Fill in this information to identify the case:						
Debtor 1	Hammons of South Carolina, LLC					
Debtor 2 (Spouse, if filing)						
United States	Bankruptcy Court for the: District of Kansas					
Case number	16-21160					

RECEIVED BMC GROUP

### 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. Make such a request according to 11 U.S.C. § 503.

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.

Who is the current creditor?	Wells Fargo Vendor Financial Services, LLC  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor GE Capital c/o Ricoh USA Program							
Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom	?	,					
Where should notices and payments to the	Where should notice	es to the credito	r be sent?	Where should payments to the creditor be sent? (if different)				
creditor be sent?	WFVFS - Bankru	ptcy		WFVFS - Bankruptcy				
Federal Rule of	Name			Name				
Bankruptcy Procedure (FRBP) 2002(g)	PO Box 13708			PO Box 931093				
	Number Street			Number Stre		04400		
	Macon City	GA State	31208 ZIP Code	Atlanta City	GA State	31193 ZIP Code		
	Contact phone 800-48			Contact phone 800	0-480-6513			
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):							
Does this claim amend one already filed?	✓ No ☐ Yes. Claim numb	per on court claim	ns registry (if known) _		Filed on MM	/ DD / YYYY		
Do you know if anyone else has filed a proof of claim for this claim?	<ul><li>✓ No</li><li>☐ Yes. Who made</li></ul>	the earlier filing?			,			

JQH Ctl ID

Official Form 410

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: 9 3 7 5
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).
3.	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.  Executory Contract/ Unexpired Lease
Э.	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:  \$  (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	Is this claim subject to a right of setoff?	✓ No  ☐ Yes. Identify the property:

12. Is all or part of the claim	<b>☑</b> No								
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	Amount entitled to priority							
A claim may be partly priority and partly	Domesti 11 U.S.0	\$							
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2 persona	r \$							
entitled to priority.	bankrup	salaries, or commissions (up to tcy petition is filed or the debtor C. § 507(a)(4).	s, or commissions (up to \$12,850*) earned within 180 days before the lition is filed or the debtor's business ends, whichever is earlier. 7(a)(4).						
	_	r penalties owed to governmen	tal units. 11 U.S.C. § 507	7(a)(8).	\$				
,		itions to an employee benefit pl	S						
			¢						
		specify subsection of 11 U.S.C.	\$						
	* Amounts a	re subject to adjustment on 4/01/19	and every 3 years after tha	t for cases begun on or	after the date of adjustment.				
Part 3: Sign Below									
The person completing	Check the appro	priate box:							
this proof of claim must sign and date it.	I am the cre								
FRBP 9011(b).		ditor's attorney or authorized a	gent.						
If you file this claim		stee, or the debtor, or their auth		y Rule 3004.					
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									
is.	I understand that an authorized signature on this <i>Proof of Claim</i> 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,	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true								
imprisoned for up to 5	and correct.								
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.								
3571.	Executed on dat	e 11/21/2016 MM / DD / YYYY							
	Signature	you Press	00-Nayo						
	Print the name	of the person who is complet	ing and signing this cl	aim:					
	Name	Jennifer Susan Presna First name	III-Harpe Middle name	Last name	)				
	Title	Bankruptcy Analyst							
	Company	Wells Fargo Vendor Fi	nancial Services, Ll	_C					
	Company	Identify the corporate servicer as							
		1738 Bass Rd							
	Address	Number Street							
		Macon		GA 31210	)				
		City		State ZIP Code					
	Contact phone	800-480-6513	<u>*</u>	Email jennifer.presnal	l-harpe@leasingconnection.com				

# Wells Fargo Vendor Financial Services LLC FKA GE Capital Information Technology Solutions LLC

Debtor - Hammons of South Carolina, LLC

Case # 16-21160

		Effective				Physical	Manufacturer		Remaining	
Customer	Contract	Date	Term	Make	Model	Serial #	Serial #	Pre-Petition	Lease Balance	Total Claim*
1351255	3519375	07-10-2016	48	Ricoh	MPC4504	C83129088	G716M310364	\$ -	\$ 7,952.42	\$ 7,952.42

\*This is a contingent claim arising from an equipment lease, except for those amounts designated as "Pre-Petition Amounts Due". In the event this lease is rejected, all amounts asserted hereunder become a non-contingent liability of the debtor.

The claim reflected herein is consistent with the Claimant's position that the contracts underlying the claims are true leases. In the event the contracts are recharacterized, Claimant reserves the right to amend this proof of claim to, among other things, assert secured claims against the estate for the value of the equipment that remains in the Debtor's possession or control.

A portion of this claim may include post-petition property taxes.

## 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: (8615751) Claim No: 279 Status: Wells Fargo Vendor Financial Original Filed Filed by: CR

Services, LLC Date: 11/29/2016 Entered by: Terri Marshall

PO Box 13708 Original Entered Modified:

Macon, GA 31208 Date: 11/29/2016

Amount claimed: \$7952.42

History:

<u>Details</u> 279- 11/29/2016 Claim #279 filed by Wells Fargo Vendor Financial Services, LLC, Amount claimed: \$7952.42 (Marshall, Terri )

Description: (279-1) Contract/Lease

Remarks: (279-1) Filed in Hammons of South Carolina, LLC (16-21160)

## **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*	\$7952.42
Total Amount Allowed*	

<sup>\*</sup>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		