Fill in this information to identify the case:	ID: 2123 KILLINGSWORTH ENVIRONMENTAL
Debtor name: JOHN & HAMMONS FAIL	1407 AIRPORT RD MONROE, NC 28110-7391
United States Bankruptcy Court for the District of Kansas at Kansas City Case number (If known):	
See Appendix A to bar date notice for list of debtors and case numbers.	RECEIVED
	NOV 08 2016
	BMC GROUP
Official Form 410	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
Proof of Claim	04/16
Read the instructions before filling out this form. This form is for making a claim fo request for payment of an administrative expense, except for administrative expense.	
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

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?	KillingsWorth Ennonmuntal OF the Carolings, LLC 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? KillingSWorth Environmental Name 1407 Airport Poad Number Street Monton Number Street Monton No State ZIP Code Contact phone 104-503-9187 Contact email Danna Snod grass althebig grean Ks.con Uniform claim identifier for electronic payments in chapter	Number Street City State ZIP Code Contact phone		
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?	00179		
Case 16-2 Official Form 410	21142 Claim 230-1 Filed 11/09/16 [Proof of Claim	Desc Main Document — Page 1 of 18		

Part 2: Give informa	ition about the Claim as of the Date the Case was Flied
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: 141239
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).
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.
	services vendered
9. Is all or part of the claim secured?	No Yes. The claim is secured by a lien on property. Number 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: Heads for perfection: Attachment (official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: Heads 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: \$
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?	V No Yes. Identify the property:

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12. Is all or part of the claim entitled to priority under				
11 U.S.C. § 507(a)?	Yes. Check all that apply:	Amount entitled to priority		
A claim may be partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$		
priority and partly nonpriority. For example, in some categories, the	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).	\$		
law limits the amount entitled to priority.	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 aft	er 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	Check the appropriate box:			
sign and date it. FRBP 9011(b).	I am the creditor.			
If you file this claim	I am the creditor's attorney or authorized agent.			
electronically, FRBP 5005(a)(2) authorizes courts	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.			
to establish local rules specifying what a signature	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.			
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgmen amount of the claim, the creditor gave the debtor credit for any payments received toward the			
A person who files a	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.			
fined up to \$500,000,	I declare under penalty of perjury that the foregoing is true and correct.			
vears. or both.	Executed on date $\frac{11/04/2016}{2016}$			
3571.				
	<u>Blandynodana</u> Signature			
	Print the name of the person who is completing and signing this claim:			
	Name Deanna Rone S	hodg 1966		
	Title <u>Collections Finance Manager</u>			
	Company KillingSW07Hh Environmental of the Identify the corborate servicer as the company if the authorized agent is a ser	Capolinas, LC		
	Address 1407 Airport Road			
	Monvoe	28173		
	Contact phone <u>FOA-503-8787 CH 9225</u> Email Deanna			

\$

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39363467002123

KILLINGSWORTH ENVIRONMENTAL 1407 AIRPORT RD MONROE, NC 28110-7391

Case 16-21142 Claim 230-1 Filed 11/09/16 Desc Main Document Page 4 of 18

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Debtor name:

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United States Bankruptcy Court for the District of Kansas at Kansas City

Case number (If known):

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.

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RECEIVED
NOV 0 8 2016
BMC GROUP
Divic Officer
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
4/16

Proof of Interest Form

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.

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 th	e Interest			
1. Who is the current interest holder?				
	Name of the current interest holder (person or entity holding the	e interest)		
	Other name the interest holder used with the debtor			
2. Has this interest been acquired from someone else?	No Yes. From whom?			
3. Where should notices and payments to the interest holder be sent?	Where should notices to the interest holder be sent?	Where should payments to the interest holder be sent? (if different)		
	Name	Name		
	Number Street	Number Street		
	City State ZIP Code	City State ZIP Code		
	Contact phone	Contact phone		
	Contact email	Contact email		
	Uniform claim identifier for electronic payments in chapter 13	(if you use one):		
4. Does this form amend one already	No No			
filed?	Yes. Claim number on court claims registry (if known)	Filed on MM / DD / YYYY		
5. Do you know if	No			
anyone eise has	Yes. Who made the earlier filing?			
filed a proof of interest for this				
interest?				

