold To	Ship To
CHATEAU ON THE LAKE RESORT ACCOUNTS PAYABLE 415 N ST HWY 265 BRANSON, MO 65616 US	CHATEAU ON THE LAKE RESORT 415 N ST HWY 265 ATTN LARRY LYTLE BRANSON, MO 65616 US

Customer P.O.	Ship Via	F.O.B	Terms
JQH853997	FED EX GROUND	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W60213348</b>				
TRASER-16473-00	TRAULSEN GSKT29 1/4X67 5/8 3SD	1.00	132.99	132.99
TRASER-28583-00	TRAULSEN GLIDE HINGE ASSY R/L	1.00	94.82	94.82

LAST ITEM

LeadUPS Tracking Number: 023843715914641

Subtotal	227.81
Shipping and Handling	6.00
Sales Tax	20.10
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 253.91</b>

Contact: LARRY LYTLE



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
 For Questions, please call (800) 458-5593





# Invoice



Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Page: 1  
 Number: 0003665941  
 Date: 6/9/2016  
 Salesperson: KariB  
 Customer: HFE22046

Sold To	Ship To
CHATEAU ON THE LAKE RESORT ACCOUNTS PAYABLE 415 N ST HWY 265 BRANSON, MO 65616 US	CHATEAU ON THE LAKE RESORT 415 N ST HWY 265 ATTN LARRY LYTLE BRANSON, MO 65616 US

Customer P.O.	Ship Via	F.O.B.	Terms
JQH853996	FED EX GROUND	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W60933976</b>				
VHL00-913149	VULCAN KIT, NCC TEMP CONTROL WITH HARNESS	1.00	177.27	177.27
VHL00-347545-00001	VULCAN ROLLER BALL DOOR LATCH, OLD STYLE	2.00	35.80	71.60

LAST ITEM

LeadUPS Tracking Number: 023843715917284

Subtotal	248.87
Shipping and Handling	6.00
Sales Tax	21.91
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 276.78</b>

Contact: LARRY LYTLE



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
 For Questions, please call (800) 458-5593







# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003667992  
Date: 6/10/2016  
Salesperson: KariB  
Customer: HFE22046

Sold To	Ship To
CHATEAU ON THE LAKE RESORT ACCOUNTS PAYABLE 415 N ST HWY 265 BRANSON, MO 65616 US	CHATEAU ON THE LAKE RESORT 415 N ST HWY 265 ATTN LARRY LYTLE BRANSON, MO 65616 US

Customer P.O.	Ship Via	F.O.B	Terms
JQH53996	FED EX PRIORITY	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W60933985</b>				
TOA2T-38079	TOASTMASTER SNAP DISK THERMOSTAT	1.00	71.19	71.19



LAST ITEM

LeadUPS Tracking Number: 783329366200

Subtotal	71.19
Shipping and Handling	6.00
Sales Tax	6.63
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 83.82</b>

Contact: LARRY LYTLE




 Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
 For Questions, please call (800) 458-5593
 



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003686384  
Date: 6/22/2016  
Salesperson: KariB  
Customer: HFE22046

Sold To	Ship To
CHATEAU ON THE LAKE RESORT ACCOUNTS PAYABLE 415 N ST HWY 265 BRANSON, MO 65616 US	CHATEAU ON THE LAKE RESORT 415 N ST HWY 265 ATTN LARRY LYTLE BRANSON, MO 65616 US

Customer P.O.	Ship Via	F.O.B	Terms
864108	FED EX GROUND	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W62650602</b>				
EVVEV961222	EVERPURE FILTER PRODUCTS I2000 FILTER CARTRIDGE	4.00	78.00	312.00

LAST ITEM

LeadUPS Tracking Number: 023843715924039

Subtotal	312.00
Shipping and Handling	6.00
Sales Tax	27.34
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 345.34</b>

Contact: LARRY LYTLE



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593



HFE 33423 - Owes CMUS

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF KANSAS

Case number (if known)

Chapter 11

Check if this an amended filing

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Loveland Catering Co., Inc.

