


UNITED STATES BANKRUPTCY COURT		District of Kansas at Kansas City	PROOF OF CLAIM
Name of Debtor: John Q. Hammons Fall 2006, LLC		Case Number: 16-21142-11	
<i>NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.</i>			
Name of Creditor (the person or other entity to whom the debtor owes money or property): Nestle USA		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____	
Name and address where notices should be sent: Nancy Reynoso 30500 Bainbridge Road Solon, OH 44139 Telephone number: (440) 264-7218		<div style="border: 1px solid black; padding: 10px; margin: 0 auto; width: 150px;"> RECEIVED OCT 25 2016 BMC GROUP </div>	
Name and address where payment should be sent (if different from above): Telephone number:		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
1. Amount of Claim as of Date Case Filed: \$ <u>1,089.84</u> If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. <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 filing of the bankruptcy petition or cessation of the debtor's business, 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: \$ _____ <small>*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>	
2. Basis for Claim: <u>Goods Sold</u> (See instruction #2 on reverse side.)		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
3. Last four digits of any number by which creditor identifies debtor: <u>5842</u> 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)			
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate _____ % Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.	
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 7. 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. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:			
Date: <u>10/29/16</u> Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. <u>Nancy Reynoso</u> Authorized Representative		FOR COURT USE ONLY <div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 100px;"> JOH Ctl ID  00134 </div>	

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, there may be exceptions to these general rules.

Items to be completed in Proof of Claim form**Court, Name of Debtor, and Case Number:**

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located 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 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. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your 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:

Use this space to 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.

4. Secured Claim:

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

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

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) 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 to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

Date and Signature:

The person filing 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. 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. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

DEFINITIONS**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 owed a debt by the debtor that arose on or 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 on a debt owed by the debtor that arose 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 should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

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.

INFORMATION**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.psc.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.

STATEMENT OF ACCOUNT

AS OF: October 20, 2016

CREDITOR: Nestlé USA

DEBTOR: John Q. Hammons

DATE	ITEM	DEBIT	CREDIT	TOTAL
5/20/2016	694933 - 9452079883		\$ (154.32)	\$ (154.32)
5/27/2016	694933 - 9448886685		\$ (245.52)	\$ (245.52)
6/20/2016	9460398898	\$ 1,489.68		\$ 1,489.68
	Total Amount Due			\$ 1,089.84

Rep: 01830790 Route: IDERRH

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Remit To: Nestle USA, Inc.
P.O. Box 841933
Dallas, TX 75284-1933

Invoice

Invoice#: 103137008546

Customer#: 4584598
Ref/PO#: XXX

Embassy Suites
1001 Veterans Memorial Pkwy
Saint Charles
MO 63303-2151 Tel# 636 9465544

Sales

Prod	Description	Price	Eaches	ExtPrice	ExtPromo	ExtAmt
HD IC PKG 14OZ						
12196911	CARAMEL CONE	3.480	8	27.84		27.84
12196954	CHOC CHOC CHP	3.480	8	27.84		27.84

HD IC PKG 14OZ	Subtotals		16	55.68		55.68
HD DEST SERIES						
12298030	BROWNIE ALA	3.480	8	27.84		27.84

HD DEST SERIES	Subtotals		8	27.84		27.84
HD SOR PKG 14OZ						
12197513	ZESTY LEMON	3.480	8	27.84		27.84
12197516	MANGO	3.480	8	27.84		27.84
12197736	ORCHRD PEACH	3.480	8	27.84		27.84
12197737	RASPBERRY	3.480	8	27.84		27.84

HD SOR PKG 14OZ	Subtotals		32	111.36		111.36
D/E 3 GAL TB						
12196606	CHOCOLATE	26.850	6	161.10		161.10
12198467	VANILLA	26.850	6	161.10		161.10

D/E 3 GAL TB	Subtotals		12	322.20		322.20
D/E 3 GAL TUB SPC						
12196604	COOKE N CRM	28.700	6	172.20		172.20
12196610	MNT CHOC CHP	28.700	6	172.20		172.20
12196622	COOKEDO	28.700	6	172.20		172.20

D/E 3 GAL TUB SPC	Subtotals		18	516.60		516.60
D/E 3GAL PREM ED TUB						
12196600	BTR PECAN	29.900	6	179.40		179.40
12197059	STRAW CHS CK	29.900	6	179.40		179.40

D/E 3GAL PREM ED TUB	Subtotals		12	358.80		358.80

NE DIB SNG 1/12					
12196849	VAN CRUNCH	1.750	12	21.00	21.00

NE DIB SNG 1/12		Subtotals	12	21.00	21.00
NE TLHS 1/12					
12197950	CHC CHP ORIG	1.750	12	21.00	21.00

NE TLHS 1/12		Subtotals	12	21.00	21.00
HD BAR 1/12					
12273741	CHC DRK CHC	1.750	12	21.00	21.00
12273743	VAN MLK CHOC	1.750	12	21.00	21.00

HD BAR 1/12		Subtotals	24	42.00	42.00
NE PUSH 1/24					
12299700	ORANGE	0.550	24	13.20	13.20

NE PUSH 1/24		Subtotals	24	13.20	13.20
Sales Subtotals			170	1489.68	1489.68

Invoice Summary:

Invoice#: 103137008546

Invoice Date and Time: 06/20/2016 12:45

Sales 1489.68

Today's Invoice Amount Due: 1489.68

Net 25 Days

Original

X

Signed by: b

For Transporter/Non-Transporter quality inquiries, contact:
Nestle USA, Inc.
5929 College Ave.

Nestlé USA

30500 Bainbridge Road
Solon, OH 44138
TEL (440) 264-7327

Nestleusa.com



October 20th, 2016

BMC Group, Inc.
Attn: John Q. Hammons Claims Processing
PO Box 90100
Los Angeles, CA 90009

RE: John Q. Hammons
Case # 16-21142-11

Dear Sirs:

Enclosed is Nestlé USA's proof of claim form and back-up documentation in connection with the above-referenced case. Also attached are two copies of the proof of claim. Please acknowledge the filing of our claim, time stamp a copy for our records and return to my attention.

Enclosed, for your convenience, is a self-addressed stamped envelope.

Sincerely,

Nicholas Iacovone

Nicholas Iacovone
Credit Analyst

Enclosures

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):

<i>Creditor:</i> (8593431) Nestle USA 30500 Bainbridge Road Solon, OH 44139	Claim No: 175 <i>Original Filed</i> Date: 10/27/2016 <i>Original Entered</i> Date: 10/27/2016	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> Terri Marshall <i>Modified:</i>
Amount claimed: \$1089.84		

History:

<u>Details</u>	<u>175-</u>	10/27/2016	Claim #175 filed by Nestle USA, Amount claimed: \$1089.84 (Marshall, Terri)
	<u>1</u>		

Description: (175-1) 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*	\$1089.84
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		