Fill in this in	formation to identify the case:
Debtor 1	John W. Hammons Fall 2006, LLC
Debtor 2 (Spouse, if filing)	
United States B	Bankruptcy Court for the: District of Kansas
Case number	16-21142

RECEIVED

OCT 3 1 2016

BMC GROUP

Official Form 410

Proof of Claim

04/16

00149

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 Public Service Company of New Mexico - PNM creditor? Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor Has this claim been V No acquired from ☐ Yes. From whom? someone else? Where should notices to the creditor be sent? Where should notices Where should payments to the creditor be sent? (if and payments to the different) creditor be sent? **PNM** Federal Rule of Name Bankruptcy Procedure (FRBP) 2002(g) 414 Silver Ave SW MS 0525 Number Number Street 87102 Albuquerque NM State ZIP Code City State ZIP Code Contact phone Contact phone Contact email Uniform claim identifier for electronic payments in chapter 13 (if you use one): V No Does this claim amend one already filed? Yes. Claim number on court claims registry (if known) ____ Filed on MM / DD **☑** No 5. Do you know if anyone else has filed a proof ☐ Yes. Who made the earlier filing? of claim for this claim? JQH Ctl ID

Official Form 410 Proof of Claim page 1
Case 16-21142 Claim 190-1 Filed 11/01/16 Desc Main Document Page 1 of 5

6.	Do you have any number you use to identify the debtor?	No Solution No Solution No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: 2 7 5 1
7.	How much is the claim?	\$\$ 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	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
	claim?	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.
		Parameter 1
		Utility Service Provided
9.	Is all or part of the claim	☑ No
	secured?	☐ 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 <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> .
		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.)
		ar out of the second of the s
		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	☑ No
	lease?	☐ Yes. Amount necessary to cure any default as of the date of the petition. \$
		Tes. Amount necessary to cure any default as of the date of the petition.
11	. Is this claim subject to a	☑ No
	right of setoff?	☐ Yes. Identify the property:
		- res. identity the property

12. Is all or part of the claim	☑ No										
entitled to priority under 11 U.S.C. § 507(a)?	☐ Yes. Check	cone:			Amount entitled to priority						
A claim may be partly priority and partly	Domes 11 U.S.	\$									
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$ person	ices for \$									
endited to priority.	bankru	salaries, or commissions otcy petition is filed or the C. § 507(a)(4).	(up to \$12,850*) earned debtor's business ends,	within 180 days before whichever is earlier.	ore the \$						
		or penalties owed to gove	rnmental units. 11 U.S.C.	§ 507(a)(8).	\$						
	☐ Contrib	\$									
	Other.	Specify subsection of 11	J.S.C. § 507(a)() that a	applies.	\$						
	* Amounts	are subject to adjustment on	4/01/19 and every 3 years at	ter that for cases begu	n on or after the date of adjustment.						
			and the state of t								
Part 3: Sign Below											
The person completing	Check the appr	opriate box:									
this proof of claim must sign and date it.	☐ I am the cr	editor.									
FRBP 9011(b).	☑ I am the cr										
If you file this claim	☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.										
electronically, FRBP 5005(a)(2) authorizes courts	☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.										
to establish local rules specifying what a signature is. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculations. I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculations.											
A person who files a			- Control of the Cont								
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. I have examined the information in this <i>Proof of Claim</i> 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 10/25/2016											
								MM / DD / YYYY	- 3:		
								-atta Ma			
		MALLE	1								
	Signature										
	Print the name	of the person who is co	ompleting and signing t	his claim:							
	Name	Sabrina		Davis-McM	eans						
	Addition 000	First name	Middle name	Las	st name						
	Title	Credit Representa	ative								
	Company	Public Service Co	mpany of New Mex	co - PNM							
	•	Identify the corporate ser	vicer as the company if the a	uthorized agent is a ser	rvicer.						
	Address	414 Silver Ave SV	V MS 0525								
,	, adicos	Number Street			_ 1 - 1 = 1 = 1						
		Albuquerque		NM 8	37102						
		City		State ZIF	^o Code						
	Contact phone	505-246-5823		Email							

DUE DATE 07/28/2016 \$56,843.89

ACCOUNT NUMBER

115622751 - 1235093 - 1

Service Address: WINEGA

WINEGARDNER & HAMMONS 1000 WOODWARD PL NE

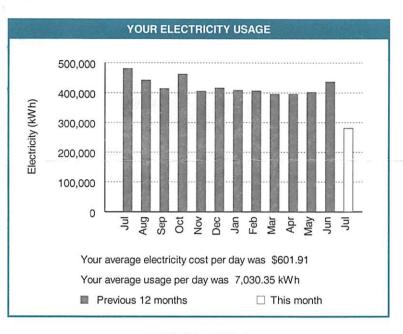
ALBUQUERQUE, NM

Bill Issued:

07/06/2016

Page:

1 of 2



HOW TO REACH US

Online: PNM.com

P: 245 - 100010

Phone: 1-888-DIAL-PNM (1-888-342-5766)

Para Español oprima 8

Monday - Friday 7:30 AM - 6:00 PM

YOUR TOTAL CHARGES			
Amount Of Your Last Bill	\$38,119.50		
Payments Received	\$32,767.25		
Balance Before Current Bill	\$70,886.75		
Your Current Electricity Charges	\$24,076.64		
Adjustments	-\$38,119.50		
Total Amount Due	\$56,843.89		

FINAL BILL

See page 2 for important information.

