Fill in this information to identify the case:
Debtor 1
Debtor 2 (Spouse, if filing)
United States Bankruptcy Court for the: District of
Case number

Official Form 410

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Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use the 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 to privacy of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, to tracts, 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 Upt. §§ 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 bank aptcy (Form 309) that you received.

Part 1: Identify	the Claim			35			
1. Who is the currer	nt		S				
creditor?	Name of the current credite	Name of the current creditor (the person or entity to be pider the claim)					
	Other names the creditor u	Other names the creditor used with the debtor					
2. Has this claim be acquired from someone else?	en D No D Yes. From whom?	JGY					
3. Where should no and payments to creditor be sent?	the 🔹	the creditor be sent?		/here should payn ifferent)	nents to the creditor I	be sent? (if	
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	dure Name		N	ame			
	Nimbe Street		N	umber Street			
	City	State	ZIP Code Ci	ity	State	ZIP Code	
	Contact phone		C	ontact phone			
	Contact email		C	ontact email			
	Uniform claim identifier for	Uniform claim identifier for electronic payments in chapter 13 (if you use one):					
 Does this claim a one already filed 		r on court claims registry (i	if known)	_	Filed on	/ YYYY	
5. Do you know if an else has filed a p of claim for this c	roof 🗌 Yes Who made th	e earlier filing?					

Do you have any number No No Source to identify the Source The Sou							
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). 						
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.						
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 debtors principal residence, file a Mortgage Proof of Claim Attachment (Official Form 410 A) in the 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 mortgare lien certificate of title, financing statement, or other document that shows the lien has been filed or remoted. Value or property: \$						
FOR	Amount necessary to cure any default as of the date of the petition: \$						
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:						

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of the Date

the Cose Wee Filed

12. Is all or part of the claim	D No						
entitled to priority under 11 U.S.C. § 507(a)?	Tes. Chec	k one:					Amount entitled to priority
A claim may be partly priority and partly		tic support oblig .C. § 507(a)(1)(A		g alimony and child su	pport) under		\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.				hase, lease, or rental o U.S.C. § 507(a)(7).	of property or se	rvices for	\$
	bankru			to \$12,850*) earned wi or's business ends, wh			\$
	Taxes	or penalties owe	d to governme	ntal units. 11 U.S.C. §	507(a)(8).		\$
	Contrib	outions to an emp	oloyee benefit	olan. 11 U.S.C. § 507(a	a)(5).		\$
	Other.	Specify subsecti	on of 11 U.S.C	. § 507(a)() that app	lies.		\$
	* Amounts	are subject to adju	stment on 4/01/1	9 and every 3 years after	that for cases beg	gun on or afte	r tre o te li adjustment.
Part 3: Sign Below					C		
The person completing this proof of claim must	Check the appr	opriate box:)	
sign and date it.	I am the cr	editor.			GV.		
FRBP 9011(b).	I am the cr	editor's attorney	or authorized	agent.			
If you file this claim	I am the tru	ustee, or the deb	tor, or their au	thorized agent. Baller	ptcy Rule 3004.		
electronically, FRBP 5005(a)(2) authorizes courts	🔲 I am a gua	rantor, surety, er	ndorser, or oth	er cochoty . ankrupto	y Rule 3005.		
to establish local rules							
specifying what a signature	Lunderstand the	at an authorized	signature	Poof of Claim serve	es as an acknow	vledament ti	hat when calculating the
is.	I understand that an authorized signature on the <i>P</i> of <i>Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the d otor aredit for any payments received toward the debt.						
A person who files a	I have examined the information in the <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct. I declare under penalt, o occijury that the foregoing is true and correct.						
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.							
	MM / DD / YYYY						
	Cignoture						
Signature							
<u> </u>	Print the name	of the person v	who is comple	eting and signing this	claim:		
	Name						
		First name		Middle name	l	Last name	
	Title						
	Company						
		Number	Street				
		City			State 2	ZIP Code	
	Contact phone				Email _		