

Fill in this information to identify the case:

Debtor name: JOHN Q. HAMMONS 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: 1044
MOUNTAIN STATE SPECIALTIES INC
1671 VALTEC LN
BOULDER, CO 80301-4620

RECEIVED

NOV 14 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?
Mountain States Specialties, Inc.
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?	Where should payments to the creditor be sent? (if different)
Name <u>Mountain States Specialties, Inc.</u>	Name _____
Number Street <u>1671 Valtec Lane</u>	Number Street _____
City State ZIP Code <u>Boulder CO 80301</u>	City State ZIP Code _____
Contact phone <u>303-444-6186</u>	Contact phone _____
Contact email <u>Rita@mntstatespecialties.com</u>	Contact email _____

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? _____



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: _____

7. How much is the claim? \$ 302.32 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.
Goods sold

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. \$ _____

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.

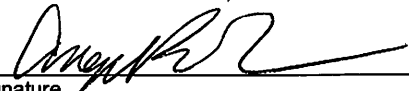
I understand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

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 11/08/2016
MM/DD/YYYY


Signature

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

Name Angie M Rohatke
First name Middle name Last name

Title Vice President

Company Mountain States Specialties, Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1671 Valtec Lane
Number Street

Boulder CO 80301
City State ZIP Code

Contact phone 303-444-6186 Email _____



39363467001044

MOUNTAIN STATE SPECIALTIES INC
1671 VALTEC LN
BOULDER, CO 80301-4620



1671 Valtec Lane, Boulder, CO 80301
 303-444-8188 Fax 303-444-6174
 www.mtnstatespecialties.com

INVOICE #: M88130

Page: 1

Bill To EMBLOV
 EMBASSY SUITES LOVELAND
 JOHN Q. HAMMONS TRUSTEE*em inv
 4705 CLYDESDALE PARKWAY
 LOVELAND, CO 80538

Ship To

EMBASSY SUITES LOVELAND
 JOHN Q HAMMONS TRUSTEE
 4705 CLYDESDALE PARKWAY
 LOVELAND, CO 80538

UPS Contact UPC no Retail (\$)

V#MO035 Dept,

Your P.O. #	Sales Person Robin Slinn	Terms Net 30 days	Ship Via DROP SHIP	P.O. Date 05/02/16	Invoice Date: 06/17/16	Our Order No. 124276
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Qty. Shipped	Qty. Ordered	Description	Retail	UPC #	Price	Total
100	100	PROM001-NONE Sport Pack A460 Design: Mountain/trees LOVELAND, CO		00503	2.73	273.00
100	100	40500 Set up Charge (UPC only) CREATE UPC AND SEND PRICE STICKERS WITHOUT RETAIL TO LUCY			0.10	10.00

CLAIMS MUST BE MADE WITHIN 7 DAYS OF INVOICE DATE

TERMS: NET 30 DAYS OR AS INDICATED ABOVE. Past due invoices will be subject to interest charges at the rate of 2% per month
 (annual percentage rate of 24%) on the unpaid balance. Accounts over 60 days will be placed on C.O.D. until paid in full.

Collection charges or legal fees necessary to enforce payment will be added to the balance due.

A \$25 fee will be charged for all bad checks returned.

PLEASE PAY BY THIS INVOICE: NO STATEMENT RENDERED

Subtotal:	283.00
Invoice Discount:	0.00
Tax:	0.00
Freight Total:	19.32
Total:	302.32

STATEMENT

Mountain States Specialties, Inc.
 1671 Valtec Lane
 Boulder, CO 80301-4620
 (303) 444-6186

Statement Date: 11/08/16

Account Number: EMBLOV

Page: 1

EMBASSY SUITES LOVELAND
 JOHN Q. HAMMONS TRUSTEE*em inv
 4705 CLYDESDALE PARKWAY
 LOVELAND, CO 80538

Amount Remitted

RETURN THIS PORTION OF
 STATEMENT WITH YOUR PAYMENT.

Document	Date	Terms	Code	Debits	Credits	Balance
M88130	06/21/16	Net 30 days	Invoice	302.32		302.32

Statement Aging: Statement Balance 302.32 0.00 302.32

Days overdue: Current Up To 30 Days 31 - 60 Days Over 60 Days

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: (8510389)
MOUNTAIN STATE
SPECIALTIES INC
1671 VALTEC LN
BOULDER CO 80301

Claim No: 248
Original Filed
Date: 11/16/2016
Original Entered
Date: 11/16/2016

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

Amount claimed: \$302.32

History:

[Details](#) [248-](#) 11/16/2016 [1](#) Claim #248 filed by MOUNTAIN STATE SPECIALTIES INC, Amount claimed: \$302.32 (Marshall, Terri)

Description: (248-1) 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*	\$302.32
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		