

Fill in this information to identify the case:

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

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

ID: 13228
 SMITH, ASHLEY BROOK
 710 W FLORIDA ST APT E
 GREENSBORO, NC 27406-3009

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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

04/16

Official Form 410

Proof of Claim

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

<p>1. Who is the current creditor?</p>	<p><u>John Q. Hammons Fall 2006, LLC</u> Name of the current creditor (the person or entity to paid for this claim) Other name the creditor used with the debtor _____</p>	
<p>2. Has this claim been acquired from someone else?</p>	<p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. From whom? <u>D/K</u></p>	
<p>3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)</p>	<p>Where should notices to the creditor be sent? <u>Ashley B. Smith</u> Name <u>710 W. Florida St. Apt E</u> Number Street <u>Greensboro N.C. 27406</u> City State ZIP Code Contact phone <u>(330) 554-4787</u> Contact email <u>Ashleybmx1130@gmail.com</u></p>	<p>Where should payments to the creditor be sent? (if different) Name _____ Number Street _____ City State ZIP Code _____ Contact phone <u>(334) 668-4535</u> Contact email _____ Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____</p>
<p>4. Does this claim amend one already filed?</p>	<p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>16-21142</u> Filed on <u>6/26/2016</u> MM/DD/YYYY</p>	
<p>5. Do you know if anyone else has filed a proof of claim for this claim?</p>	<p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____</p>	

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: 1142
Last digits of case #

7. How much is the claim? \$ 0/K. 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.
Money

9. Is all or part of the claim secured? 0/K 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? DK 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:

Amount entitled to priority

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). \$ _____
- 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. \$ _____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

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.

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

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.

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 6/26/16
MM/DD/YYYY

Angela B. Green
Signature

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

Name Angela Brook Smith
First name Middle name Last name

Title _____

Company Embassy Suites 204 Centerport Dr.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 204 Centerport Dr, Greensboro
Number Street

City N.C. State 27409 ZIP Code

Contact phone _____ Email _____



39363560013228

SMITH, ASHLEY BROOK
710 W FLORIDA ST APT E
GREENSBORO, NC 27406-3009

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

RECEIVED
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If you have already filed a proof of interest with the Bankruptcy Court or BMC, you do not need to file again.
 THIS SPACE IS FOR COURT USE ONLY

See Appendix A to bar date notice for list of debtors and case numbers to be used for that purpose.

NOTE: This form SHOULD NOT be used to make a claim against Debtor for money owed. A separate Proof of Claim form should be used for that purpose. This form should only be used to assert an Interest in a Debtor. An Interest, as used herein, refers specifically to an equity security within the meaning of 11 U.S.C. §101(16). Parties not asserting an interest SHOULD NOT file a proof of interest at this time.

Proof of Interest Form

4/16

Read the instructions before filling out this form. This form is for asserting an interest in a bankruptcy case. Do not use this form to make a request for payment of a claim or 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 interest, 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 form 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 interest as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

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Part 1: Identify the Interest							
1. Who is the current interest holder?	<u>John Q. Hammons Fall 2006, LLC</u> <small>Name of the current interest holder (person or entity holding the interest)</small> <small>Other name the interest holder used with the debtor: _____</small>						
2. Has this interest been acquired from someone else?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. From whom? <u>DIK</u>						
3. Where should notices and payments to the interest holder be sent?	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> Where should notices to the interest holder be sent? <u>Ashley B. Smith</u> <small>Name</small> <u>710 W. Florida St. Apt E</u> <small>Number Street</small> <u>Greensboro N.C. 27406</u> <small>City State ZIP Code</small> </td> <td style="width: 50%; border: none;"> Where should payments to the interest holder be sent? (if different) _____ <small>Name</small> _____ <small>Number Street</small> _____ <small>City State ZIP Code</small> </td> </tr> <tr> <td style="border: none;"> Contact phone <u>(336) 554-4787</u> Contact email <u>Ashleybwdic13@gmail.com</u> </td> <td style="border: none;"> Contact phone <u>(336) 668-4535</u> Contact email _____ </td> </tr> <tr> <td colspan="2" style="border: none;"> Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____ </td> </tr> </table>	Where should notices to the interest holder be sent? <u>Ashley B. Smith</u> <small>Name</small> <u>710 W. Florida St. Apt E</u> <small>Number Street</small> <u>Greensboro N.C. 27406</u> <small>City State ZIP Code</small>	Where should payments to the interest holder be sent? (if different) _____ <small>Name</small> _____ <small>Number Street</small> _____ <small>City State ZIP Code</small>	Contact phone <u>(336) 554-4787</u> Contact email <u>Ashleybwdic13@gmail.com</u>	Contact phone <u>(336) 668-4535</u> Contact email _____	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
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Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____							
4. Does this form amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) <u>16-21142</u> Filed on <u>10/24/2016</u> <small>MM/DD/YYYY</small>						
5. Do you know if anyone else has filed a proof of interest for this interest?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____						

Part 2: Give information about the Interest 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: 1142
Last digits of case #

7. Type of interest: _____
 Indicate if your Interest is based on actual shares of stock held in the Debtor or a membership interest held in the debtor or something else:
 Number of shares held or percentage of membership interest: D/K
 Indicate if your Interest is based on anything else and describe that interest: _____

Part 3: Sign Below

The person completing this proof of interest must sign and date it. FRBP 9011(b).

If you file this form electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent form 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 interest holder.
 I am the interest holder'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 have examined the information in this *Proof of Interest* 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 6/26/16
 MM/DD/YYYY

Signature: Ashley B. Green
 Name: Ashley Brook Smith
 First name Middle name Last name

Title: _____

Company: Embassy Suites
 Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 204 Centreport Dr. Greensboro
 Number Street

N.C. 27409
 City State ZIP Code

Contact phone: _____ Email: _____