Page 5 of 18

Part 2:	Give information	about the Interest a	s of the Date the	Case Was Filed
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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:
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: Indicate if your Interest is based on anything else and describe that interest:

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Part 3: Sign Below

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The person completing	Check the app	ropriate box:				
this proof of interest must sign and date it.	I am the	e interest holder.				
FRBP 9011(b).	I am the interest holder's attorney or authorized agent.					
If you file this form	I am the	trustee, or the debtor, or	their authorized ag	ent. Bankruptcy Rule 300	4.	
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	I have examine	ed the information in this <i>I</i>	Proof of Interest and	l have a reasonable belief	that the info	rmation is true and correct.
is.	I declare under	penalty of perjury that the	e foregoing is true a	and correct.		
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.	Executed on da	ate MM / DD / YYYY	-			
	Signature					
	Name	First name	M	liddle name	Last n	
		Thou hame			Lastin	
	Title					
	Company					
		Identify the corporate se	ervicer as the comp	any if the authorized agen	t is a service	r.
	Address	Number	Street			
		Humber				
		City			State	ZIP Code
					Oldie	
	Contact phone			Email		

Case 16-21142 Claim 230-1 Filed 11/09/16 Desc Main Document Page of 18

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Official Form 410 Instructions for Proof of Claim

United States Bankruptcy Court

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04/16

These instructions and definitions generally explain the law. In certain circumstances, such as bankruptcy cases that debtors do not file voluntarily, exceptions to these general rules may apply. You should consider obtaining the advice of an attorney, especially if you are unfamiliar with the bankruptcy process and privacy regulations.

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.

How to fill out this form

 \blacksquare Fill in all of the information about the claim as of the date the case was filed.

■ Fill in the caption at the top of the form.

■ If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.

Attach any supporting documents to this form.

Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *redaction* on the next page.)

Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).

Do not attach original documents because attachments may be destroyed after scanning.

■ If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents. ■ A Proof of Claim form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth. See Bankruptcy Rule 9037.

■ For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian. For example, write A.B., a minor child (John Doe, parent, 123 Main St., City, State). See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, enclose a stamped self-addressed envelope and a copy of this form. You may view a list of filed claims in this case by visiting the Claims and Noticing Agent's website at: <u>www.bmcgroup.com/JOH</u>.

Understand the terms used in this form

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate. 11 U.S.C. § 503.

Claim: A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. $\S101$ (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. §101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages. Claims entitled to administrative priority under 11 U.S.C. §503(b)(9) should be asserted by filling in the appropriate information on this Proof of Claim form. All other administrative claims must be asserted by an appropriate "request" under 11 U.S.C. §503(a) and should not be asserted on this Proof of Claim form.

Proof of claim: A form that shows the amount of debt the debtor owed to a creditor on the date of the bankruptcy filing. The form must be filed in the district where the case is pending.

Redaction of information: Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to **privacy** on the *Proof of Claim* form and any attached documents.

Secured claim under 11 U.S.C. §506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

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 may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some 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, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Please send completed Proof(s) of Claim to:

If by Regular Mail:

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

If by Messenger or Overnight Delivery:

BMC Group, Inc. Attn: John Q Hammons Claims Processing 3732 W 120th Street Hawthorne, CA 90250

Do not file these instructions with your form



Bill To: Embassy Suites-Concord Embassy Suites-Concord/Alan Benson 5400 John Q Hammon Dr Concord, NC 28027-3401 Account Number 141239

Statement Date 10/12/2016

Statement Number undefined

Services Provided

Date	Invoice #	Description	Address	Amount	Balance
6/20/2016	680925-2	K-9 SCENT-KW	5400 John Q Hammon Dr Concord, NC 28027-3401	\$400.00	\$400.00
6/10/2016	718590	BED BUG HEAT-KW	5400 John Q Hammon Dr Concord, NC 28027-3401	\$850.00	\$850.00
6/20/2016	722071	BED BUG HEAT-KW	5400 John Q Hammon Dr Concord, NC 28027-3401	\$850.00	\$850.00
Total					100.00

Please return this portion with your payment.

