

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: 3529
 FIVE-STAR AUDIOVISUAL MGMT
 127 AMBASSADOR DR STE 111
 NAPERVILLE, IL 60540-4076

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 NOV 21 2016
 BMC GROUP

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~~NOV 28 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? FIVE-STAR AUDIOVISUAL 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)
	<u>FIVE-STAR AUDIOVISUAL, INC</u> Name <u>127 AMBASSADOR DR UNIT 111</u> Number Street <u>NAPERVILLE IL 60540</u> City State ZIP Code Contact phone <u>630.236.8712</u> Contact email <u>angela@five-starav.com</u>	<u>FIVE-STAR AUDIOVISUAL, INC</u> Name <u>127 AMBASSADOR DR UNIT 111</u> Number Street <u>NAPERVILLE IL 60540</u> City State ZIP Code Contact phone <u>630.236.8712</u> Contact email <u>angela@five-starav.com</u>

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? _____

JQH Ctl ID

 00204

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? \$ 45,270.21 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 and Services

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:

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

	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).	\$ _____
<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).

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.

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 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 11/10/2016
MM/DD/YYYY

Angela Slauenwhite
Signature

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

Name Angela Slauenwhite
First name Middle name Last name

Title Controller

Company Five-Star AudioVisual Inc
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 127 Ambassador Drive Unit 111
Number Street

Naperville IL 60540
City State ZIP Code

Contact phone 630.236.8712 Email angela@five-starav.com



39363467003529

FIVE-STAR AUDIOVISUAL MGMT
127 AMBASSADOR DR STE 111
NAPERVILLE, IL 60540-4076

Five-Star AudioVisual, Inc.
 127 Ambassador Drive, Unit 111
 Naperville, IL 60540
 (630) 236-8712 PH
 (630) 236-8713 FX

Bill-to:

Chateau on the Lake Resort &
 Convention Center
 415 N. State Hwy 265

Branson, MO 65616
 ATTN: Accounts Payable

Invoice #: 14283		Invoice Date: Friday, July 01, 2016		Billing Type: Primary Billing				TERMS: Net 30			
Rental Order #	Group Name	Date	Equipment	Sales	Labor	Srvc Chg	Tax	Total Charges	Amt. Due Hotel	Amt. Due Five-Star	
_04998	ACEC 2016	6/3/2016	\$715.00	\$0.00	\$0.00	\$150.15	\$77.68	\$865.15	\$432.58	\$432.57	
_04999	Northeastern State University 2016	6/3/2016	\$620.00	\$0.00	\$0.00	\$130.20	\$67.37	\$750.20	\$375.10	\$375.10	
_05000	BST Global	6/3/2016	\$300.00	\$0.00	\$0.00	\$63.00	\$32.60	\$363.00	\$181.50	\$181.50	
_05001	ACEC 2016	6/4/2016	\$655.00	\$0.00	\$0.00	\$137.55	\$71.18	\$792.55	\$396.28	\$396.27	
_05002	Northeastern State University 2016	6/4/2016	\$620.00	\$0.00	\$0.00	\$130.20	\$67.37	\$750.20	\$375.10	\$375.10	
_05003	Northeastern State University 2016	6/5/2016	\$620.00	\$0.00	\$0.00	\$130.20	\$67.37	\$750.20	\$375.10	\$375.10	
_05004	Tuthill Corporation June 2016	6/7/2016	\$100.00	\$0.00	\$0.00	\$21.00	\$10.87	\$121.00	\$60.50	\$60.50	
_05005	Healthcare Services Group 2016	6/7/2016	\$520.00	\$0.00	\$0.00	\$109.20	\$56.50	\$629.20	\$314.61	\$314.59	
_05006	Burlington Northern Santa Fe June 2016	6/7/2016	\$90.00	\$0.00	\$0.00	\$21.00	\$9.97	\$111.00	\$55.50	\$55.50	
_05009	Tuthill Corporation June 2016	6/6/2016	\$100.00	\$0.00	\$0.00	\$21.00	\$10.87	\$121.00	\$60.50	\$60.50	
_05010	Burlington Northern Santa Fe June 2016	6/8/2016	\$117.00	\$0.00	\$0.00	\$27.30	\$12.96	\$144.30	\$72.15	\$72.15	
_05011	HFE 2016	6/8/2016	\$675.00	\$0.00	\$0.00	\$141.75	\$73.34	\$816.75	\$408.38	\$408.37	
_05012	Wells Fargo	6/9/2016	\$580.00	\$0.00	\$0.00	\$121.80	\$63.02	\$701.80	\$350.91	\$350.89	
_05013	Missouri Hospital Association 2016	6/9/2016	\$1,115.00	\$0.00	\$0.00	\$234.15	\$121.16	\$1,349.15	\$674.58	\$674.57	
_05014	Burlington Northern Santa Fe June 2016	6/9/2016	\$27.00	\$0.00	\$0.00	\$6.30	\$2.99	\$33.30	\$16.65	\$16.65	
_05015	HFE 2016	6/9/2016	\$675.00	\$0.00	\$0.00	\$141.75	\$73.34	\$816.75	\$408.38	\$408.37	
_05017	Wells Fargo	6/10/2016	\$850.00	\$0.00	\$0.00	\$178.50	\$92.37	\$1,028.50	\$514.25	\$514.25	
_05019	Missouri Hospital Association 2016	6/10/2016	\$620.00	\$0.00	\$0.00	\$130.20	\$67.37	\$750.20	\$375.10	\$375.10	
_05020	Habitat Council Weekend	6/10/2016	\$1,210.00	\$0.00	\$240.00	\$254.10	\$131.48	\$1,704.10	\$852.05	\$852.05	
_05021	Wells Fargo	6/11/2016	\$355.00	\$0.00	\$0.00	\$74.55	\$38.57	\$429.55	\$214.78	\$214.77	
_05025	General Manager's Conference	6/14/2016	\$1,500.00	\$1,200.00	\$0.00	\$315.00	\$0.00	\$3,015.00	\$157.50	\$2,857.50	
_05026	Edward Jones Region 279	6/16/2016	\$800.00	\$0.00	\$0.00	\$168.00	\$86.92	\$968.00	\$484.01	\$483.99	

