s Correspondence Report	- From: 10/12/2016 To:	: 10/14/2016	Loc	kbox 1835	Processing Site: Birmingham
Correspondence	e Item: 130	Process Date:	10/13/201	16 Image	14 of 18
•					
ill in this information to				ID: 2443 MYERS SUPPLY & CHEMICA DEPT 1835	L ,
Pebtor name: John Q	HAmmonds FA	H1 2006 LLC		PO BOX 2153 BIRMINGHAM, AL 35287-183	35
Inited States Bankruptcy Cou	urt for the District of Kansas at I	Kansas City			
ase number (If known):		104			
				RECI	EIVED
ee Appendix A to bar date notice	e for list of debtors and case numbe	ms.			
				OCT 1	7 2016
				DMC	GROUP
			1	DIVIC	JNOOI
				If you have already file	d a proof of claim with the
Official Form 410				Bankruptcy Court or BMC THIS SPACE IS F	C, you do not need to file again. OR COURT USE ONLY
Proof of Claim)				04/16
and the instructions hafers	filling out this form. This for dministrative expense, excep	rm is for making a claim for	payment in a	bankruptcy case. Do	not use this form to make a
		a antimory on this form of on a	inv attached d	ocuments. Attach redac	ted copies of any documents
	set information that is entitled to spromissory notes, purchase o send original documents; the				
person who files a fraudulen	nt claim could be fined up to \$5	00,000, imprisoned for up to t	5 years, or bot	h. 18 U.S.C. §§ 152, 15	7, and 3571.
ill in all the information abo	out the claim as of the date ti	he case was filed. That date	is on the not	ice of bankruptcy (For	m 309) that you received.
أمم مطافقه فسمسة مستملقته الأرأ	ed form (faxes not accepted), idress set forth on the Bar D	late Natice, or (b) tiled using	i the online u	ocument ruing System	
tates Bankruptcy Court for	the District of Kansas, in eit	ther event so as to be receiv	ved no later ti	ian 5:00 p.m. CST on t	he December 23, 2016.
Part 1: Identify the	Claim				
. Who is the current	MILEPS S	Jupply INC.			
creditor?	Name of the current creditor (th	ne person or entity to paid for this	claim)		3
·	Other name the creditor used w	with the debter			
2. Has this claim been acquired from	K No				
someone else?	Yes. From whom?			·	······································
3. Where should notices	Where should notices to t	the creditor be sent?		ould payments to the o	reditor be sent?
and payments to the creditor be sent?			(if differen	4)	
Federal Rule of	M	1	ha		
	INUERS JUDA	NU LNC	1770	JERS SUDAL	TNC
Bankruptcy Procedure (FRBP) 2002(g)	Mame Name	NY, INC	Name	HERS Supply	, Inc
Bankruptcy Procedure	Name 831 Third	STREET	83	HERS Supply	H, INC
Bankruptcy Procedure	Number Street	STREET	Name Name Number	HERS Supply BI Third S Street	H. INC Hreat AR THIS
Bankruptcy Procedure	Hot SPRINC	ISTREET	83	HERS Supply 1 Third S street t Springs, 1 stat	H, INC Freet AR 7K13 D ZIP Code
Bankruptcy Procedure	Hot Sprinc	14, INC STREET AS AR 71913 State ZIP Code	Number La City	+ SPRINGS T	H, INC Freet AR 7K13 ZIP Code
Bankruptcy Procedure	City Contact phone 501-6	14, INC STREET is AR 71913 State ZIP Code 223-7742	Number City Contact p	+ SPRINGS, 1 Stat hone 501-623	
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Correspondence Ite	m: 130	Process Date:	10/13/2016	Image	Birminaham 15 of 18
		and the second			
t 2. Ches information	about the Claim on	of the Date the Case	Was Filed		•
to you have any number in the sector of the	No Yes. Last 4 digits of the del	btor's account or any numbe	EM)/- r you use to identify	+884 = 2	470
low much is the claim? \$	1896.46	Does this amount in	clude interest or o	ther charges?	``
		No Yes. Attach state	ment itemizina inten	est fees exnense	es or other
			by Bankruptcy Rule		
Vhat is the basis of the Exam	ples: Goods sold, money l	caned, lease, services perfo	rmed, personal injur	y or wrongful dea	th, or credit card.
laim? Attaci	n redacted copies of any d	ocuments supporting the cla	im required by Bank	ruptcy Rule 3001	(c).
		is entitled to privacy, such a			
-1		019549 20		_	
<u>_</u> _				20178	
		2019847			
s all or part of the claim Secured?	No Yeş. The claim is secured	by a lien on property.			
	Nature of property:				
	Real estate. If the	claim is secured by the deb chment (Official Form 410-A)	tor's principal reside	nce, file a Mortga	ge Proof of Claim
	Motor vehicle	ament (Onicia Form 410-A)	with this Froor or Cr	GHN.	
	Other. Describe:				
	Basis for perfection	:			à
· .	Attach redacted copi example, a mortgagi been filed or recorde	es of documents, if any, that e, lien, certificate of title, fina cd.)	t show evidence of p noing statement, or (erfection of a sec other document t	unity interest (for nat shows the lien has
	Value of property:	\$			
	Amount of the claim	that is secured: \$_			
	Amount of the claim	n that is unsecured: \$			secured and unsecured match the amount in line 7.)
	Amount necessary	to cure any default as of th	e date of the petiti	on: \$	
		e (when case was filed)			
	Fixed				
					· · · · · · · · · · · · · · · · · · ·
Is this claim based on a lease?	No Yes. Amount necessary	to cure any default as of t	he date of the petit	tion. \$	
	,				
a right of setoff?	No Yes. Identify the property	r		<u></u>	
		Proof of Clai			page 2