Remit To 1407 Airport Road	Amount Paid:	Check No.:	
Monroe, NC 28110 1-800-852-8419	Credit Card No.:		
Account Number 141239	Expiration:	CVC Code:	
Statement Number undefined	Signature:		
undenned		ASSERTED VISA MILITARY DISCOVER	



Account Number

141239

Invoice Date June 10, 2016

Invoice Number 718590

Service Location: 5400 John Q Hammon Dr Concord, NC 28027-3401

\$850.00 **BED BUG HEAT-KW**

Total

Comments

Room 422

Please return this portion with your payment.		
Remit To 1407 Airport Road	Amount Paid:	Check No.:
Monroe, NC 28110 1-800-852-8419	Credit Card No.:	
Account Number 141239	Expiration:	CVC Code:
	Signature:	
Invoice Number 718590	-	



Bill To: Embassy Suites-Concord Embassy Suites-Concord/Alan Benson 5400 John Q Hammon Dr Concord, NC 28027-3401

1/1

\$850.00

Bed Bug	1407 Airport Road
Deu Dug	Monroe, NC 28110
Treatment Rep	00000000000000000000000000000000000000
Observations Other Findings/Additional Unit Requirements or Observations:	Treatment Specifications 1959PW Single Family Dwelling CA010439 Apartment/Condo CA010439 Neat and Orderly Clothing stuffed in plastic bags Closets packed with clothes and storage Clothes in piles on the floor Blood stains on the walls Blood stains on the mattress/box springs Ground plug outlet Live bed bug observed Multiple mattresses stacked Apartment too full to properly inspect Trailor Access Containment Wall Multiple Levels Power for fans Fire sprinkler heads Open Areas Cathedral Ceilings See notes below for additional concerns Recommend Heat Treatment Number of Beds
Treatment: Heat treatment	LEVEL OF SEVERITY:
Option 1:	 Light (only evidence was seen on a bed in one room) Moderate (visible evidence in several rooms)
Option 2:	 Heavy (live bed bugs in more than 1 room, collecting on ceiling
Treatment rooms/areas: Room 422	

Chemical Heaters	Amount 4	Pest Bed bugs
Fans	2	Bed bugs
Steamer	1	
Preparation Protocol adhea Payment I	rd to: Yes Yes	No (Additional Charges May Apply)
Bed Bug Treatment Cost: \$_	850 Bed Bu	g Warranty: \$ N/a
Case 16-21242 Claim 230	- <u>1 Filed</u> 11/09/16 D <u>e</u>	sc Main Document age 11 of 18
Accepted by Owner		Accepted by Technician

Bed Bug Green SolutionTreatmentGeneral Terms and Warranty Conditions

1. LIMITS OF LIABILITY - Although Bcd Bug Green Solution will exercise reasonable care in performing services under this contract, to the fullest extent permitted by law. Bed Bug Green Solution disclaims any and all liability for incidental or consequential damages arising from this service. By signing this Contract, Customer waives any and all claims for damage to the property or people resulting directly or indirectly from work performed by Bed Bug Green Solution with the sole exception of claims for damages due to gross negligence of Bed Bug Green Solution and/or its employees*.

2. SPECIFIC EXCLUSIONS - This contract does not cover and Bed Bug Green Solution will not be responsible for:

- a. Expenses related to the replacement of linen, upholstery, furniture, mattress, or related costs
- Expenses related to medical evaluation or treatment for bites associated with bed bugs
- c. Damages or expenses for any claim of personal injury related to an infestation of bed bugs
- d. Loss of income claimed to be related to any bed bug bites or associated illnesses
- e. Additional exclusions:_____

3. CUSTOMER'S OBLIGATIONS - Customer agrees to maintain the premises subject to this contract in a condition which does not promote infestation of bed bugs. Specifically, Customer agrees to maintain the premises in a reasonably clean and sanitary condition, and to keep the structure in such a state of repair so as to avoid providing easily accessible means of access to bed bugs. Customer agrees to disclose any home remedy products or any chemical treatment within the last 30 days. If premises is found in a different condition at time of treatment than the condition the premises was in at time of inspection, additional charges may apply.

4. NOTICE OF CLAIMS, ACCESS TO PROPERTY - Any claim under the terms of the contract must be made immediately in writing to Bed Bug Green Solution. Bed Bug Green Solution is only obligated to perform under this contract if customer allows Bed Bug Green Solution access to the identified structure for any purpose contemplated by the contract including but not limited to re-inspection, whether the inspection was requested or considered necessary by customer or required by the contract and requested or considered necessary by Bed Bug Green Solution. In the event Bed Bug Green Solution is denied access to the interior of the structure, Bed Bug Green Solution will not provide treatment and Customer agrees to pay a service charge for a return visit to provide treatment of the structure.

