Fill in this information to identify the case:	
Debtor 1 JQH - East Peoria Development, LLC	· · · · · · · · · · · · · · · · · · ·
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: District of Kansas	
Case number 16-21164	

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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.

1. 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 u	sed with the debte	or GE Capital c/o	Ricoh USA Prograr	<u> </u>		
<u>.</u> ,	Has this claim been acquired from someone else?	☑ No ☐ Yes. From whom?						
3.	Where should notices and payments to the	Where should notices		r be sent?	Where should payments to the creditor be sent? (if different)			
	creditor be sent?	WFVFS - Bankrup			WFVFS - Bankruptcy			
	Federal Rule of	Name		·	Name			
	Bankruptcy Procedure (FRBP) 2002(g)	PO Box 13708			PO Box 931093			
	(11121) 2002(9)	Number Street			Number Street			
		Macon	ĢΑ	31208	Atlanta	GA	31193	
		City	State	ZIP Code	City	State	ZIP Code	
		Contact phone 800-480	0-6513		Contact phone 800-480-6513			
	·			<u> </u>				
		Uniform claim identifier for	ise one):					
1.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim number	er on court claim	s registry (if known)		Filed on	/ DD / YYYY	
 i.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made the						

Desc Main Document

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: 8 0 9 1						
How much is the claim?	\$ 17,863.30 Does this	amount Include intere	st or other charges?				
	□ No						
	☑ Yes. A	attach statement itemizin harges required by Ban	g interest, fees, expenses, or other kruptcy Rule 3001(c)(2)(A).				
8. What is the basis of the Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful de							
claim?	Attach redacted copies of any documents supporting	g the claim required by E	Bankruptcy Rule 3001(c).				
	Limit disclosing information that is entitled to privacy	, such as health care inf	formation.				
	Executory Contract/ Unexpired Lease						
Is all or part of the claim secured?	Yes. The claim is secured by a lien on property.						
	Nature of property:	a - 1-(11221	-id-us- file a Manhagae Proof of Claim				
	Real estate. If the claim is secured by Attachment (Official Forn	the debtor's principal re a 410-A) with this <i>Proof</i> (sidence, file a Mortgage Proof of Claiffi of Claim.				
	Motor vehicle						
	Other. Describe:						
	Basis for perfection: Attach redacted copies of documents, if a	ny that show avidence	of perfection of a security interest (for				
	example, a mortgage, lien, certificate of ti been filed or recorded.)	tle, financing statement,	or other document that shows the lien has				
	Value of property:	\$	_				
	Amount of the claim that is secured:	\$ <u></u>	_				
	Amount of the claim that is unsecured	: \$	_(The sum of the secured and unsecured amounts should match the amount in line				
	Amount necessary to cure any default as of the date of the petition:						
	Amount necessary to cure any default	as of the date of the p	etition: \$				
	Annual Interest Rate (when case was fil		etition: \$				
			etition: \$				
), Is this claim based on a	Annual Interest Rate (when case was fil		etition: \$				
0. Is this claim based on a lease?	Annual Interest Rate (when case was fil Fixed Variable	ed)%					
lease? 1. Is this claim subject to a	Annual Interest Rate (when case was fil	ed)%					
is this claim based on a lease? I is this claim subject to a right of setoff?	Annual Interest Rate (when case was fill Fixed Variable No Yes. Amount necessary to cure any default a	ed)% as of the date of the pe	tition. \$0.00				

· · · · · · · · · · · · · · · · · · ·				<u> </u>	<u> </u>					
12. Is all or part of the claim entitled to priority under	☑ No				Managaran da sa					
11 U.S.C. § 507(a)?	Yes. Check	one:			Amount entitled to priority					
A claim may be partly priority and partly		c support obligations (including c. § 507(a)(1)(A) or (a)(1)(B).	alimony and child supp	ort) under	\$					
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	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).									
enduca to priority.	bankrupi	salaries, or commissions (up to cy petition is filed or the debto c. § 507(a)(4).	\$12,850*) earned within 's business ends, which	n 180 days bei ever is earlier.	fore the \$					
	Taxes or	penalties owed to governmen	tal units. 11 U.S.C. § 50	7(a)(8).	\$					
	☐ Contribu	tions to an employee benefit p	an. 11 U.S.C. § 507(a)(5).	\$					
		Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.								
		•			ın on or after the date of adjustment.					
Part 3: Sign Below										
The person completing	Check the appro	oriate hox								
this proof of claim must	1 am the cre		•		•					
sign and date it. FRBP 9011(b).			gent.							
If you file this claim	☐ I am the creditor's attorney or authorized agent. ☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy 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, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true 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								
	\bigcap_{α}	\tilde{a} Ω	ν II							
	Signature	mygu Tresna	Mayor							
	Print the name	of the person who is comple	ting and signing this c	laim:						
	Name	Jennifer Susan Presna	all-Harpe							
	7441710	First name	Middle name	Ļ	ast name					
	Title	Bankruptcy Analyst								
	Company	Wells Fargo Vendor F			ervicer.					
	å delen ne	1738 Bass Rd								
	Address	Number Street								
		Macon		GA	31210					
		City			IP Code					
	Contact phone	800-480-6513		Email jennifer.	presnall-harpe@leasingconnection.com					

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

Debtor - JQH - East Peoria Development, LLC

Case # 16-21164

		Effective				Physical	Manufacturer	·	Remaining	
Customer	Contract	Date	Term	Make	Model	Serial #	Serial #	Pre-Petition	Lease Balance	Total Claim*
1351255	3428091	12-10-2015	48	Ricoh	MPC4503	C84138377	E175M961452	\$ -	\$ 17,863.30	\$ 17,863.30
				Ricoh	MP4054SP	C84138190	G175RA30702			<u> </u>
				Ricoh	MPC2503	C84138275	E215M960494			

*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 O. 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: 281 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: \$17863.30

History:

<u>Details</u> 281- 11/29/2016 Claim #281 filed by Wells Fargo Vendor Financial Services, LLC, Amount claimed:

\$17863.30 (Marshall, Terri)

Description: (281-1) Contract/Lease

Remarks: (281-1) Filed in JQH-East Peoria Development LLC (16-21164)

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*	\$17863.30
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		