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Attorneys for the Chapter 11 Debtors and  
Debtors In Possession

**FILED & ENTERED**

**FEB 11 2019**

CLERK U.S. BANKRUPTCY COURT  
Central District of California  
BY gonzalez DEPUTY CLERK

**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA – LOS ANGELES DIVISION**

In re:

VERITY HEALTH SYSTEM OF  
CALIFORNIA, INC., *et al.*,

Debtors and Debtors In  
Possession.

- ☒ Affects All Debtors  
☐ Affects Verity Health System of  
California, Inc.  
☐ Affects O'Connor Hospital  
☐ Affects Saint Louise Regional Hospital  
☐ Affects St. Francis Medical Center  
☐ Affects St. Vincent Medical Center  
☐ Affects Seton Medical Center  
☐ Affects O'Connor Hospital Foundation  
☐ Affects Saint Louise Regional Hospital  
Foundation  
☐ Affects St. Francis Medical Center of  
Lynwood Foundation  
☐ Affects St. Vincent Foundation  
☐ Affects St. Vincent Dialysis Center, Inc.  
☐ Affects Seton Medical Center  
Foundation  
☐ Affects Verity Business Services  
☐ Affects Verity Medical Foundation  
☐ Affects Verity Holdings, LLC  
☐ Affects De Paul Ventures, LLC  
☐ Affects De Paul Ventures - San Jose  
Dialysis, LLC

Debtors and Debtors In Possession.

Lead Case No. 2:18-bk-20151-ER

Jointly Administered With:

CASE NO.: 2:18-bk-20162-ER  
CASE NO.: 2:18-bk-20163-ER  
CASE NO.: 2:18-bk-20164-ER  
CASE NO.: 2:18-bk-20165-ER  
CASE NO.: 2:18-bk-20167-ER  
CASE NO.: 2:18-bk-20168-ER  
CASE NO.: 2:18-bk-20169-ER  
CASE NO.: 2:18-bk-20171-ER  
CASE NO.: 2:18-bk-20172-ER  
CASE NO.: 2:18-bk-20173-ER  
CASE NO.: 2:18-bk-20175-ER  
CASE NO.: 2:18-bk-20176-ER  
CASE NO.: 2:18-bk-20178-ER  
CASE NO.: 2:18-bk-20179-ER  
CASE NO.: 2:18-bk-20180-ER  
CASE NO.: 2:18-bk-20181-ER

Chapter 11 Cases

Hon. Judge Ernest M. Robles

**ORDER ESTABLISHING BAR DATE FOR FILING  
PROOFS OF CLAIM**

[No Hearing Required Unless Requested - Local  
Bankruptcy Rule 9013-1(o)]



1820151190211000000000017

1 The Court, having considered that certain *Notice Of Motion And Motion For An Order*  
2 *Establishing Bar Date For Filing Proofs Of Claim* [Doc. No. 1236] (the “Motion”), filed by Verity  
3 Health System of California, Inc. (“VHS”) and the above-referenced affiliated debtors, the debtors and  
4 debtors in possession in the above-captioned chapter 11 bankruptcy cases (collectively, the  
5 “Debtors”), and the memorandum of points and authorities, declaration of Richard G. Adcock (the  
6 “Adcock Declaration”), the *Supplement to Debtors’ Notice of Motion and Motion For An Order*  
7 *Establishing Bar Date For Filing Proofs of Claim* [Doc. No. 1348] (the “Initial Supplement”) and the  
8 *Second Supplement to Debtors’ Notice of Motion and Motion For An Order Establishing Bar Date*  
9 *For Filing Proofs of Claim* [Doc. No. 1461] (the “Second Supplement”) submitted by the Debtors in  
10 support of the Motion, proper notice of the Motion having been provided, having received no  
11 opposition to or request for hearing on the Motion, and other good cause appearing therefor, the Court  
12 hereby orders as follows:  
13

14  
15 1. The Motion is granted in its entirety.

16 2. **April 1, 2019** is established as the bar date (the “Bar Date”) by which parties who wish  
17 to assert pre-petition claims against, and interests in, the Debtors must file and serve proofs of claim  
18 or proofs of interest.