2. All other names debtor used in the last 8 years  
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 26-3991523

4. Debtor's address      Principal place of business      Mailing address, if different from principal place of business

300 John Q. Hammons Parkway  
Suite 900  
Springfield, MO 65806

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Greene  
County

Location of principal assets, if different from principal place of business

4705 Clydesdale Parkway Loveland, CO  
Number, Street, City, State & ZIP Code

5. Debtor's website (URL) \_\_\_\_\_

6. Type of debtor       Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
 Partnership (excluding LLP)  
 Other. Specify: \_\_\_\_\_



# Statement

Page: 1  
 Statement Date: 07/11/2016  
 Customer Number: hfe33423

Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Customer:

EMBASSY SUITES LOVELAND HOTEL SPA  
 ACCOUNTS PAYABLE  
 4705 CLYDESDALE PKWY  
 LOVELAND, CO 80538 US

Telephone: (970) 612-2410 Ext.  
 Fax: (970) 593-6202 Ext.

Contact: SCOTT MCKELVEY Salesperson: Riann Legault

Date	Date Due	Invoice No.	Description	Amount	Balance
2/8/2016	2/23/2016	0003465420-IN	PO825572 Payment Terms: NET 15	262.32	262.32
2/16/2016	3/2/2016	0003477934-IN	POMARSHAL Payment Terms: NET 15	123.14	123.14
4/11/2016	4/26/2016	0003567363-IN	POMARSHALL Payment Terms: NET 15	104.51	104.51
4/22/2016	5/7/2016	0003588173-IN	POMARSHALL Payment Terms: NET 15	203.56	203.56
6/21/2016	7/6/2016	0003682802-IN	POCHRIS Payment Terms: NET 15	43.54	43.54
6/27/2016	7/12/2016	0003691649-IN	POscott Payment Terms: NET 15	155.14	155.14
7/1/2016	7/16/2016	0003701977-IN	POMARSHAL Payment Terms: NET 15	276.93	276.93
7/6/2016	7/21/2016	0003706599-IN	POMARSHALL Payment Terms: NET 15	89.54	89.54

Balance Due USD See Last Page

\*\* Payment by National Account Parent

Balance Due	Current	Over 30 Days	Over 45 Days	Over 60 Days	Over 75 Days
See Last Page	See Last Page	See Last Page	See Last Page	See Last Page	See Last Page



Please remit payment to: PO Box 71595 Chicago IL 60694-1594  
 For Questions, please call (800) 458-5593



# Statement



Page: 2  
 Statement Date: 07/11/2016  
 Customer Number: hfe33423

Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

**Customer:**

EMBASSY SUITES LOVELAND HOTEL SPA  
 ACCOUNTS PAYABLE  
 4705 CLYDESDALE PKWY  
 LOVELAND, CO 80538 US

Telephone: (970) 612-2410 Ext.  
 Fax: (970) 593-6202 Ext.

Contact: SCOTT MCKELVEY Salesperson: Riann Legault

Date	Date Due	Invoice No.	Description	Amount	Balance
12/29/2015	12/29/2015	0003402968-CM	POMARSHALL WARRANTY RETURN FROM ORIGINAL INVC	(713.24)	(713.24)
Balance Due USD					545.44

\*\* Payment by National Account Parent

Balance Due	Current	Over 30 Days	Over 45 Days	Over 60 Days	Over 75 Days
545.44	565.15	0.00	0.00	0.00	-19.71



Please remit payment to: PO Box 71595 Chicago IL 60694-1594  
 For Questions, please call (800) 458-5593

Your immediate attention to all balances over 30 days is appreciated.

As a reminder, accounts with balances over 45 days are at risk of being placed on credit hold.

Thank you for your business.