5. DISCLAIMER OF WARRANTY AND RENEWAL OF CONTRACT² If a Bed Bug warranty option is approved on the front of this contract, it will include an inspection with one of our canine scent detection teams to clear the residence for this warranty. The warranty includes a free heat treatment up to \$1,500 if any live activity occurs during the contract period. Warranty does not cover homes with current bed bug activity. Either party may cancel this contract at any time on thirty (30) days written notice to the other party. The renewal fee will not be adjusted. Customer understands that Bed Bug Green Solution's liability under this contract is limited to providing a REMEDIAL TREATMENT ONLY and in no way, implied or otherwise is Bed Bug Green Solution responsible for the repair or replacement of any content of the structure(s). Warranty will also be void if customer does not maintain the yearly inspection. Homeowner must be home at the time of inspection and inspection fee paid at the time of service for the warranty to be valid.

*Homeowner understands that option 1 represents the primary treatment option second and a second by Bed Bug Green Solution - iled 11/09/16 Option 2 is a lesser alternate course of action that does not

6. ENTIRE CONTRACT AND SEVERABILITY - This contract, together with any attachment(s) if any, signed by Bed Bug Green Solution and customer constitutes the entire contract between the parties and no other representations or statements whether written or oral, will be binding upon the parties. If any part of this contract is held to be invalid or unenforceable for any reason, the remaining terms and conditions of this contract will remain in full force and effect.

7. NON-PAYMENT - Customer will pay Bed Bug Green Solution invoices upon receipt. Bed Bug Green Solution may terminate this contract if payment is not received within thirty (30) days of the date of invoices. In the event legal action is necessary to collect any amount due Bed Bug Green Solution shall be entitled to recover from the customer all reasonable costs collections, including reasonable attorney's fees and expenses, in addition to any outstanding amount due Bed Bug Green Solution. This contract and any extension of its term will be effective only upon payment of the charges as provided within.

8. TERMINATION - Bed Bug Green Solution's liability under this contract will terminate and Bed Bug Green Solution will be excused from the performance of any obligations under the contract should:

- a. Customer utilizes any home remedy products, "do-it-yourself" products, over-the-counter products or any chemicals to eradicate bed bugs, termites, insects, spiders, beetles, or rodents that could cause a negative resolution or chemical reaction.
- b. Bed Bug Green Solution be prevented or delayed from fulfilling its responsibilities under the terms of this contract by reasons or circumstances reasonably beyond Bed Bug Green Solution's control, including, but not limited to, acts of any duly constituted government authority, acts of God, or refusal of customer to allow Bed Bug Green Solution access to the structure(s for the purpose of treatment or carrying out the terms and conditions of this contract.

9. ARBITRATION - Customer and Bed Bug Green Solution agree that any controversy or claim between them rising out of or relating to this Contract will be settled exclusively by arbitration, except that Bed Bug Green Solution reserves the right to sue Customer in a court of law for any amount due Bed Bug Green Solutior from Customer. Such Arbitration will be conducted in accordance with the commercial arbitration rules, then in force, of the American Arbitration Association The arbitration award will be final and binding on both parties. Judgment upon such arbitration award may be entered in any court of competent jurisdiction. The arbitrator will not have the power of authority to award exemplary, treble, liquidated, or punitive damages.

10. CHANGE IN LAW - This contract shall be interpreted, regulated, and adjudicated in accordance with applicable federal, state, and local laws and regulations as they exist at the time this contract is executed. Should any federal, state, or local law or regulation be changed regarding Bed Bug Green Solution services or treatment Bed Bug Green Solution may take whatever steps are necessary to comply with said laws.

By signing this Contract, I, the Customer certify thabave read and fully understand the provisions on the front and back of this Contract with all its terms and conditions without limitation, and it being specifically understoc thatBed Bug Green Solutiom the undersigned are bound only by the terr and conditions of this Contract and not by any other representations oral or otherwise.