19 3. Any party that fails to file a proof of claim and/or proof of interest with the Court by  
20 the Bar Date is forever barred from thereafter asserting a pre-petition claim and/or interest against the  
21 Debtors or the Debtors’ bankruptcy estates.

22 4. The revised form of notice of the Bar Date (the “Bar Date Notice”) that is attached as  
23 **Exhibit A** hereto is approved.<sup>1</sup>  
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25  
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27  
28 <sup>1</sup> The revised Bar Date Notice reflects the form of notice of the Bar Date attached as Exhibit A to the Initial Supplement and incorporates additional language pursuant to the Second Supplement.

1           5.       The use of the modified proof of claim form attached as **Exhibit A-1** to the Bar Date  
2 Notice (the “Modified Proof of Claim Form”) is approved.

3           6.       The Debtors shall file the Bar Date Notice and the Modified Proof of Claim Form with  
4 the Court. The Debtors shall serve the Bar Date Notice and the Modified Proof of Claim Form on all  
5 parties in interest except patients of the Debtors that do not have a balance. These patients, instead,  
6 shall receive service of the Bar Date Notice only and not the Modified Proof of Claim Form. Such  
7 service shall be made no later than seven (7) days after the date of entry of this Order.

8           7.       The Debtors shall publish the Bar Date Notice only in the *Los Angeles Times*, the *San*  
9 *Jose Mercury News*, the *San Francisco Chronicle*, and *USA Today* at least twenty-eight (28) days prior  
10 to the Bar Date.

11           8.       Notwithstanding any other provision of this Order, any record or beneficial holder of  
12 those certain California Statewide Communities Development Authority Revenue Bonds (Daughters  
13 of Charity Health System) Series 2005 A, G and H, California Public Finance Authority Revenue  
14 Notes (Verity Health System) Series 2015 A, B, C and D, California Public Finance Authority  
15 Revenue Notes (Verity Health System) Series 2017 A and B, or any master indenture obligation issued  
16 by the Debtors or any of them in connection with the foregoing (each an “Obligated Debt Security”)  
17 is not required to file any Proof of Claim for any claim that is (a) limited to the repayment of principal,  
18 interest, and other applicable fees and charges on account of an Obligated Debt Security, and (b)  
19 asserted against the Debtors O’Connor Hospital, St. Francis Medical Center, St. Vincent Medical  
20 Center, Saint Louise Regional Hospital, Seton Medical Center, and/or Verity Health Systems of  
21 California, Inc. (each a “Funded Debt Claim”). Notwithstanding the foregoing, (i) any record or  
22 beneficial holder of an Obligated Debt Security wishing to assert any other claim, including any claim  
23 other than a Funded Debt Claim is required to file Proof(s) of Claim in compliance with this Order,  
24 unless another exception identified herein applies; and (ii) for the avoidance of doubt, the foregoing  
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1 exclusion in this paragraph shall not apply to any indenture trustee or collateral agent described in the  
2 documents that evidence or secure any Obligated Debt Security.

3 9. Notwithstanding any other provisions of this Order, any record or beneficial holder of  
4 those certain California Statewide Communities Development Authority ("CSCDA") Bonds issued  
5 pursuant to the CSCDA CaliforniaFirst Program dated May 11, 2017 or May 18, 2017, (each a  
6 "Special Assessment Debt Security") is not required to file any Proof of Claim for any claim that is  
7 (a) limited to the repayment of principal, interest, and other applicable fees and charges on account of  
8 a Special Assessment Debt Security and (b) asserted against the Debtor Seton Medical Center (a  
9 "Funded Assessment Claim"). Notwithstanding the foregoing, (i) any record or beneficial holder of  
10 a Special Assessment Debt Security wishing to assert any other claim, including any claim other than  
11 a Funded Assessment Claim is required to file Proof(s) of Claim in compliance with this Order, unless  
12 another exception identified herein applies; and (ii) for the avoidance of doubt, the foregoing exclusion  
13 in this paragraph shall not apply to any indenture trustee or collateral agent described in the documents  
14 that evidence or secure any Special Assessment Debt Security.