1

Correspondence Item:

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: ... 130

Lockbox 1835

Image

10/13/2016

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2. Is all or part of the claim entitled to priority under	No .	1.				
11 U.S.C. § 507(a)?	Yes. Check all that apply:	Amount entitled to priority				
A claim may be partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$				
priority and partly nonpriority. For example,	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).	\$				
In some categories, the law limits the amount entitled to priority.	Wages, salaries, or commissions (up to \$12,850°) eamed 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 af	ter the date of adjustment.				
3. Is all or part of the claim entitled to	No No					
administrative priority	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	\$ 1896.46				
pursuant to 11 U.S.C. § 503(b)(9)?	which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.	\$ 10 10 1-				
Part 3: Sign Below						
he person completing	Check the appropriate box:					
is proof of claim must Ign and date it.	I am the creditor.					
RBP 9011(b).	I am the creditor's attorney or authorized agent.					
you file this claim	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.					
lectronically, FRBP 005(a)(2) authorizes courts						
pecifying what a signature	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
3.	I understand that an authorized signature on this Proof of Cleim 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 raudulent claim could be	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the in					
fined up to \$500,000, imprisoned for up to 5	I declare under penalty of perjury that the foregoing is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	Executed on date $\frac{10-14-2016}{MM/DD/YYYY}$					
	July Mur					
	Signature					
	Print the name of the person who is completing and signing this claim:					
•	The To MUERS					
	Name <u>First name</u> Middle hame	Last name				
	Title POES,					
	company <u>MYEES SUPPLY</u> INC.	mine				
	Identify the obrorate servicer as the company if the authorized agent is a se					
	Address 831 THIRD STREET	<u> </u>				
	Hot Springs AR 71913					
	City Sta	te ZIP Code				

Process Date:

Proof of Claim

Myers	
Chemical	

Make Checks Payable to Myors Supply, Inc. Remit Payment To: Dept. 1835 P.O. Box 2153 Birmingham, AL 35287-1835 H.S. 501-623-7742 Emergency Response #800-255-3924



Page 1/1

	— Sold To ·	
EMBASSY	SUITES HOT	SPRINGS
ATT: ACC	COUNTS PAYA	BLE
400 CONV	VENTION BLV	D
HOT SPR	INGS AR 719	01
JOHO Q HA	mmonds F	AIIZOOLUC
	-21117	Dr #INU

EMBASSY SUITES 400 CONVENTION BLVD HOT SPRINGS AR 71901

10 d	ILL PUL	104	
Customer # Order Date	Sales Order #	Buyer Customer P/O #	Ship Via Salesman
0002470 06/02/	2016 2019549		Pick Up 85
Invoice # Invoice Date	a Ship Date	Freight Terms Job Number	Terms
2019549 06/02/	/2016 06/02/16	PREPAID	Net 30 Days

LN	ONTY ORD	onty Ship	onty B/O	PROBUCT NUMBER DESCRIPTION		UOM	NET PRICE	EXTENSION
					***** Invoice			
					Quote Number Q20 delivery hours 8	to	5	
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3	2	2		WI-86305040	GASKET, FLAPPER	Ea	4.5209	\$9.04
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	lax	(GA) <u>28.96</u>
Gerald Harman 06/02/16 14:46	ТОТ	AL \$333.85

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6 Writer: PM

Case 16-21142 Claim 142-1 Filed 10/20/16 Desc Main Document Page 4 of 7



Make Checks Payable to Myers Supply, Inc. Remit Payment To: Dept. 1835 P.O. Box 2153 Birmingham, AL 35287-1835 H.S. 501-623-7742 Emergency Response #800-255-3924

Page 1/1

Sold To	
EMBASSY SUITES HOT	SPRINGS
ATT: ACCOUNTS PAYA	BLE
400 CONVENTION BLV	D
HOT SPRINGS AR 719	01

EMBASSY SUITES 400 CONVENTION BLVD HOT SPRINGS AR 71901

Customer #	Order Date	Sales Order #	Buyer	Customer P/O #	Ship Via	Salesman :
0002470	06/09/2016	2019777			Tr HS2/010	85
Invoice #	Invoice Date	Ship Date	Freight Terms	Job Number	Terms	
2019777	06/10/2016	06/10/16	PREPAID		Net 30 Days	

