

Fill in this information to identify the case:

Debtor name: John & Harmons 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: 479
UNITED RENT-ALL MID CITY
811 S 48TH ST
OMAHA, NE 68106-1997

RECEIVED
NOV 03 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?
UNITED RENT-ALL, MIDCITY
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?
UNITED RENT-ALL
Name
811 South 48th Street
Number Street
Omaha NE 68106
City State ZIP Code
Where should payments to the creditor be sent? (if different)
Name
Number Street
City State ZIP Code
Contact phone 402-556-1600
Contact email EMAIL@UNITEDRENT-ALL-OMAHA.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 Ct ID
00174

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: 42609

7. How much is the claim? \$ 1,217.29 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.
LEASED goods (Rented party items)

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. \$ 1,217.29

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.

<input type="checkbox"/> 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 \$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> 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).
 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 31 2016
 MM/DD/YYYY

David Billig
 Signature

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

Name David Baron Billig
 First name Middle name Last name

Title MANAGER

Company UNITED Rent-All Midcity
 Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 811 South 48th
 Number Street

Dunwoody NE 68106
 City State ZIP Code

Contact phone 402-556-1600 Email Emilie@UNITEDRENT-ALL@maha.com



39363467000479

UNITED RENT-ALL MID CITY
811 S 48TH ST.
OMAHA, NE 68106-1997

United Rent-All
 811 South 48th Street
 Omaha, NE 68106
 402 556-1600

INVOICE 2000307
 RESERVATION 424826

Dave
 Entered by MLS on 06-02-16

Processed On 06-20-16
CLOSED (PAY FROM THIS) - CHARGE ACCOUNT

042609 06-17-16
 Embassy Suites LaVista 402 331-7400
 12520 Westport Pkwy 402 408-5466 06-20-16
 La Vista, NE 68128
 SAME 06-20-16
 12:00pm

	Meter Out/In	Hourly	Minimum	Daily	Weekly	Monthly	Extended
0033-0542			24 HRS				
196 Chair Cover Linen, White (STRETCH)			2.00	2.00			392.00
0033-0298			24 HRS				
180 Tie - Mint Green			1.50	1.50			270.00
0033-1391			24 HRS				
20 Tie - Navy Blue7"			1.50	1.50			30.00
0900-0007				MFG LABOR # 7			
196 Labor To Install Chair Cover & Sash		1.00					196.00
DELIVERY / PICKUP CHARGE			45.00				45.00

7.00

SUB TOTAL 933.00
 Damage Waiver 48.44
 TAX EXEMP # (BELOW)
 01010161341
 GRAND TOTAL 981.44

BALANCE DUE 981.44
 \Net 30\Serv Chg 1.5%

>> DELIVER ON 06-17-16 ** A.M. ** PICK UP 06-20-16 ** A.M. ** <<

Contact: Rachel
 Delivery Friday After 2pm
 Pickup Monday AM

HOURS:
 Mon/Sat 7:30-6:00pm
 CLOSED SUNDAYS

United Rent-All
 811 South 48th Street
 Omaha, NE 68106
 402 556-1600

INVOICE 1999846
 RESERVATION 424769

Dave
 Entered by ALM on 06-01-16

Processed On 06-07-16
CLOSED (PAY FROM THIS) - CHARGE ACCOUNT

042609 06-02-16
 Embassy Suites LaVista 402 331-7400
 12520 Westport Pkwy 402 408-5466 06-04-16
 La Vista, NE 68128
 Same 06-07-16
 10:55am

	Meter Out/In	Hourly	Minimum	Daily	Weekly	Monthly	Extended
0033-0040							
10 Linen 84" Sq Burgundy			5.50	5.50			55.00
0033-0267							
1 Linen Bag (No Charge)							
DELIVERY / PICKUP CHARGE			25.00				25.00

7.00

SUB TOTAL 80.00
 Damage Waiver 3.85
 TAX EXEMP # (BELOW)
 01010161341
 GRAND TOTAL 83.85

BALANCE DUE 83.85
 \Net 30\Serv Chg 1.5%

>> DELIVER ON 06-02-16
 Del Thursday With Other Order
 Pick Up Saturday

PICK UP 06-04-16

HOURS:
 Mon/Sat 7:30-6:00pm
 CLOSED SUNDAYS

United Rent-All
 811 South 48th Street
 Omaha, NE 68106
 402 556-1600

INVOICE 2000184
 RESERVATION 425149

Dave
 Entered by MLS on 06-15-16

Processed On 06-17-16
CLOSED (PAY FROM THIS) - CHARGE ACCOUNT

042609 06-16-16
 Embassy Suites LaVista 402 331-7400
 12520 Westport Pkwy 402 408-5466 06-18-16
 La Vista, NE 68128
 SAME - Windsor Ballroom 06-17-16
 05:41pm

	Meter Out/In	Hourly	Minimum	Daily	Weekly	Monthly	Extended
0036-0050			24 HRS				
100 Pitcher Water 64oz Plastic			1.00	1.00			100.00
DELIVERY / PICKUP CHARGE			45.00				45.00

7.00

SUB TOTAL 145.00
 Damage Waiver 7.00
 TAX EXEMP # (BELOW)
 01010161341
 GRAND TOTAL 152.00

BALANCE DUE 152.00
 \Net 30\Serv Chg 1.5%

>> DELIVER ON 06-16-16 ** A.M. ** PICK UP 06-18-16 ** A.M. ** <<
 Delivery Thursday 1st AM
 Pickup Friday AM

HOURS:
 Mon/Sat 7:30-6:00pm
 CLOSED SUNDAYS

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> (8511407) UNITED RENT ALL MID CITY 811 S 48TH STREET OMAHA NE 68106	Claim No: 217 <i>Original Filed</i> Date: 11/07/2016 <i>Original Entered</i> Date: 11/07/2016	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> Terri Marshall <i>Modified:</i>
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Amount claimed: \$1217.29				
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History:

Details	217-1	11/07/2016	Claim #217 filed by UNITED RENT ALL MID CITY, Amount claimed: \$1217.29 (Marshall, Terri)
<i>Description:</i> (217-1) Goods Sold			
<i>Remarks:</i>			

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*	\$1217.29
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		