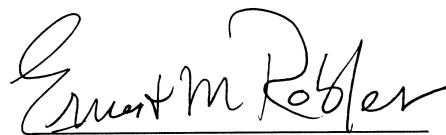
15 10. Each indenture trustee or collateral agent for an Obligated Debt Security or a Special  
16 Assessment Debt Security is authorized to file such proof(s) of claim on behalf of itself and the  
17 beneficial and record holders of such Funded Debt Claims or Funded Assessment Claim against each  
18 relevant Debtor in compliance with this Order and/or may in its sole discretion include or reference  
19 such documents that evidence or secure any Obligated Debt Security or Special Assessment Debt  
20 Security (and is excused from attaching copies of any referenced documents evidencing and/or  
21 securing those claims, so long as those materials remain available on request).

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**IT IS SO ORDERED.**

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Date: February 11, 2019

A handwritten signature in black ink, reading "Ernest M. Robles". The signature is written in a cursive style with a horizontal line underneath the name.

Ernest M. Robles  
United States Bankruptcy Judge

## EXHIBIT A

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☐ Affects St. Vincent Medical Center  
☐ Affects Seton Medical Center  
☐ Affects O'Connor Hospital Foundation  
☐ Affects Saint Louise Regional Hospital  
Foundation  
☐ Affects St. Francis Medical Center of  
Lynwood Foundation  
☐ Affects St. Vincent Foundation  
☐ Affects St. Vincent Dialysis Center, Inc.  
☐ Affects Seton Medical Center  
Foundation  
☐ Affects Verity Business Services  
☐ Affects Verity Medical Foundation  
☐ Affects Verity Holdings, LLC  
☐ Affects De Paul Ventures, LLC  
☐ Affects De Paul Ventures - San Jose  
Dialysis, LLC

Debtors and Debtors In Possession.

Lead Case No. 2:18-bk-20151-ER

Jointly Administered With:

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CASE NO.: 2:18-bk-20175-ER  
CASE NO.: 2:18-bk-20176-ER  
CASE NO.: 2:18-bk-20178-ER  
CASE NO.: 2:18-bk-20179-ER  
CASE NO.: 2:18-bk-20180-ER  
CASE NO.: 2:18-bk-20181-ER

Chapter 11 Cases

Hon. Judge Ernest M. Robles

**NOTICE OF BAR DATE FOR FILING PROOFS  
OF CLAIMS AND INTERESTS**

**BAR DATE: APRIL 1, 2019**

**TO ALL CREDITORS, EQUITY AND INTEREST HOLDERS, AND OTHER  
PARTIES IN INTEREST:**

**NOTICE OF CLAIMS BAR DATE**

The Bankruptcy Court has set a deadline of April 1, 2019 for creditors and holders of ownership interests in Verity Health System of California, Inc., a California nonprofit benefit corporation and the Debtor herein, and the above-referenced affiliated debtors, the debtors and debtors in possession in the above-captioned chapter 11 bankruptcy cases (collectively, the “Debtors”), to file proofs of claim against, or proofs of interest in, the Debtors’ estates.

The exceptions to this deadline for filing proofs of claims or interest are: (1) claims arising from rejection of executory contracts or unexpired leases, (2) claims of governmental units, and (3) claims arising as the result of transfer avoidance pursuant to chapter 5 of the Bankruptcy Code.

Unless otherwise ordered by the Court, claims arising from (i) rejection of executory contracts or unexpired leases pursuant to 11 U.S.C. § 365, (ii) rejection or modification of collective bargaining agreements pursuant to 11 U.S.C. § 1113, (iii) voluntary termination of pension plans under the Employee Retirement Income Security Act (“ERISA”), or (iv) withdrawal from a multiemployer pension plan governed by ERISA, or (v) termination of retiree benefits, including as may be required under 11 U.S.C. § 1114, the last day to file a proof of claim is: (a) 30 days after the date of entry of the order authorizing such rejection, modification, voluntary termination or withdrawal; or (b) April 1, 2019, whichever is later.

For claims of “governmental units,” as that term is defined in 11 U.S.C. § 101(27), the last day to file a proof of claim is: (a) 180 days after the entry the order for relief in this case, or (b) April 1, 2019, whichever is later. 11 U.S.C. § 502(b)(9).

For administrative claims arising under Section 503(b)(9) of the Bankruptcy Code (a “503(b)(9) Claim”) on account of goods sold to the Debtors in the ordinary course of the Debtors’ business that were received by the Debtors within 20 days before the commencement of the Debtors’ cases, the last day to request allowance of such claims by filing a proof of claim and indicating that the claim asserted is a 503(b)(9) Claim is the Bar Date, i.e. April 1, 2019.