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003465420  
Date: 2/8/2016  
Salesperson: RiannL  
Customer: hfe33423

Sold To	Ship To
EMBASSY SUITES LOVELAND HOTEL SPA 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US	EMBASSY STES LOVELAND 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US

Customer P.O.	Ship Via	F.O.B	Terms
825572	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W47976699</b>				
MAN4011189	MANITOWOC WATER CURTAIN	2.00	39.68	79.36
MAN4003609	MANITOWOC WATER TROUGH	4.00	33.78	135.12

LAST ITEM

LeadUPS Tracking Number: 1Z46X2140397889255

Subtotal	214.48
Shipping and Handling	33.23
Sales Tax	14.61
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 262.32</b>

Contact: SCOTT MCKELVEY



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593





# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003477934  
Date: 2/16/2016  
Salesperson: RiannL  
Customer: hfe33423

Sold To	Ship To
EMBASSY SUITES LOVELAND HOTEL SPA 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US	EMBASSY STES LOVELAND 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US

Customer P.O.	Ship Via	F.O.B	Terms
MARSHAL	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W48656529</b>				
CLEC6012017	CLEVELAND ROLLER ASSY DOOR GUIDE	2.00	49.85	99.70



LAST ITEM

LeadUPS Tracking Number: 1Z46X2140396474294

Subtotal	99.70
Shipping and Handling	16.58
Sales Tax	6.86
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 123.14</b>

Contact: SCOTT MCKELVEY




**Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710**

  
**For Questions, please call (800) 458-5593**



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003567363  
Date: 4/11/2016  
Salesperson: RiannL  
Customer: hfe33423

Sold To	Ship To
EMBASSY SUITES LOVELAND HOTEL SPA 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US	EMBASSY STES LOVELAND 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US

Customer P.O.	Ship Via	F.O.B	Terms
MARSHALL	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W54056805</b>				
VHL00-498061	VULCAN SPARK PILOT ASSY	1.00	82.17	82.17

LAST ITEM

LeadUPS Tracking Number: 1Z46X2140396766022

Subtotal	82.17
Shipping and Handling	16.51
Sales Tax	5.83
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 104.51</b>

Contact: SCOTT MCKELVEY



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593







# Invoice



Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Page: 1  
 Number: 0003588173  
 Date: 4/22/2016  
 Salesperson: RiannL  
 Customer: hfe33423

Sold To	Ship To
EMBASSY SUITES LOVELAND HOTEL SPA ACCOUNTS PAYABLE 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US	EMBASSY STES LOVELAND 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US

Customer P.O.	Ship Via	F.O.B	Terms
MARSHALL	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W55027272</b>				
CRE0848 062 K	CRES COR THERMOSTAT MECHANICAL	1.00	175.11	175.11

LAST ITEM

LeadUPS Tracking Number: 1Z46X2140398441655

Subtotal	175.11
Shipping and Handling	17.11
Sales Tax	11.34
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 203.56</b>

Contact: SCOTT MCKELVEY



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
 For Questions, please call (800) 458-5593





# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003682802  
Date: 6/21/2016  
Salesperson: RiannL  
Customer: hfe33423

Sold To	Ship To
EMBASSY SUITES LOVELAND HOTEL SPA ACCOUNTS PAYABLE 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US	EMBASSY STES LOVELAND 4705 CLYDESDALE PKWY LOVELAND, CO 80538 US

Customer P.O.	Ship Via	F.O.B	Terms
CHRIS	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W62476898</b>				
CLEC5009313	CLEVELAND LATCH ROCKER	2.00	8.50	17.00
CLEC5009314	CLEVELAND SELECTOR DIAL	2.00	3.79	7.58

LAST ITEM

LeadUPS Tracking Number: 1Z46X2140398191952

Subtotal	24.58
Shipping and Handling	16.53
Sales Tax	2.43
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 43.54</b>

Contact: SCOTT MCKELVEY



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call! (800) 458-5593



HFE 29263 - OWES JMS

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF KANSAS

Case number (if known) Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Hammons of Tulsa, LLC

2. All other names debtor used in the last 8 years. Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 20-4412618

4. Debtor's address. Principal place of business: 300 John Q. Hammons Parkway, Suite 900, Springfield, MO 65806. Mailing address: 6808 South 107th East Ave. Tulsa, OK 74133. Location of principal assets: 6808 South 107th East Ave. Tulsa, OK 74133.