Friday, July 08, 2016

Rental Order #	Group Name	Date	Equipment	Sales	Labor	Srvc Chg	Tax	Total Charges	Amt. Due Hotel	Amt. Due Five-Star
_05027	Edward Jones Region 292	6/16/2016	\$800.00	\$0.00	\$0.00	\$168.00	\$86.92	\$968.00	\$484.01	\$483.99
_05028	Edward Jones Region 292	6/17/2016	\$1,205.00	\$0.00	\$0.00	\$253.05	\$130.93	\$1,458.05	\$729.03	\$729.02
_05029	Edward Jones Region 279	6/17/2016	\$1,370.00	\$0.00	\$0.00	\$287.70	\$148.86	\$1,657.70	\$828.86	\$828.84
_05030	Edward Jones Region 292	6/18/2016	\$1,590.00	\$0.00	\$0.00	\$333.90	\$172.76	\$1,923.90	\$961.96	\$961.94
_05031	Edward Jones Region 279	6/18/2016	\$1,590.00	\$0.00	\$0.00	\$333.90	\$172.76	\$1,923.90	\$961.96	\$961.94
_05032	Phillips 66	6/21/2016	\$410.00	\$0.00	\$0.00	\$86.10	\$44.55	\$496.10	\$248.05	\$248.05
_05034	Midwest Insulation Contractors Assn 2016	6/21/2016	\$570.00	\$0.00	\$0.00	\$119.70	\$61.94	\$689.70	\$344.86	\$344.84
_05035	FedEx Corporate Services Inc	6/21/2016	\$405.00	\$0.00	\$0.00	\$85.05	\$44.01	\$490.05	\$245.03	\$245.02
_05036	Midwest Insulation Contractors Assn 2016	6/22/2016	\$615.00	\$0.00	\$0.00	\$129.15	\$66.82	\$744.15	\$372.08	\$372.07
_05037	Phillips 66	6/22/2016	\$385.00	\$0.00	\$0.00	\$80.85	\$41.83	\$465.85	\$232.93	\$232.92
_05038	FedEx Corporate Services Inc	6/22/2016	\$375.00	\$0.00	\$0.00	\$78.75	\$40.75	\$453.75	\$226.88	\$226.87
_05039	Blue Cross Blue Shield	6/22/2016	\$865.00	\$0.00	\$0.00	\$181.65	\$93.99	\$1,046.65	\$523.33	\$523.32
_05040	Edward Jones Region 128	6/23/2016	\$800.00	\$0.00	\$0.00	\$168.00	\$86.92	\$968.00	\$484.01	\$483.99
_05041	Edward Jones Region 70	6/23/2016	\$800.00	\$0.00	\$0.00	\$168.00	\$86.92	\$968.00	\$484.01	\$483.99
_05042	Cordis Vascular Healthcare	6/23/2016	\$450.00	\$0.00	\$0.00	\$94.50	\$48.90	\$544.50	\$272.25	\$272.25
_05043	Phillips 66	6/23/2016	\$410.00	\$0.00	\$0.00	\$86.10	\$44.55	\$496.10	\$248.05	\$248.05
_05044	Blue Cross Blue Shield	6/23/2016	\$1,290.00	\$0.00	\$0.00	\$270.90	\$140.17	\$1,560.90	\$780.46	\$780.44
_05045	FedEx Corporate Services Inc	6/23/2016	\$405.00	\$0.00	\$0.00	\$85.05	\$44.01	\$490.05	\$245.03	\$245.02
_05046	Midwest Insulation Contractors Assn 2016	6/23/2016	\$95.00	\$0.00	\$0.00	\$19.95	\$10.32	\$114.95	\$57.48	\$57.47
_05048	Edward Jones Region 128	6/24/2016	\$1,030.00	\$0.00	\$0.00	\$216.30	\$111.91	\$1,246.30	\$623.16	\$623.14
_05049	Edward Jones Region 70	6/24/2016	\$1,125.00	\$0.00	\$0.00	\$236.25	\$122.23	\$1,361.25	\$680.64	\$680.61
_05050	Blue Cross Blue Shield	6/24/2016	\$715.00	\$0.00	\$0.00	\$150.15	\$77.69	\$865.15	\$432.58	\$432.57
_05052	Gary Meyer	6/24/2016	\$175.00	\$0.00	\$0.00	\$36.75	\$19.02	\$211.75	\$105.88	\$105.87
_05053	Melissa Lenz	6/24/2016	\$105.00	\$0.00	\$0.00	\$22.05	\$11.41	\$127.05	\$63.53	\$63.52
_05054	Edward Jones Region 128	6/25/2016	\$1,590.00	\$0.00	\$0.00	\$333.90	\$172.76	\$1,923.90	\$961.96	\$961.94
_05055	Edward Jones Region 70	6/25/2016	\$1,590.00	\$0.00	\$0.00	\$333.90	\$172.76	\$1,923.90	\$961.96	\$961.94
_05056	Eike Family Reunion	6/25/2016	\$100.00	\$0.00	\$0.00	\$21.00	\$10.87	\$121.00	\$60.50	\$60.50
_05057	American National Insurance Company 2016	6/27/2016	\$185.00	\$0.00	\$0.00	\$38.85	\$20.10	\$223.85	\$111.93	\$111.92
_05058	American National Insurance Company 2016	6/28/2016	\$505.00	\$0.00	\$300.00	\$106.05	\$54.87	\$911.05	\$455.53	\$455.52
_05060	American National Insurance Company 2016	6/30/2016	\$265.00	\$0.00	\$0.00	\$55.65	\$28.79	\$320.65	\$160.33	\$160.32
			\$34,679.00	\$1,200.00	\$540.00	\$7,288.05	\$3,605.62	\$43,707.05	\$20,503.78	\$23,203.27