Please return this portion with payment

Service Address: WINEGARDNER & HAMMONS 1000 WOODWARD PL NE ALBUQUERQUE, NM

PNM

00024532501

PO Box 27900 Albuquerque, NM 87125-7900

DUE DATE	AMOUNT DUE
07/28/2016	\$56,843.89
ACCOUN	T NUMBER

Your donation to the PNM Good Neighbor Fund provides assistance to those in need.
PNM shareholders match your donation: \$_____

TOTAL ENCLOSED \$



Meter	Meter Read	Days	Meter	0778068	Meter			
Read	Date	Billed	Present	Previous	Constant		Total kWh	Rate
Actual	06/26/2016	20	9745	- 9400	X 300.000	=	103509.000	4B
Meter Read	Meter Read Date	Days Billed	Meter Present	0778068 Previous	Meter Constant		Total kWh	Rate
Actual	06/26/2016	20	26453	- 25534	X 300.000	=	275700.000	4B

Total kWh:Read x Constant x 1.02 Volt

Adj = 386793.180 kWh

Non-Res, Lrg Pwr TOU Dist Equip Lse-

EN1A

Percent of kWh Used On-Peak	37.54%	
On-Peak Use and Charge	105,570.000 kWh@ \$ 0.0704373	\$7,436.07
Off-Peak Use and Charge	175,644.000 kWh@ \$ 0.0365815	\$6,425.32
On-Peak Fuel Cost Adjustment	105,570.000 kWh@-\$ 0.0067205	-\$709.48
Off-Peak Fuel Cost Adjustment	175,644.000 kWh@-\$ 0.0067205	-\$1,180.42
On-Peak Renewable Energy Rider	105,570.000 kWh@ \$ 0.0048409	\$511.05
Off-Peak Renewable Energy Rider	175,644.000 kWh@ \$ 0.0048409	\$850.28
Desires feed first seets and concretion		

2.967%

2.000%

5.1250%

1.0000%

1.0625%

Reduces fossil fuel costs and generation

Service Charge (includes 1st 500 kW of billed demand)	
Demand Reading	2.260
Actual Demand (Read x Constant x Volt Adj.)	691.560
Billable Demand	691.560
Billed demand and charge above 500 kW Rkva Reading	191.560 0.990
Actual Rkva (Read x Constant x Volt	302.940

Adj.) Allowed Rkva (48% of Billable Demand) 331.948 0.000 Billed Rkva and Charge

Cost-Effective Energy Saving Prog. City/County Franchise Fee Gross Receipts Tax

State County City

Current Electricity Charges

\$5,823.33

@ \$17.4700000 \$2,231.03

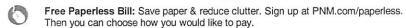
@\$0.2700000

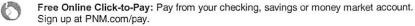
\$0.00 \$634.56

> \$440.43 \$1,151.19 \$224.62

\$238.66 \$24,076,64

WAYS TO PAY YOUR BILL





Free Automatic Payment: Recurring payments from your checking or savings account with a paper bill or an email bill, your choice. Sign up for Automatic Payment at PNM.com/pay.

Online Banking: pay your PNM bill online at your bank's website. Visit your bank website for more information.

Pay in person: Visit dozens of participating Western Union offices. See PNM.com/wu for current locations. \$1.00 fee applies.

Pay by Credit, Debit Card or Electronic Check: Make one-time payments with Visa, MasterCard & Discover online. A \$2.95 processing fee applies. PNM does not receive any portion of this fee. More info at PNM.com/pay.

Visit PNM.com/paybill for more information on these and other bill options available to you.

DUE DATE AMOUNT DUE 07/28/2016 \$56,843.89 ACCOUNT NUMBER 115622751 - 1235093 - 1

Service Address: WINEGARDNER & HAMMONS

1000 WOODWARD PLNE ALBUQUERQUE, NM

Page: 2 of 2

MESSAGE CENTER

FINAL BILL

This closing statement covers your charges and usage up to the date your service(s) were disconnected. We appreciate your prompt remittance of the closing balance. Any balance remaining after the due date is considered delinquent. An overdue balance could affect your credit rating and could result in your account being referred to a collection agency. For ways to pay your bill, see the back of the payment stub below.

> When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer (EFT) from your account or to process the payment as a check. When we make an EFT, funds may be withdrawn from your account the same day we receive your payment, and your check will not be returned to you from your financial institution.

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: (8597743) Claim No: 190 Status:
Public Service Company of New Mexico-PNM Date: 11/01/2016 Entered by: Terri Marshall 414 Silver Avenue SW MS Claim No: 190 Status:

Original Filed by: CR Entered by: Terri Marshall Modified:

414 Silver Avenue SW MS Original Entered 0525 Original Entered Date: 11/01/2016

Albuquerque, NM 87102

07 1UZ

Amount claimed: \$56843.89

History:

Details 190-1 11/01/2016 Claim #190 filed by Public Service Company of New Mexico-PNM, Amount claimed: \$56843.89 (Marshall, Terri)

Description: (190-1) Services Performed

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*	\$56843.89
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		