5. Debtor's website (URL)

6. Type of debtor. Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) [checked]. Partnership (excluding LLP) [unchecked]. Other. Specify:



# Statement

Page: 1  
 Statement Date: 07/11/2016  
 Customer Number: hfe29263

Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Customer:

RENAISSANCE HOTEL/TULSA  
 ACCOUNTS PAYABLE  
 6808 S 107TH E AVE  
 TULSA, OK 74133 US

Telephone: (918) 307-2600 Ext.  
 Fax: (918) 307-2907 Ext.

Contact: MARCUS RICHEL

Salesperson: Darlene J. Crawford



Date	Date Due	Invoice No.	Description	Amount	Balance
5/26/2016	6/10/2016	0003646091-IN	POJQH851803 Payment Terms: NET 15	107.17	107.17
2/12/2016	2/12/2016	0003473453-CM	POJQH816140 FOR PARTS RETURNED FROM ORIGINAL INV	(354.06)	(354.06)

Balance Due USD -246.89

\*\* Payment by National Account Parent

Balance Due	Current	Over 30 Days	Over 45 Days	Over 60 Days	Over 75 Days
-246.89	0.00	0.00	107.17	0.00	-354.06




 Please remit payment to: PO Box 71595 Chicago IL 60694-1594  
 For Questions, please call (800) 458-5593
 

Your immediate attention to all balances over 30 days is appreciated.

As a reminder, accounts with balances over 45 days are at risk of being placed on credit hold.

Thank you for your business.



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003646091  
Date: 5/26/2016  
Salesperson: Darlene  
Customer: hfe29263

Sold To	Ship To
RENAISSANCE HOTEL/TULSA ACCOUNTS PAYABLE 6808 S 107TH E AVE TULSA, OK 74133 US	RENAISSANCE HOTEL/TULSA 6808 S 107TH E AVE ATTN ENGINEERING TULSA, OK 74133 US

Customer P.O.	Ship Via	F.O.B	Terms
JQH851803	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W59300479</b>				
MOY0706635	MOYER DIEBEL TUBE 45CC DETERGENT	4.00	16.14	64.56
MOY0707142	MOYER DIEBEL ROTOR	2.00	9.67	19.34

LAST ITEM

LeadUPS Tracking Number: 1Z46X2140341137313

Subtotal	83.90
Shipping and Handling	16.12
Sales Tax	7.15
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 107.17</b>

Contact: MARCUS RICHEL



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593



HFE 21798 - Owees Invs

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF KANSAS

Case number (if known)

Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Hammons of Rogers, Inc.

2. All other names debtor used in the last 8 years  
Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 47-1865587

4. Debtor's address

Principal place of business	Mailing address, if different from principal place of business
<u>300 John Q. Hammons Parkway</u> <u>Suite 900</u> <u>Springfield, MO 65806</u> Number, Street, City, State & ZIP Code	   P.O. Box, Number, Street, City, State & ZIP Code
<u>Greene</u> County	Location of principal assets, if different from principal place of business <u>3303 Pinnacle Hills Pkwy Rogers, AR 72758</u> Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: \_\_\_\_\_



# Statement

Page: 1  
 Statement Date: 07/11/2016  
 Customer Number: HFE21798

Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Customer:

EMBASSY SUITES/ROGERS  
 ACCOUNTS PAYABLE  
 3303 PINNACLE HILLS PKWY  
 ROGERS, AR 72758 US

Telephone: (479) 254-8400 Ext.  
 Fax: (479) 845-2001 Ext.

Contact: MITCH THOMPSON

Salesperson: Mari L. Osborne

Date	Date Due	Invoice No.	Description	Amount	Balance
5/16/2016	5/31/2016	0003627600-IN	POJQH848681 Payment Terms: NET 15	105.26	105.26
Balance Due USD					105.26

\*\* Payment by National Account Parent

Balance Due	Current	Over 30 Days	Over 45 Days	Over 60 Days	Over 75 Days
105.26	0.00	0.00	105.26	0.00	0.00



Please remit payment to: PO Box 71595 Chicago IL 60694-1594  
 For Questions, please call (800) 458-5593

Your immediate attention to all balances over 30 days is appreciated.