For claims arising from the avoidance of a transfer under chapter 5 of the Bankruptcy Code, the last day to file a proof of claim is: (a) 30 days after the entry of judgment avoiding the transfer, or (b) April 1, 2019, whichever is later.

If you are listed on the Schedules of Assets and Liabilities of the Debtors and your claim or interest is not scheduled as disputed, contingent, unliquidated or unknown, your claim or interest is deemed filed in the amount set forth in the schedules, and filing of a proof of claim or interest is unnecessary if you agree that the amount scheduled is correct and that the category in which your claim or interest is scheduled (secured, unsecured, preferred stock, common stock, *etc.*) is correct. 11 U.S.C. § 1111(a).

If your claim or interest is not listed on the schedules or is scheduled as disputed, contingent, unliquidated or unknown, or if you disagree with the amount or description scheduled for your claim or interest, you must file a proof of claim or interest.



1 Notwithstanding any other provision of this Notice, any record or beneficial holder of those  
2 certain California Statewide Communities Development Authority Revenue Bonds (Daughters of  
3 Charity Health System) Series 2005 A, G and H, California Public Finance Authority Revenue Notes  
4 (Verity Health System) Series 2015 A, B, C and D, California Public Finance Authority Revenue  
5 Notes (Verity Health System) Series 2017 A and B, or any master indenture obligation issued by the  
6 Debtors or any of them in connection with the foregoing (each an “Obligated Debt Security”) is not  
7 required to file any proof of claim for any claim that is (a) limited to the repayment of principal,  
8 interest, and other applicable fees and charges on account of an Obligated Debt Security, and (b)  
9 asserted against the Debtors O’Connor Hospital, St. Francis Medical Center, St. Vincent Medical  
10 Center, Saint Louise Regional Hospital, Seton Medical Center, and/or Verity Health Systems of  
11 California, Inc. (each a “Funded Debt Claim”). Notwithstanding the foregoing, (i) any record or  
12 beneficial holder of an Obligated Debt Security wishing to assert any other claim, including any claim  
13 other than a Funded Debt Claim is required to file proof(s) of claim in compliance with this Notice,  
14 unless another exception identified herein applies; and (ii) for the avoidance of doubt, the foregoing  
15 exclusion in this paragraph shall not apply to any indenture trustee or collateral agent described in the  
16 documents that evidence or secure any Obligated Debt Security.

17 Notwithstanding any other provisions of this Notice, any record or beneficial holder of those  
18 certain California Statewide Communities Development Authority (“CSCDA”) Bonds issued pursuant  
19 to the CSCDA CaliforniaFirst Program dated May 11, 2017 or May 18, 2017, (each a “Special  
20 Assessment Debt Security”) is not required to file any proof of claim for any claim that is (a) limited  
21 to the repayment of principal, interest, and other applicable fees and charges on account of a Special  
22 Assessment Debt Security and (b) asserted against the Debtor Seton Medical Center ( a “Funded  
23 Assessment Claim”). Notwithstanding the foregoing, (i) any record or beneficial holder of a Special  
24 Assessment Debt Security wishing to assert any other claim, including any claim other than a Funded  
25 Assessment Claim is required to file proof(s) of claim in compliance with this Notice, unless another  
26 exception identified herein applies; and (ii) for the avoidance of doubt, the foregoing exclusion in this  
27 paragraph shall not apply to any indenture trustee or collateral agent described in the documents that  
28 evidence or secure any Special Assessment Debt Security.

Each indenture trustee or collateral agent for an Obligated Debt Security or a Special  
Assessment Debt Security is authorized to file such proof(s) of claim on behalf of itself and the  
beneficial and record holders of such Funded Debt Claims or Funded Assessment Claim against each  
relevant Debtor in compliance with this Notice and/or may in its sole discretion include or reference  
such documents that evidence or secure any Obligated Debt Security or Special Assessment Debt  
Security (and is excused from attaching copies of any referenced documents evidencing and/or  
securing those claims, so long as those materials remain available on request).

