

Assignment for the Benefit of Creditors Name of Assignor: Insert Name Name of Assignee: Insert Name (assignment for the benefit of creditors), LLC Date of Assignment: Date Filing Deadline: Date		PROOF OF CLAIM
Name of Creditor (the person or entity to whom Assignor owes money or property): <div></div> <div></div> Social Security # or Tax I.D. #: <div></div> Attach W-9		<input type="checkbox"/> Address differs from the address on the envelope sent to you on behalf of the Assignee. <input type="checkbox"/> Claim amends a previously filed claim. If so, for such claim, indicate date claim mailed: <div>Month / Day / Year</div>
Name and address where notices should be sent: <div></div> <div></div> <div></div> Telephone Number: <div></div> Email Address: <div></div>		1. Basis for Claim: (check all that apply) <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Taxes <input type="checkbox"/> Equipment leased <input type="checkbox"/> Money Loaned <input type="checkbox"/> Equity Interest <input type="checkbox"/> Other (Describe briefly): <div></div> If Court Judgment, date Judgment obtained: <div>Month / Day / Year</div>
2. Provide amount of claim as of assignment date: a. Amount of Secured Claim \$ <div></div> + b. Amount of Priority Claim \$ <div></div> + c. Amount of Unsecured Claim \$ <div></div> + d. Amount of Equity Claim \$ <div></div> = e. Total Amount of Claim \$ <div></div> Date debt was incurred: <div>Month / Day / Year</div>		3. Additional information on Secured Claim: If the claim is secured by a lien on property or a right of setoff, attach all documents that support the contention that the claim is secured. Basis for perfection: <div></div> <div></div> <div></div> <div></div>
4. Additional Information on Priority Claim: <input type="checkbox"/> Wages, salaries, bonuses, severance or commissions earned within 90 days of the assignment. <input type="checkbox"/> Other – Specify: <div></div> <input type="checkbox"/> Taxes or penalties owed to governmental units. Basis for priority (describe): <div></div> <input type="checkbox"/> Contributions to an employee benefit plan.		
5. Equity Interest. Number of Shares Held: <div></div> Basis/Value Per Share: <div></div> Type: <input type="checkbox"/> Common <input type="checkbox"/> Preferred; attach documentation		
6. Documents: Attach 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. If the claim is secured, and box 3 has been completed, attach copies of documents providing evidence of perfection of a security interest. (See instruction #6) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain: <div></div>		
7. Signature: Check the appropriate box: <input type="checkbox"/> I am the creditor. <input type="checkbox"/> I am the creditor’s authorized agent. <input type="checkbox"/> I am a guarantor, surety, endorser, or other co-debtor. BY MY SIGNATURE BELOW, I DECLARE UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE STATE OF CALIFORNIA, THAT THE INFORMATION PROVIDED HEREIN AND ATTACHED HERETO IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. Print Name: <div></div> First Name, Last Name Company: <div></div> <div>Month / Day / Year</div> Title: <div></div> Signature: <div></div>		