As a reminder, accounts with balances over 45 days are at risk of being placed on credit hold.

Thank you for your business.



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003627600  
Date: 5/16/2016  
Salesperson: Mari  
Customer: HFE21798

Sold To	Ship To
EMBASSY SUITES/ROGERS ACCOUNTS PAYABLE 3303 PINNACLE HILLS PKWY ROGERS, AR 72758 US	EMBASSY STES/ROGERS 3303 PINNACLE HILLS PKWY ENG #80796 ROGERS, AR 72758 US

Customer P.O.	Ship Via	F.O.B	Terms
JQH848681	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W58142690</b>				
MAN7627813	MANITOWOC ICE THICKNESS PROBE	1.00	80.30	80.30

LAST ITEM

LeadUPS Tracking Number: 1Z46X2140397783592

Subtotal	80.30
Shipping and Handling	15.82
Sales Tax	9.14
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 105.26</b>

Contact: MITCH THOMPSON



**Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710**

For Questions, please call (800) 458-5593



HFE 31350

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF KANSAS

Case number (if known) Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Franklin/Crescent Catering Co., Inc.

2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 62-1859058

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

300 John Q. Hammons Parkway Suite 900 Springfield, MO 65806

Greene County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

820 Crescent Centre Drive Franklin, TN 37067

5. Debtor's website (URL)

6. Type of debtor Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) Partnership (excluding LLP) Other, Specify:



# Statement

Page: 1  
 Statement Date: 07/08/2016  
 Customer Number: HFE31356

Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Customer:

EMBASSY SUITES/FRANKLIN  
 ACCOUNTS PAYABLE  
 820 CRESCENT CENTRE DR  
 FRANKLIN, TN 37067 US

Telephone: (615) 210-5182 Ext.  
 Fax: Ext.

Contact: OSCAR CERDA Salesperson: Darci Carpenter

Date	Date Due	Invoice No.	Description	Amount	Balance
12/22/2015	1/6/2016	0003396649-IN	POMARVIN Payment Terms: NET 15	818.77	818.77
2/23/2016	3/9/2016	0003490378-IN	POMARVIN LOGGINS Payment Terms: NET 15	1,735.73	1,735.73
1/11/2016	1/11/2016	0003418377-CM	POMARVIN FOR PARTS RETURNED FROM ORIGINAL INVOICE	(801.61)	(801.61)
1/11/2016	1/11/2016	0003418378-CM	POMARVIN FOR PARTS RETURNED FROM ORIGINAL INVOICE	(225.58)	(225.58)
Balance Due USD					1,527.31

\*\* Payment by National Account Parent

Balance Due	Current	Over 30 Days	Over 45 Days	Over 60 Days	Over 75 Days
1,527.31	0.00	0.00	0.00	0.00	1,527.31



Please remit payment to: PO Box 71595 Chicago IL 60694-1594  
 For Questions, please call (800) 458-5593

Your immediate attention to all balances over 30 days is appreciated.

As a reminder, accounts with balances over 45 days are at risk of being placed on credit hold.

Thank you for your business.



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003396649  
Date: 12/22/2015  
Salesperson: DarciC  
Customer: HFE31356

Sold To	Ship To
EMBASSY SUITES/FRANKLIN ACCOUNTS PAYABLE 820 CRESCENT CENTRE DR FRANKLIN, TN 37067 US	EMBASSY STES 820 CRESCENT CENTRE DRIVE ATTN TOMMY ROGERS/ENGINEERING FRANKLIN, TN 37067 US

Customer P.O.	Ship Via	F.O.B	Terms
MARVIN	FED EX GROUND	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W44144238</b>				
GROZ054716	GROEN TILT PAN MOTOR	1.00	733.74	733.74