Desc Main Doctomer Real of 18 There are no warranties which extend beyond the description on Killingsworth



Bill To: Embassy Suites-Concord Embassy Suites-Concord/Alan Benson 5400 John Q Hammon Dr Concord, NC 28027-3401 Account Number 141239

Invoice Date June 20, 2016

Invoice Number 722071

Service Location: 5400 John Q Hammon Dr Concord, NC 28027-3401

\$850.00

BED BUG HEAT-KW	\$850.00

Total

Comments

room 508

Please return this portion with your payment.				
Remit To 1407 Airport Road	Amount Paid:	Check No.:		
Monroe, NC 28110 1-800-852-8419	Credit Card No.:			
Account Number 141239	Expiration:	CVC Code:		
	Signature:			
Invoice Number	-			
722071		Master Cito VISA		

Bed Bug	1407 Airport Road Monroe, NC 28110
Treatment Rep	Cort (704) 821-2810 N.C. Lic. #1383PW 1919PW 1956PW
Image: Content of the second state	Impactment Specifications S.C. Lic. #CA017855 Single Family Dwelling CA010439 Apartment/Condo CA010439 Neat and Orderly Clothing stuffed in plastic bags Closets packed with clothes and storage Clothes in piles on the floor Blood stains on the walls Blood stains on the mattress/box springs Ground plug outlet Ground plug outlet
Homeowner: Embassy Suites-Concord Address: 5400 John Q Hammon Dr	 Live bed bug observed Multiple mattresses stacked Apartment too full to properly inspect
City: Concord State: NC Zip: 28027-3401	 Trailor Access Containment Wall
Subdivision: Phone : _704-454-1702 K-9 Used:	 Multiple Levels Power for fans Fire sprinkler heads Open Areas Cathedral Ceilings See notes below for additional concerns
Other Findings/Additional Unit Requirements or Observations:	 Recommend Heat Treatment Number of Beds Number of Rooms Approximate Treatment Square Footage
Treatment: Heat treatment	LEVEL OF SEVERITY:
Option 1:	☑ Light (only evidence was seen on a bed in one room)
Option 2:	 Moderate (visible evidence in several rooms) Heavy (live bed bugs in more than 1 room, collecting on ceiling
Treatment rooms/areas: Whole room 508	

Chemical Heaters	Amount	Pest Bed bugs	
Fans	2		
Steamer	1		
Preparation Protocol adhea Payment I	rd to: Yes Normation: Billed	No (Additional Charges May	Apply)
Bed Bug Treatment Cost: \$	850 Be	ed Bug Warranty: \$ N/a	
Case 16-21142 Claim 230	-1 Filed 11/09/16		of 18
Accepted by Owner		Accepted by Technic	ian

Bed Bug Green SolutionTreatmentGeneral Terms and Warranty Conditions

1. LIMITS OF LIABILITY - Although Bed Bug Green Solution will exercise reasonable care in performing services under this contract, to the fullest extent permitted by law. Bed Bug Green Solution disclaims any and all liability for incidental or consequential damages arising from this service. By signing this Contract, Customer waives any and all claims for damage to the property or people resulting directly or indirectly from work performed by Bed Bug Green Solution with the sole exception of claims for damages due to gross negligence of Bed Bug Green Solution and/or its employces*.

2. SPECIFIC EXCLUSIONS - This contract does not cover and Bed Bug Green Solution will not be responsible for:

- a. Expenses related to the replacement of linen, upholstery, furniture, mattress, or related costs
- b. Expenses related to medical evaluation or treatment for bites associated with bed bugs
- c. Damages or expenses for any claim of personal injury related to an infestation of bed bugs
- d. Loss of income claimed to be related to any bed bug bites or associated illnesses
- e. Additional exclusions:

3. CUSTOMER'S OBLIGATIONS - Customer agrees to maintain the premises subject to this contract in a condition which does not promote infestation of bed bugs. Specifically, Customer agrees to maintain the premises in a reasonably clean and sanitary condition, and to keep the structure in such a state of repair so as to avoid providing easily accessible means of access to bed bugs. Customer agrees to disclose any home remedy products or any chemical treatment within the last 30 days. If premises is found in a different condition at time of treatment than the condition the premises was in at time of inspection, additional charges may apply.