LŊ	ONTY ORD	ONTY SHIP	onty B/o	PRODUCT	DESCRIPTION			UOM	NET PRICE	EXTENSION
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Signature Proof of Delivery:	Merchandise Freight	1,194.08 0.00
	Shipping & Hand	ling 3.00
	Sub Total Taxable	1,197.08 1.197.08
	Tax (GA)	113.72
Debra 06/10/16 09:28	TOTAL	\$1,310.80

<u>Archive Copy</u>

Pay By 07/10/2016 Wr

Writer: AJB



Make Checks Payable to Myors Supply, Inc. Remit Payment To: Dept. 1835 P.O. Box 2153 Birmingham, AL 35287-1835 H.S. 501-623-7742 Emergency Response #800-255-3924



Page 1/1

Sold To	
•••••	
EMBASSY SUITES HOT SPRIN	N
ATT. ACCOUNTS DAVADIE	
ATT: ACCOUNTS PAYABLE	
400 CONVENTION BLVD	

HOT SPRINGS AR 71901

GS

EMBASSY SUITES 400 CONVENTION BLVD HOT SPRINGS AR 71901

Custamer # 0002470	 Sales Order # 2019826	Buyer	Customer P/D #	Ship Via S Pick Up 8	Salesman 3 5
		Freight Terms	Job Number	<u> </u>	
2019826	1 1			Net 30 Days	

LN ONTY ONTY ONTY ORD SHIP B/O	PRODUCT NUMBER DESCRIPTION	UOM	NET PRICE	EXTENSION
	TP-3302 BLUE FEATHER SO		33.86	\$101.58
	TP-3302 BLUE FEATHER SO TP96/CS SMART SC	CS)FT	33.00	3101.38
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Signature Proof of Delivery:	Merchandise	101.58
	Freight	0.00
h n n h	Misc Charges	0.00
19875	Sub Total	101.58
Under 1	Taxable	101.58
	Tax (GA)	- <u>9.65</u>
DAVID CHITTUM 06/13/16 09:49	TOTAL	\$111.23

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2016 Writer: LB



Make Checks Payable to Myors Supply, Inc. Remit Payment To: Dept. 1835 P.O. Box 2153 Birmingham, AL 35287-1835 H.S. 501-623-7742 Emergency Response #800-255-3924

Page 1/1

Sold To EMBASSY SUITES HOT SPRINGS ATT: ACCOUNTS PAYABLE 400 CONVENTION BLVD HOT SPRINGS AR 71901 ------ Ship To ----EMBASSY SUITES 400 CONVENTION BLVD HOT SPRINGS AR 71901

Custamer #	Order Date	Sales Order #	Buyer	Customer P/O #	Ship Via	Salesman
0002470	06/13/2016	2019847		JQH-856530	Pick Up	85
Invoice #	Invoice Date	Ship Date	Freight Terms	Job Number	Terms	
2019847	06/20/2016	06/20/16	PREPAID		Net 30 Days	

LŊ	ONTY ORD	onty Ship	onty B/O	PRODUCT NUMBER DESCRIPTION	UOM	NET PRICE	EXTENSION
1 2 3	2	2		WI-86008210 SPACER WI-86000740 AXLE	Ea Ea	16.38 78.48	
3	2	2		WI-86004080 GUARD, THREAD	Ea	8.57	\$17.14
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- pt t	Tax	able 128.38
	Tax	(GA) <u>12.20</u>
Gerald Harman 06/20/16 09:36	ТОТ	TAL \$140.58

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Pay By 07/20/2016 Writer: RM

Case 16-21142 Claim 142-1 Filed 10/20/16 Desc Main Document Page 7 of 7

District of Kansas Claims Register

	<u>16-211</u>	42 John Q. H	amn	nons Fall 2006, LLC		
J	udge: Robert	D. Berger C	Chap	ter: 11		
(Office: Kansas	City L	Last I	Date to file claims: 12/2	3/2016	
1	Frustee:	L	Last I	Date to file (Govt):		
831 Third Sti	Iyers Supply, Inc.Original FiledFiled by: CR31 Third StreetDate: 10/20/2016Entered by: Terri Marshallot Springs, AROriginal EnteredModified:					
Amount clai	imed: \$1896.46					
History:						
Details 14	<u>42-</u> 10/20/2016 <u>1</u>	Claim #142 filed (Marshall, Terri)		lyers Supply, Inc., Amount	claimed: \$	1896.46
Description: ((142-1) Goods s	sold				
Remarks: (14	42-1) KSB Filed	10/17/16; ECF b	by Cla	aims Agent 10/20/2016		

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*	\$1896.46
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		