LAST ITEM

LeadUPS Tracking Number: 023843715639599

Subtotal	733.74
Shipping and Handling	15.71
Sales Tax	69.32
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 818.77</b>

Contact: TOMMY ROGERS



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593





# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1  
Number: 0003490378  
Date: 2/23/2016  
Salesperson: DarciC  
Customer: HFE31356

Sold To	Ship To
EMBASSY SUITES/FRANKLIN ACCOUNTS PAYABLE 820 CRESCENT CENTRE DR FRANKLIN, TN 37067 US	EMBASSY STES 820 CRESCENT CENTRE DRIVE ATTN TOMMY ROGERS/ENGINEERING FRANKLIN, TN 37067 US

Customer P.O.	Ship Via	F.O.B	Terms
MARVIN LOGGINS	UPS	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W49225974</b>				
GRO132413	GROEN ACTUATOR	1.00	1,563.47	1,563.47

LAST ITEM

LeadUPS Tracking Number: 1Z46X2140391163530

Subtotal	1,563.47
Shipping and Handling	25.30
Sales Tax	146.96
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 1,735.73</b>

Contact: TOMMY ROGERS



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593



HEE 34912 - owes TRUS

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF KANSAS

Case number (if known)

Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name Hot Springs Catering Co., Inc.

2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 20-0175501

4. Debtor's address Principal place of business Mailing address, if different from principal place of business 300 John Q. Hammons Parkway Suite 900 Springfield, MO 65806 Greene County 400 Convention Blvd. Hot Springs National, AR 71901

5. Debtor's website (URL)

6. Type of debtor Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) Partnership (excluding LLP) Other. Specify:



# Statement

Page: 1  
 Statement Date: 07/13/2016  
 Customer Number: HFE34912

Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Customer:

EMBASSY SUITES/HOT SPRINGS  
 ACCOUNTS PAYABLE  
 400 CONVENTION BLVD  
 HOT SPRINGS NATL PK, AR 71901 US

Telephone: (501) 624-9200 Ext.  
 Fax: Ext.

Contact: GERALD HARMAN

Salesperson: Chris Frizsell

Date	Date Due	Invoice No.	Description	Amount	Balance
5/4/2016	5/19/2016	0003607940-IN	POJQH847836 Payment Terms: NET 15	833.70	833.70
5/12/2016	5/27/2016	0003621832-IN	PO851052 Payment Terms: NET 15	653.49	653.49
6/2/2016	6/17/2016	0003656062-IN	POGERALD Payment Terms: NET 15	250.01	250.01
6/14/2016	6/29/2016	0003673090-IN	POJQH856824 Payment Terms: NET 15	831.81	831.81
5/16/2016	5/16/2016	0003626078-CM	POJQH847836 FOR PARTS RETURNED FROM ORIGINAL INV	(549.87)	(549.87)

Balance Due USD 2,019.14

\*\* Payment by National Account Parent

Balance Due	Current	Over 30 Days	Over 45 Days	Over 60 Days	Over 75 Days
2,019.14	831.81	250.01	-549.87	1,487.19	0.00



Please remit payment to: PO Box 71595 Chicago IL 60694-1594  
 For Questions, please call (800) 458-5593

Your immediate attention to all balances over 30 days is appreciated.

As a reminder, accounts with balances over 45 days are at risk of being placed on credit hold.

Thank you for your business.



# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1

Number: 0003607940

Date: 5/4/2016

Salesperson: CHELSEAB

Customer: HFE34912

Sold To	Ship To
EMBASSY SUITES/HOT SPRINGS ACCOUNTS PAYABLE 400 CONVENTION BLVD HOT SPRINGS NATL PK, AR 71901 US	EMBASSY STES/HOT SPRINGS 400 CONVENTION BLVD ENGINEERING HOT SPRINGS NATL PK, AR 71901 US

Customer P.O.	Ship Via	F.O.B	Terms
JQH847836	FEDEX STD OVER	INVOICED FRT	NET 15

Item	Description	Qty Shipped	Price	Amount
Order: SO-W55459112 CHA115585	CHAMPION MOTOR	1.00	502.17	502.17

