


UNITED STATES BANKRUPTCY COURT DISTRICT OF DELAWARE		PROOF OF CLAIM	
Name of Debtor: Quantum Foods, LLC		Case Number: 14-10318	Claim # 230
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503(a).			
Name of Creditor (the person or other entity to whom the debtor owes money or property) GEA Refrigeration North America, Inc.		RECEIVED OCT 20 2014 BMC GROUP	
Name and address where notices should be sent:  34257816006461 GEA REFRIGERATION NORTH AMERICA INC SECTION: GEA FES INC ATTN: KRISTY MCMASTER - ACCOUNTING MANAGER 3475 BOARD RD YORK, PA 17406		THIS SPACE IS FOR COURT USE ONLY	
Creditor Telephone Number (717) 767-6411 email: kristy.mcmaster@gea.com		If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.	
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number (if known): _____ Filed on: _____
Payment Telephone Number () email:			
1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ <u>1,800.00</u>			
If all or part of your claim is secured, complete item 4. If all or part of your claim is entitled to priority, complete item 5.			
<input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.			
2. BASIS FOR CLAIM: _____ (See instruction #2)			
3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: <u>0688</u>		3a. Debtor may have scheduled account as: _____ (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)
4. SECURED CLAIM: (See instruction #4)			
Check the appropriate box if your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information. Nature of property or right of setoff: Describe: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Property: \$ _____ Annual Interest Rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$ _____ Basis for Perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____	
5. Amount of Claim Entitled to Administrative Expense status under 11 U.S.C. § 503(b)(9) or Priority under 11 U.S.C. § 507(a). If any part of the claim falls into one of the following categories, check the box specifying the administrative expense or priority and state the amount.			
Amount entitled to priority: \$ _____		Amount entitled to administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____	
You MUST specify the priority of the claim:			
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).		<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).	
<input type="checkbox"/> Up to \$2,775* 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"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).	
<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,475*), earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).		<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).	
		<input type="checkbox"/> Value of goods received by the debtor within 20 days before the date of the bankruptcy filing - 11 U.S.C. § 503(b)(9).	
* Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.			
6. CREDITS: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)			

Quantum Foods POC

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7. DOCUMENTS: *Attached are redacted copies of documents that support the claim,* such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and definition of "redacted").

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

DATE-STAMPED COPY To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received or before 4:00 pm, prevailing Eastern Time on November 7, 2014 for Non-Governmental Claimants, Governmental Units, and Administrative Claimants.

BY MAIL TO:
BMC Group, Inc
Attn: Quantum Foods, LLC Claims Processing
PO Box 3020
Chanhassen, MN 55317-3020

BY MESSENGER OR OVERNIGHT DELIVERY TO:
BMC Group, Inc
Attn: Quantum Foods, LLC Claims Processing
18675 Lake Drive East
Chanhassen, MN 55317

8. SIGNATURE: (See instruction #8)

Check the appropriate box.

I am the creditor. I am the creditor's authorized agent. I am the trustee, or the debtor, or their authorized agent. I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)
(See Bankruptcy Rule 3004.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Kristy McMaster
Title: Accounting Manager
Company: GEA & Ingraham North America, Inc.

[Signature] 10/16/2014
(Signature) (Date)

Address and telephone number (if different from notice address above):

Telephone number: email:

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

LIST OF DEBTORS:

- Quantum Foods, LLC 14-10318
- Quantum Foods 213-D, LLC 14-10319
- Quantum Culinary, LLC 14-10320
- GDC Logistics, LLC 14-10321
- Choice One Foods, LLC 14-10322



INVOICE

Bill To
 QUANTUM FOODS LLC
 750 S SCHMIDT RD
 Bolingbrook, IL 60440
 USA

Ship To
 QUANTUM FOODS LLC
 750 S SCHMIDT RD
 Bolingbrook, IL 60440
 USA

GEA Refrigeration Technologies

Customer account
 110688

Invoice number
 16059017

Payment terms
 30 days from date of invoice

Mode of delivery
 UPS ND AIR - PP+A

Invoice date
 13-Nov-2013

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Sales order
 10071553

Your Reference No.
 G2322

Line No	Item number	Quantity	Unit	Price each	Amount
1.00	AMF-000510-010 AF-FREEZER LITE FIXTURE 80CP-50HP SHPF120V-LP, HARRIS FREEZER LIGHT - 120VAC 50W	1.00	Pcs.	304.00	304.00
2.00	AMF-000510-010 AF-FREEZER LITE FIXTURE 80CP-50HP SHPF120V-LP, HARRIS FREEZER LIGHT - 120VAC 50W	4.00	Pcs.	304.00	1,216.00

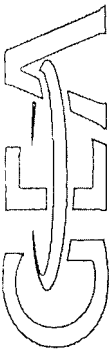
Subtotal	Shipping and Handling Charges	Total taxes	Tax %	Currency	Total
1,520.00	185.00	95.00	6.25	USD	1,800.00
				Due date	13-Dec-2013

GEA Refrigeration North America, Inc.
 Section: Formerly GEA FES, Inc.

3475 Board Road, York, PA 17406, USA
 Phone +1 717 767 6411, Fax +1 717 764 3627
 acctspayable@gea.com, www.gea.com
 Wire to: Deutsche Bank Trust Company Americas - New York
 For Credit to Account number: 00 414 203
 Swift Address: BKTRUS33, ABA Routing Number: 021001033

CLAIMS FOR DEFECTS IN MANUFACTURE MUST BE MADE WITHIN THIRTY DAYS AFTER RECEIPT OF GOODS UNLESS OTHERWISE SPECIFIED IN CONTRACT.
 NO GOODS ARE TO BE RETURNED TO US WITHOUT OUR WRITTEN CONSENT.
 THE GOODS COVERED HEREIN ARE WARRANTED TO HAVE BEEN PRODUCED IN COMPLIANCE WITH THE REQUIREMENTS OF THE FAIR LABOR STANDARDS ACT OF 1938, AS AMENDED.
 ALL PRICES QUOTED ARE F.O.B. FACTORY UNLESS OTHERWISE SPECIFICALLY STATED.
 PAST DUE ACCOUNTS SUBJECT TO 1% PER MONTH FINANCE CHARGE. THIS IS 12% PER ANNUM.

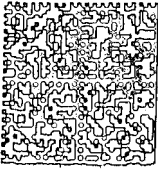
REMIT TO: GEA Refrigeration North America, Inc., P.O. Box 13383, Newark, NJ 07101-3383



GEA Refrigeration North America, Inc.
 3475 Board Rd.
 York, PA 17406-8414
 USA

RETURN SERVICE
 REQUESTED

PRESORTED
 FIRST CLASS



02 1R \$ 00.43⁵
 0002096419 OCT 17 2014
 MAILED FROM ZIP CODE 17404

BMC Group, Inc
 Ann Quantum Foods LLC Claims Processing RECEIVED
 PO Box 3020
 Charhassen, MN 55317-3020
 OCT 20 2014
 BMC GROUP

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