Friday, July 08, 2016

Friday, July 08, 2016

Five-Star AudioVisual, Inc.
 127 Ambassador Drive, Unit 111
 Naperville, IL 60540
 (630) 236-8712 PH
 (630) 236-8713 FX

Bill-to:

Chateau on the Lake Resort &
 Convention Center
 415 N. State Hwy 265

Branson, MO 65616
 ATTN: Accounts Payable

Invoice #: 14071		Invoice Date: Wednesday, June 01, 2016			Billing Type: Primary Billing				TERMS: Net 31		
Rental Order #	Group Name	Date	Equipment	Sales	Labor	Srvc Chg	Tax	Total Charges	Amt. Due Hotel	Amt. Due Five-Star	
_04972	Primerica Women's Retreat 2016	5/1/2016	\$967.50	\$0.00	\$0.00	\$225.75	\$107.15	\$1,193.25	\$596.63	\$596.62	
_04973	The Caring People 2016	5/5/2016	\$2,718.00	\$0.00	\$640.00	\$634.20	\$301.03	\$3,992.20	\$1,996.10	\$1,996.10	
_04974	Kamo Power 2016	5/10/2016	\$3,808.00	\$0.00	\$150.00	\$853.02	\$418.55	\$4,811.02	\$1,955.52	\$2,855.50	
_04976	Kamo Power 2016	5/9/2016	\$664.00	\$0.00	\$0.00	\$174.30	\$75.28	\$838.30	\$419.15	\$419.15	
_04977	Kamo Power 2016	5/11/2016	\$568.00	\$0.00	\$0.00	\$149.10	\$64.40	\$717.10	\$358.55	\$358.55	
_04978	KCMBA 2016	5/12/2016	\$6,030.00	\$0.00	\$160.00	\$1,407.00	\$667.85	\$7,597.00	\$3,798.53	\$3,798.47	
_04979	Associated Builders and Contractors 2016	5/12/2016	\$150.00	\$0.00	\$0.00	\$31.50	\$16.30	\$181.50	\$90.75	\$90.75	
_04980	KCMBA 2016	5/13/2016	\$3,370.50	\$0.00	\$0.00	\$786.45	\$373.30	\$4,156.95	\$2,078.49	\$2,078.46	
_04981	Associated Builders and Contractors 2016	5/14/2016	\$600.00	\$100.00	\$0.00	\$126.00	\$74.17	\$826.00	\$363.00	\$463.00	
_04982	Isagenix Internation 2016	5/14/2016	\$50.00	\$0.00	\$0.00	\$10.50	\$5.43	\$60.50	\$30.25	\$30.25	
_04983	Isagenix Internation 2016	5/15/2016	\$50.00	\$0.00	\$0.00	\$10.50	\$5.43	\$60.50	\$30.25	\$30.25	
_04984	The AIM Companies	5/18/2016	\$4,575.00	\$0.00	\$0.00	\$960.75	\$497.11	\$5,535.75	\$2,367.88	\$3,167.87	
_04986	Pension Focus 2016	5/19/2016	\$1,079.50	\$0.00	\$0.00	\$266.70	\$120.89	\$1,346.20	\$673.10	\$673.10	
_04987	Continental Gynecological Society	5/19/2016	\$645.00	\$0.00	\$0.00	\$135.45	\$70.08	\$780.45	\$390.23	\$390.22	
_04988	The AIM Companies	5/19/2016	\$95.00	\$0.00	\$0.00	\$19.95	\$10.32	\$114.95	\$57.48	\$57.47	