LAST ITEM

Subtotal	502.17
Shipping and Handling	259.20
Sales Tax	72.33
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>833.70</b>

Contact: GERALD HARMAN

USD



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593





# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1

Number: 0003621832

Date: 5/12/2016

Salesperson: CHELSEAB

Customer: HFE34912

Sold To	Ship To
EMBASSY SUITES/HOT SPRINGS ACCOUNTS PAYABLE 400 CONVENTION BLVD HOT SPRINGS NATL PK, AR 71901 US	EMBASSY STES/HOT SPRINGS 400 CONVENTION BLVD ENGINEERING HOT SPRINGS NATL PK, AR 71901 US

Customer P.O.	Ship Via	F.O.B	Terms
851052	FED EX GROUND	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W56707520</b>				
LRN705262	LOREN COOK BLOWER WHEEL	1.00	590.80	590.80

LAST ITEM



LeadUPS Tracking Number: 023843715904215

Subtotal	590.80
Shipping and Handling	6.00
Sales Tax	56.69
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>653.49</b>

Contact: GERALD HARMAN

USD




 Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
 For Questions, please call (800) 458-5593
 





# Invoice



Heritage Food Service Group, Inc.  
PO Box 71595  
Chicago, IL 60694-1595

Page: 1

Number: 0003656062

Date: 6/2/2016

Salesperson: ErikD

Customer: HFE34912

Sold To	Ship To
EMBASSY SUITES/HOT SPRINGS ACCOUNTS PAYABLE 400 CONVENTION BLVD HOT SPRINGS NATL PK, AR 71901 US	EMBASSY STES/HOT SPRINGS 400 CONVENTION BLVD ENGINEERING HOT SPRINGS NATL PK, AR 71901 US

Customer P.O.	Ship Via	F.O.B	Terms
GERALD	FED EX GROUND	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W60055738</b>				
MAN4004743	MANITOWOC WATER CURTAIN	1.00	191.19	191.19
MAN7628563	MANITOWOC PIN ASSY	1.00	31.12	31.12

LAST ITEM

LeadUPS Tracking Number: 023843715914139

Subtotal	222.31
Shipping and Handling	6.00
Sales Tax	21.70
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>USD 250.01</b>

Contact: GERALD HARMAN



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
For Questions, please call (800) 458-5593





# Invoice



Heritage Food Service Group, Inc.  
 PO Box 71595  
 Chicago, IL 60694-1595

Page: 1  
 Number: 0003673090  
 Date: 6/14/2016  
 Salesperson: ErikD  
 Customer: HFE34912

Sold To	Ship To
EMBASSY SUITES/HOT SPRINGS ACCOUNTS PAYABLE 400 CONVENTION BLVD HOT SPRINGS NATL PK, AR 71901 US	EMBASSY STES/HOT SPRINGS 400 CONVENTION BLVD ENGINEERING HOT SPRINGS NATL PK, AR 71901 US

Customer P.O.	Ship Via	F.O.B	Terms
JQH856824	FED EX PRIORITY	CONSIGNEE	NET 15

Item	Description	Qty Shipped	Price	Amount
<b>Order: SO-W61585194</b>				
CHA100382	CHAMPION BEARING	1.00	103.11	103.11
CHA102244	CHAMPION SEAL	1.00	23.79	23.79
CHA900146	CHAMPION CLUTCH	1.00	623.82	623.82
CHA108820	CHAMPION GASKET	1.00	2.91	2.91

LAST ITEM

LeadUPS Tracking Number: 783357019424

Subtotal	753.63
Shipping and Handling	6.00
Sales Tax	72.18
Trade Discount	0.00
Payment/Credit Amount	0.00
<b>Balance</b>	<b>831.81</b>

Contact: GERALD HARMAN

USD



Mail other correspondence to: PO Box 8710, Fort Wayne, IN 46898-8710  
 For Questions, please call (800) 458-5593