**Failure of a creditor or interest holder to file timely a proof of claim or interest on or  
before the deadline may result in disallowance of the claim or interest or subordination under  
the terms of a plan of reorganization without further notice or hearing. 11 U.S.C. § 502(b)(9).  
Creditors and interest holders may wish to consult an attorney to protect their rights.**

Dated: February \_\_\_\_, 2019

DENTONS US LLP

By: \_\_\_\_\_

Samuel R. Maizel

Tania M. Moyron

Attorneys for Chapter 11 Debtors and Debtors in  
Possession

In re Verity Health System of California, Inc., et al.  
(Case No. 2:18-bk-20151-ER)

Attached is a blank Proof of Claim form for the above-captioned case (with instructions). Proof of interest forms, and additional copies of proof of claim forms, may be obtained from the Debtors' Claims and Noticing Agent, Kurtzman, Carson Consultants LLC ("KCC"), located at 2335 Alaska Avenue, El Segundo, CA 90245, (888) 249-2741, or by visiting KCC's website at <http://www.kccllc.net/verityhealth>.

Please be advised that all Proofs of Claim and Proofs of Interest, with all supporting documentation, must be submitted to KCC via mail or courier no later than April 1, 2019 at 5:00 p.m. (Pacific Time), at the following address:

Verity Claims Processing Center  
c/o KCC  
2335 Alaska Avenue  
El Segundo, CA 90245

## **Exhibit A1**

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United States Bankruptcy Court for the Central District of California

Indicate Debtor against which you assert a claim by checking the appropriate box below. **(Check only one Debtor per claim form.)**

- |  |   |
|--|---|
| <input type="checkbox"/> Verity Health System of California (Case No. 18-20151)        | <input type="checkbox"/> St. Francis Medical Center of Lynwood Foundation (Case No. 18-20178) |
| <input type="checkbox"/> De Paul Ventures – San Jose Dialysis, LLC (Case No. 18-20181) | <input type="checkbox"/> St. Louise Regional Hospital (Case No. 18-20162)                     |
| <input type="checkbox"/> De Paul Ventures, LLC (Case No. 18-20176)                     | <input type="checkbox"/> St. Vincent Dialysis Center, Inc. (Case No. 18-20171)                |
| <input type="checkbox"/> O'Connor Hospital (Case No. 18-20168)                         | <input type="checkbox"/> St. Vincent Foundation (Case No. 18-20180)                           |
| <input type="checkbox"/> O'Connor Hospital Foundation (Case No. 18-20179)              | <input type="checkbox"/> St. Vincent Medical Center (Case No. 18-20164)                       |
| <input type="checkbox"/> Saint Louise Regional Hospital Foundation (Case No. 18-20172) | <input type="checkbox"/> Verity Business Services (Case No. 18-20173)                         |
| <input type="checkbox"/> Seton Medical Center (Case No. 18-20167)                      | <input type="checkbox"/> Verity Holdings, LLC (Case No. 18-20163)                             |
| <input type="checkbox"/> Seton Medical Center Foundation (Case No. 18-20175)           | <input type="checkbox"/> Verity Medical Foundation (Case No. 18-20169)                        |
| <input type="checkbox"/> St. Francis Medical Center (Case No. 18-20165)                |   |

## 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 or 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.**

### Part 1: Identify the Claim

**1. Who is the current creditor?**

Name of the current creditor (the person or entity to be paid for this claim) \_\_\_\_\_

Other names the creditor used with the debtor \_\_\_\_\_

**2. Has this claim been acquired from someone else?**

☐ No

☐ Yes.

From whom? \_\_\_\_\_

**3. Where should notices and payments to the creditor be sent?**

**Where should notices to the creditor be sent?**

**Where should payments to the creditor be sent? (if different)**

Name \_\_\_\_\_

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Country \_\_\_\_\_

Country \_\_\_\_\_

Contact phone \_\_\_\_\_

Contact phone \_\_\_\_\_

Contact email \_\_\_\_\_

Contact email \_\_\_\_\_

Uniform claim identifier for electronic payments in chapter 13 (if you use one):  
\_\_\_\_\_

**4. Does this claim amend one already filed?**

☐ No

☐ Yes.

Claim number on court claims registry (if known) \_\_\_\_\_

Filed on \_\_\_\_\_

MM / DD / YYYY

**5. Do you know if anyone else has filed a proof of claim for this claim?**

☐ No

☐ Yes.