4. NOTICE OF CLAIMS, ACCESS TO PROPERTY - Any claim under the terms of the contract must be made immediately in writing to Bed Bug Green Solution. Bed Bug Green Solution is only obligated to perform under this contract if customer allows Bed Bug Green Solution access to the identified structure for any purpose contemplated by the contract including but not limited to re-inspection, whether the inspection was requested or considered necessary by customer or required by the contract and requested or considered necessary by Bed Bug Green Solution. In the event Bed Bug Green Solution is denied access to the interior of the structure, Bed Bug Green Solution will not provide treatment and Customer agrees to pay a service charge for a return visit to provide treatment of the structure.

5. DISCLAIMER OF WARRANTY AND RENEWAL OF CONTRACT'- If a Bed Bug warranty option is approved on the front of this contract, it will include an inspection with one of our canine scent detection teams to clear the residence for this warranty. The warranty includes a free heat treatment up to \$1,500 if any live activity occurs during the contract period. Warranty does not cover homes with current bed bug activity. Either party may cancel this contract at any time on thirty (30) days written notice to the other party. The renewal fee will not be adjusted. Customer understands that Bed Bug Green Solution's liability under this contract is limited to providing a REMEDIAL TREATMENT ONLY and in no way, implied or otherwise is Bed Bug Green Solution responsible for the repair or replacement of any content of the structure(s). Warranty will also be void if customer does not maintain the yearly inspection. Homeowner must be home at the time of inspection and inspection fee paid at the time of service for the warranty to be valid.

*Homeowner understands that option 1 represents the primary treatment optionsectionented by Bette real Solution in a lesser alternate course of action that does not

6. ENTIRE CONTRACT AND SEVERABILITY - This contract, together with any attachment(s) if any, signed by Bed Bug Green Solution and customer constitutes the entire contract between the parties and no other representations or statements whether written or oral, will be binding upon the parties. If any part of this contract is held to be invalid or unenforceable for any reason, the remaining terms and conditions of this contract will remain in full force and effect.

7. NON-PAYMENT - Customer will pay Bed Bug Green Solution invoices upon receipt. Bed Bug Green Solution may terminate this contract if payment is not received within thirty (30) days of the date of invoices. In the event legal action is necessary to collect any amount due Bed Bug Green Solution shall be entitled to recover from the customer all reasonable costs collections, including reasonable attorney's fees and expenses, in addition to any outstanding amount due Bed Bug Green Solution. This contract and any extension of its term will be effective only upon payment of the charges as provided within.

8. TERMINATION - Bed Bug Green Solution's liability under this contract will terminate and Bed Bug Green Solution will be excused from the performance of any obligations under the contract should:

- a. Customer utilizes any home remedy products, "do-it-yourself" products, over-the-counter products or any chemicals to eradicate bed bugs, termites, insects, spiders, beetles, or rodents that could cause a negative resolution or chemical reaction.
- b. Bed Bug Green Solution be prevented or delayed from fulfilling its responsibilities under the terms of this contract by reasons or circumstances reasonably beyond Bed Bug Green Solution's control, including, but not limited to, acts of any duly constituted government authority, acts of God, or refusal of customer to allow Bed Bug Green Solution access to the structure(s for the purpose of treatment or carrying out the terms and conditions of this contract.

9. ARBITRATION - Customer and Bed Bug Green Solution agree that any controversy or claim between them rising out of or relating to this Contract will be settled exclusively by arbitration, except that Bed Bug Green Solution reserves the right to sue Customer in a court of law for any amount due Bed Bug Green Solutior from Customer. Such Arbitration will be conducted in accordance with the commercial arbitration rules, then in force, of the American Arbitration Association The arbitration award will be final and binding on both parties. Judgment upon such arbitration award may be entered in any court of competent jurisdiction. The arbitrator will not have the power of authority to award exemplary, treble, liquidated, or punitive damages.

10. CHANGE IN LAW - This contract shall be interpreted, regulated, and adjudicated in accordance with applicable federal, state, and local laws and regulations as they exist at the time this contract is executed. Should any federal, state, or local law or regulation be changed regarding Bed Bug Green Solution services or treatment Bed Bug Green Solution may take whatever steps are necessary to comply with said laws.

By signing this Contract, I, the Customer certify thahave read and fully understand the provisions on the front and back of this Contract with all its terms and conditions without limitation, and it being specifically understoc thatBed Bug Green Solutiomand the undersigned are bound only by the terr and conditions of this Contract and not by any other representations oral or otherwise.