_04989	Pension Focus 2016	5/20/2016	\$2,252.50	\$0.00	\$120.00	\$556.50	\$252.25	\$2,929.00	\$1,464.50	\$1,464.50	
_04990	Continental Gynecological Society	5/20/2016	\$645.00	\$0.00	\$0.00	\$135.45	\$70.08	\$780.45	\$390.23	\$390.22	
_04991	The AIM Companies	5/21/2016	\$695.00	\$0.00	\$0.00	\$145.95	\$75.52	\$840.95	\$420.48	\$420.47	
_04992	Hall/Morris Wedding	5/21/2016	\$750.00	\$0.00	\$0.00	\$157.50	\$81.49	\$907.50	\$453.75	\$453.75	
_04993	Continental Gynecological Society	5/21/2016	\$645.00	\$0.00	\$0.00	\$135.45	\$70.08	\$780.45	\$390.23	\$390.22	
_04996	Arkansas Society of CPA's	5/27/2016	\$660.00	\$0.00	\$0.00	\$138.60	\$71.71	\$798.60	\$399.31	\$399.29	
			\$31,018.00	\$100.00	\$1,070.00	\$7,060.62	\$3,428.42	\$39,248.62	\$18,724.41	\$20,524.21	

Tuesday, June 07, 2016

Total Due	\$20,524.21
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Tuesday, June 07, 2016

Five-Star AudioVisual, Inc.
127 Ambassador Drive, Unit 111
Naperville, IL 60540
(630) 236-8712 PH
(630) 236-8713 FX

Bill-to:

Chateau on the Lake Resort &
Convention Center
415 N. State Hwy 265

Branson, MO 65616
ATTN: Accounts Payable

Invoice #: 14073

Invoice Date: Wednesday, June 01, 2016

Billing Type: Chateau Bill

TERMS: Net 31

Rental Order #	Group Name	Date	Equipment	Sales	Labor	Srvc Chg	Tax	Total Charges	Amt. Due Hotel	Amt. Due Five-Star
_04994	Arkansas Society of CPA's	5/25/2016	\$725.99	\$0.00	\$0.00	\$0.00	\$0.00	\$725.99	\$0.00	\$725.99
_04995	Arkansas Society of CPA's	5/26/2016	\$816.74	\$0.00	\$0.00	\$0.00	\$0.00	\$816.74	\$0.00	\$816.74
			\$1,542.73	\$0.00	\$0.00	\$0.00	\$0.00	\$1,542.73	\$0.00	\$1,542.73

Total Due \$1,542.73

Tuesday, June 07, 2016

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: (8509523)
FIVE STAR AUDIOVISUAL
MGMT
127 AMBASSADOR DRIVE 111
NAPERVILLE IL 60540

Claim No: 265
Original Filed
Date: 11/22/2016
Original Entered
Date: 11/22/2016

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

Amount claimed: \$45270.21

History:

[Details](#) [265-](#) 11/22/2016
[1](#)

Claim #265 filed by FIVE STAR AUDIOVISUAL MGMT,
Amount claimed: \$45270.21 (Marshall, Terri)

Description: (265-1) Goods Sold/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*	\$45270.21
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		