

Fill in this information to identify the case:

Debtor name: John Q Hammons Fall 2006 LLC et al
United States Bankruptcy Court for the District of Kansas at Kansas City
Case number (If known): 16-21142-11

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

ID: 2225
FRANKLIN MACHINE PRODS INC.
PO BOX 781570
PHILADELPHIA, PA 19178-1570

RECEIVED

OCT 25 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

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, 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?

Franklin Machine Products, Inc.
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)

Where should notices to the creditor be sent?

Franklin Machine Products, Inc.
Name
101 Mt. Holly By-Pass
Number Street
Lumberton, NJ 08048
City State ZIP Code

Contact phone 800-257-7737x404
Contact email mcook@fmponline.com

Where should payments to the creditor be sent? (if different)

Franklin Machine Products, Inc.
Name
P.O. Box 781570
Number Street
Philadelphia, PA 19178-1570
City State ZIP Code

Contact phone 800-257-7737x404
Contact email mcook@fmponline.com

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? _____

JOH Ctl ID
00151

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: 5803

7. How much is the claim? \$ 112.69 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.
Goods sold

9. Is all or part of the claim secured? ☒ No ☐ Yes. The claim is secured by a lien on property.

Nature of property:

☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.

☐ Motor vehicle

☐ Other. Describe: _____

Basis for perfection: _____

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ _____

Amount of the claim that is secured: \$ _____

Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ _____

Annual Interest Rate (when case was filed) _____ %

☐ Fixed

☐ Variable

10. Is this claim based on a 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:

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). Amount entitled to priority \$ _____

☐ 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.

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. \$ 112.69

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 10/19/2016

MM/DD/YYYY

Michael Cooper
Signature

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

Name MICHAEL COOPER
First name Middle name Last name

Title CONTROLLER

Company Franklin Machine Products Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 101 Mt. Holly By-Pass
Number Street

Lumberton, NJ 08048
City State ZIP Code

Contact phone (800) 257-7737 Email mcooper@fmponline.com



39363467002225

FRANKLIN MACHINE PRODS INC.
PO BOX 781570
PHILADELPHIA, PA 19178-1570

Franklin Machine Products, Inc.

Parts and Accessories for the Foodservice Industry

Lumberton, NJ • Las Vegas, NV

101 Mt. Holly By-Pass • Lumberton, NJ 08048

Phone: 609-267-3700 • Fax: 609-288-9058

ORIGINAL INVOICE

REPRINT

Invoice Date	Invoice Number
6/15/16	2045600

Bill To

EMBASSY SUITES MURFREESBORO
1200 CONFERENCE CENTER BLVD
MURFREESBORO TN 37129 4320

EMBASSY SUITES MURFREESBORO
ATTN: Norm Magnuson
1200 CONFERENCE CENTER BLVD
MURFREESBORO TN 37129

Ship To

Customer #	Order Date	Customer PO	Ship Via	Terms
0660353-000	6/15/16	66250	UPS GROUND COMMERCIA	NET 30

Quantity Ordered	Quantity Shipped	Quantity Backorder	Item #	Description	Unit Price	UOM	Amount
50	50		102-1021	NUT, LOCK (1-1/2"NPS, ZINC)	1.70	EACH	85.00

Comments

TRACKING: 1Z0720490303687752

Subtotal	85.00
Sales Tax	9.99
Freight & Handling	17.70
Total	112.69

F.O.B. SHIPPING POINT

**PLEASE SEE REVERSE SIDE FOR
IMPORTANT RETURNS INFORMATION**

PLEASE PAY FROM INVOICE

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: (8592541) Franklin Machine Products Inc. 101 Mt Holly Bypass Lumberton, NJ 08048	Claim No: 172 <i>Original Filed</i> Date: 10/26/2016 <i>Original Entered</i> Date: 10/26/2016	Status: <i>Filed by:</i> CR <i>Entered by:</i> Terri Marshall <i>Modified:</i>
Amount claimed: \$112.69		

History:

Details	172-1	10/26/2016	Claim #172 filed by Franklin Machine Products Inc., Amount claimed: \$112.69 (Marshall, Terri)
-------------------------	-----------------------	------------	---

Description: (172-1) Goods Sold

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*	\$112.69
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		