'There are no warranties which extend beyond the description on

Killingsworth



Bill To: Embassy Suites-Concord Embassy Suites-Concord/Alan Benson 5400 John Q Hammon Dr Concord, NC 28027-3401 Account Number 141239

Invoice Date June 20, 2016

Invoice Number 680925-2

Service Location: 5400 John Q Hammon Dr Concord, NC 28027-3401

K-9 SCENT-KW	\$400.00
Total	\$400.00

Comments

Inspected 105 Room 508 confirmed and treated today

Please return this portion with your payment.				
Remit To 1407 Airport Road	Amount Paid:	Check No.:		
Monroe, NC 28110 1-800-852-8419	Credit Card No.:			
Account Number	Expiration:	CVC Code:		
141239	Signature:			
Invoice Number	0			
680925-2		Masseller VISA		



PHONE NUMBER	704-454-1702					
STATE / ZIP	NC	28027-3401				
CITY	Conco	ord				
ADDRESS	5400 John Q Hammon Dr					

1407 Airport Road Monroe, NC 28110

(704) 821-2810

NC LIC #1919PW SC LIC #017855 SC LIC # 010439 SC LIC #029097

NAME	Embassy Suites-Concord			
DATE	06/20/	/2016		
Accoun	t Number	141239		

THE K9 inspection

PERFORMED 6/20/16

IS A ONE TIME SERVICE. NO GUARANTEE OR RESERVICE WILL BE PROVIDED AND IT IS TO

BE PAID IN FULL WHEN SERVICE IS COMPLETE. Inspected 105 Room 508 confirmed and treated today

CUSTOMER SIGNATURE

SIGNATURE

AMOUNT PD.

CK #/CASH

К9 Dodger TARGET PEST **Bedbugs**



Page 17 of 18

Name (as shown on your income tax return)

	Killingsworth Environmental of the Carolinas LLC										
je 2.	Business name/disregarded entity name, if different from above										
e 1s on page	Check appropriate box for federal tax classification:	te		F	Exem	ptior	ns (se	e ins	truct	ions)	:
Print or type Specific Instructions	✓ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ►	<u>P</u>		E	Exem	ption	fron	code n FA1		_	ting
Print c Ins	□ Other (see instructions) ►			ľ	code	(if ar	iy) -				
pecifi	Address (number, street, and apt. or suite no.) Requester 1407 Airport Rd	s na	me	an	d add	tress	(opt	ional)		
66	City, state, and ZIP code Monroe NC 28110										
	List account number(s) here (optional)		_								
Par	t I Taxpayer Identification Number (TIN)				_						
to avo reside entitie	your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line bid backup withholding. For individuals, this is your social security number (SSN). However, for a ent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other is, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i> in page 3.	ocia	l s	ecu	rity r _	umb	er	-[
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose Employer identification number											
	2		5	-	8	9	6	9	3	0	7
Par	t II Certification	_									
11.0.01.0.1		_	_						_		

Under penalties of perjury, I certify that:

- 1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- 3. I am a U.S. citizen or other U.S. person (defined below), and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign	Signature of
Here	U.S. person ►

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are

 Certiny that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct.

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

. An individual who is a U.S. citizen or U.S. resident alien,

 A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,

An estate (other than a foreign estate), or

Date ►

• A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership to establish your U.S. status and avoid section 1446 withholding no your share of partnership income.

District of Kansas Claims Register

<u>16-21142 John Q. Hammons Fall 2006, LLC</u>									
Judge: Robert D. Berger Chapter: 11									
Office: Kansas			City Last Date to file claims: 12/2			23/2016			
Trustee:			Last Date to file (Govt):						
Creditor: (8510077) KILLINGSWORTH ENVIRONMENTAL 1407 AIRPORT ROAD MONROE NC 28110 Amount claimed: \$2100.00		Original Filed Date: 11/09/2016 Original Entered Date: 11/09/2016		<i>Status: Filed by:</i> CR <i>Entered by:</i> Terri Marshall <i>Modified:</i>					
7 thount o	annee	. \$2100.00							
History:									
<u>Details</u>	Details230-11/09/2016Claim #230 filed by KILLINGSWORTH ENVIRONMENTAL, Amount claimed: \$2100.00 (Marshall, Terri)								
Description: (230-1) 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*	\$2100.00							
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		