

**United States Bankruptcy Court  
District of Kansas**

In re **JQH - Norman Development, LLC**

Debtor(s)

Case No. **16-21180**

Chapter **11**

**AMENDMENT COVER SHEET**

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith:

**Schedule E/F**

**NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES**

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a), I certify that notice of the filing of the amendment(s) listed above has been given this date to any and all entities affected by the amendment as follows:

**Notice of the amendment will be mailed to the Master Service List and Rule 2002 List.**

Date: **May 1, 2018**

**/s/ Nicholas J. Zluticky**

**Nicholas J. Zluticky**

**Attorney for Debtor(s)**

**Stinson Leonard Street LLP**

**1201 Walnut Street, Suite 2900**

**Kansas City, MO 64106-2150**

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**Fill in this information to identify the case:**

Debtor name JQH - Norman Development, LLC  
 United States Bankruptcy Court for the: DISTRICT OF KANSAS  
 Case number (if known) 16-21180

Check if this is an amended filing

**Official Form 206E/F  
 Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- No. Go to Part 2.  
 Yes. Go to line 2.

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <b>Amarko Staff - Payable to Riviera Finance</b> P.O. Box 202485 Dallas, TX 75320-2485  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  _____ <b>\$0.00</b>
3.2	Nonpriority creditor's name and mailing address <b>American Hotel Register</b> P.O. Box 71299 Chicago, IL 60694  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  _____ <b>\$0.00</b>
3.3	Nonpriority creditor's name and mailing address <b>Budget Flag &amp; Banner</b> 310 N Rockwell Oklahoma City, OK 73127  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  _____ <b>\$0.00</b>
3.4	Nonpriority creditor's name and mailing address <b>El Latino American</b> 8870 S Western Oklahoma City, OK 73139  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  _____ <b>\$0.00</b>

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3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Eskimo Joe's Promo Products Group Inc.</b> <b>P.O. Box 729</b> <b>Stillwater, OK 74075-0729</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Fed-Ex</b> <b>P.O. Box 660481</b> <b>Dallas, TX 75266-0481</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Grainger</b> <b>Dept. C-Pay</b> <b>Palatine, IL 60038-0001</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Guest Supply - Sysco</b> <b>PO Box 910</b> <b>Monmouth Junction, NJ 08852-0910</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.9	<b>Nonpriority creditor's name and mailing address</b> <b>Hagar Restaurant Srvc Inc.</b> <b>6200 NW 2nd Street</b> <b>Oklahoma City, OK 73127</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Hanwood OK</b> <b>WF Operations Center</b> <b>P.O. Box 79632</b> <b>City of Industry, CA 91716</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>HD Supply Facilities</b> <b>P.O. Box 509058</b> <b>San Diego, CA 92150</b> Date(s) debt was incurred __ Last 4 digits of account number __	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.12 Nonpriority creditor's name and mailing address **Heartland Food Products**  
**1900 W 47th Place, Suite 302**  
**Westwood, KS 66205**  
Date(s) debt was incurred \_\_  
Last 4 digits of account number \_\_

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
 Contingent  
 Unliquidated  
 Disputed

Basis for the claim: **Trade Debt**  
Is the claim subject to offset?  No  Yes

3.13 Nonpriority creditor's name and mailing address **Hilton Hotels Corporation**  
**4649 Paysphere Circle**  
**Chicago, IL 60674**  
Date(s) debt was incurred \_\_  
Last 4 digits of account number \_\_

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
 Contingent  
 Unliquidated  
 Disputed

Basis for the claim: **Trade Debt**  
Is the claim subject to offset?  No  Yes

3.14 Nonpriority creditor's name and mailing address **Hobart Service**  
**ITW Food Equipment Group**  
**PO Box 2517**  
**Carol Stream, IL 60132**  
Date(s) debt was incurred \_\_  
Last 4 digits of account number \_\_

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
 Contingent  
 Unliquidated  
 Disputed

Basis for the claim: **Trade Debt**  
Is the claim subject to offset?  No  Yes

3.15 Nonpriority creditor's name and mailing address **Mobile Mini Inc.**  
**PO BOX 7144**  
**Pasadena, CA 91109-7144**  
Date(s) debt was incurred \_\_  
Last 4 digits of account number \_\_

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
 Contingent  
 Unliquidated  
 Disputed

Basis for the claim: **Trade debt**  
Is the claim subject to offset?  No  Yes

3.16 Nonpriority creditor's name and mailing address **Moyer Lawncare & Landscaping**  
**P.O. Box 12458**  
**Oklahoma City, OK 73157**  
Date(s) debt was incurred \_\_  
Last 4 digits of account number \_\_

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
 Contingent  
 Unliquidated  
 Disputed

Basis for the claim: **Trade Debt**  
Is the claim subject to offset?  No  Yes

3.17 Nonpriority creditor's name and mailing address **Norman Transcript**  
**215 E Comanche**  
**P.O. Box 1058**  
**Norman, OK 73070**  
Date(s) debt was incurred \_\_  
Last 4 digits of account number \_\_

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
 Contingent  
 Unliquidated  
 Disputed

Basis for the claim: **Trade Debt**  
Is the claim subject to offset?  No  Yes

3.18 Nonpriority creditor's name and mailing address **RGI Publications Inc.**  
**P.O. Box 338**  
**Olathe, KS 66051-0338**  
Date(s) debt was incurred \_\_  
Last 4 digits of account number \_\_

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**  
 Contingent  
 Unliquidated  
 Disputed

Basis for the claim: **Trade Debt**  
Is the claim subject to offset?  No  Yes

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3.19	Nonpriority creditor's name and mailing address <b>Ricoh USA, Inc.</b> <b>P.O. Box 660342</b> <b>Dallas, TX 75266-0342</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Trade Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.20	Nonpriority creditor's name and mailing address <b>Royal Paper Corp</b> <b>10232 Palm Dr</b> <b>Santa Fe Springs, CA 90670</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Trade Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.21	Nonpriority creditor's name and mailing address <b>Sooner Bounce</b> <b>111 W Indian Hills Road</b> <b>Norman, OK 73069</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Trade Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$439.05</b>
3.22	Nonpriority creditor's name and mailing address <b>Staples Business Advantage</b> <b>P.O. Box 83689</b> <b>Chicago, IL 60696-3689</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Trade Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.23	Nonpriority creditor's name and mailing address <b>Sysco</b> <b>24500 Northwest Freeway</b> <b>Cypress, TX 77429</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Trade Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.24	Nonpriority creditor's name and mailing address <b>Voss Lighting Co.</b> <b>P.O. Box 22159</b> <b>Lincoln, NE 68542</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Trade Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.25	Nonpriority creditor's name and mailing address <b>Whelan Security Co</b> <b>PO Box 843886</b> <b>Kansas City, MO 64184-3886</b> Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

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Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

		Total of claim amounts
5a.	\$	<u>0.00</u>
5b.	+ \$	<u>439.05</u>
5c.	\$	<u>439.05</u>

**United States Bankruptcy Court  
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In re **JQH - Norman Development, LLC**

Debtor(s)

Case No. **16-21180**

Chapter **11**

**DECLARATION CONCERNING DEBTOR'S AMENDED SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the Vice President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing document(s), consisting of **5** page(s), and that they are true and correct to the best of my knowledge, information, and belief.

Date **May 1, 2018**

Signature **/s/ Gregory D. Groves**

**Gregory D. Groves**

**Vice President**

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.