Who made the earlier filing? \_\_\_\_\_

## Part 2:

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ____
7. How much is the claim? \$ _____	Does this amount include interest or other charges? <input type="checkbox"/> No <input type="checkbox"/> 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?	<input type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. <div style="margin-left: 40px;"> <b>Nature of property:</b>   <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>.   <input type="checkbox"/> Motor vehicle   <input type="checkbox"/> Other. Describe: _____         </div> <div style="margin-left: 40px; margin-top: 20px;"> <b>Basis for perfection:</b> _____          Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)       </div> <div style="margin-left: 40px; margin-top: 20px;"> <b>Value of property:</b> \$ _____  <b>Amount of the claim that is secured:</b> \$ _____  <b>Amount of the claim that is unsecured:</b> \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.)       </div> <div style="margin-left: 40px; margin-top: 20px;"> <b>Amount necessary to cure any default as of the date of the petition:</b> \$ _____   <b>Annual Interest Rate</b> (when case was filed) _____ %  <input type="checkbox"/> Fixed  <input type="checkbox"/> Variable       </div>
10. Is this claim based on a lease?	<input type="checkbox"/> No <input type="checkbox"/> Yes. <b>Amount necessary to cure any default as of the date of the petition.</b> \$ _____
11. Is this claim subject to a right of setoff?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ No

☐ Yes. Check all that apply:

Amount entitled to priority

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ \_\_\_\_\_

☐ 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).

\$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$12,850\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ \_\_\_\_\_

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

Check the appropriate box:

☐ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date \_\_\_\_\_  
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name \_\_\_\_\_  
First name Middle name Last name

Title \_\_\_\_\_

Company \_\_\_\_\_  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_  
Number Street

City State ZIP Code Country

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

## Official Form 410

# Instructions for Proof of Claim

United States Bankruptcy Court

04/16

These instructions and definitions generally explain the law. In certain circumstances, such as bankruptcy cases that debtors do not file voluntarily, exceptions to these general rules may apply. You should consider obtaining the advice of an attorney, especially if you are unfamiliar with the bankruptcy process and privacy regulations.

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

### PLEASE SEND COMPLETED PROOF(S) OF CLAIM TO:

Verity Claims Processing Center  
c/o KCC  
2335 Alaska Avenue  
El Segundo, CA 90245

### How to fill out this form

- Fill in all of the information about the claim as of the date the case was filed.

- Fill in the caption at the top of the form

- If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.

- Attach any supporting documents to this form.  
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *redaction* on the next page.)

Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called "Bankruptcy Rule") 3001(c) and (d).

- Do not attach original documents because attachments may be destroyed after scanning.

- If the claim is based on delivery health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.

- A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, individual's tax identification number, or financial account number, and only the year of any person's date of birth. See Bankruptcy Rule 9037.

- For a minor child, fill in only the child's initials and the full name and address of the child's parent or guardian.  
For example, write *A.B., a minor child (John Doe, parent, 123 Main St., City, State)*. See Bankruptcy Rule 9037.

### Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, either enclose a stamped self-addressed envelope and a copy of this form or you may view a list of filed claims in this case by visiting the Claims and Noticing and Agent's website at <http://www.kccllc.net/verityhealth>.

### Understand the terms used in this form

**Administrative expense:** Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing that bankruptcy estate.  
11 U.S.C. § 503

**Claim:** A creditor's right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. § 101 (5). A claim may be secured or unsecured.



**Creditor:** A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. §101 (10).

**Debtor:** A person, corporation, or other entity to who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received.  
11 U.S.C. §101 (13).

**Evidence of perfection:** Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

**Information that is entitled to privacy:** A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

**Priority claim:** A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

**Proof of claim:** A form that shows the amount of debt the debtor owed to a creditor on the date of the bankruptcy filing. The form must be filed in the district where the case is pending.

**Redaction of information:** Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to **privacy** on the *Proof of Claim* form and any attached documents.

**Secured claim under 11 U.S.C. §506(a):** A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In states, a court judgment may be a lien.

**Setoff:** Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

**Uniform claim identifier:** An optional 24-character identifier that some creditors use to facilitate electronic payment.

**Unsecured claim:** A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

## Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

**Do not file these instructions with your form.**

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