District of: Division No. Court No. Estate No.	Ontario FORM 31
	Proof of Claim (Sections 50.1, 81.5, 81.6, Subsections 65.2(4), 81.2(1), 81.3(8), 81.4(8), 102(2), 124(2), 128(1), and Paragraphs 51(1)(e) and 66.14(b) of the Act)
ı	In the matter of the bankruptcy of
	SUMMARY ADMINISTRATION
All notices or o	correspondence regarding this claim must be forwarded to the following address:
In the ma	atter of the bankruptcy of of the City of in the Province of and the claim of , creditor.
l,	(name of creditor or representative of the creditor), of the city of in the
	I am a creditor of the above named debtor (or I am (position/title) of, creditor).
3. That the creditor in Schedule "A", the vouchers of	have knowledge of all the circumstances connected with the claim referred to below. the debtor was, at the date of bankruptcy, namely the day of, 20, and still is, indebted to the sum of \$, as specified in the statement of account (or affidavit) attached and marked after deducting any counterclaims to which the debtor is entitled. (The attached statement of account or affidavit must specify rother evidence in support of the claim.) It is a support of the claim of the claim of the claim of the claim of the claim.)
	A. UNSECURED CLAIM OF \$
	(other than as a customer contemplated by Section 262 of the Act)
That	n respect of this debt, I do not hold any assets of the debtor as security and (Check appropriate description.)
	Regarding the amount of \$, I claim a right to a priority under section 136 of the Act.
	Regarding the amount of \$, I do not claim a right to a priority. (Set out on an attached sheet details to support priority claim.)
	B. CLAIM OF LESSOR FOR DISCLAIMER OF A LEASE \$
That I	nereby make a claim under subsection 65.2(4) of the Act, particulars of which are as follows: (Give full particulars of the claim, including the calculations upon which the claim is based.)
	C. SECURED CLAIM OF \$
That ir (Give attach	respect of this debt, I hold assets of the debtor valued at \$ as security, particulars of which are as follows: iull particulars of the security, including the date on which the security was given and the value at which you assess the security, and a copy of the security documents.)
	D. CLAIM BY FARMER, FISHERMAN OR AQUACULTURIST OF \$
That I	nereby make a claim under subsection 81.2(1) of the Act for the unpaid amount of \$(Attach a copy of sales agreement and delivery receipts.)

FORM 31 --- Concluded

		E. CLA	M BY	WAG	E E/	IRNE	ER C)F \$_																				
	\Box	That I h	ereby	make	a cla	aim u	ınde	r sub	section	on 81	1.3(8)	of the	Act i	in the	amo	unt o	f \$_			_,								
		That I h	ereby	make	a cla	aim u	ınde	r sub	sectio	on 81	.4(8)	of the	Act i	in the	amo	unt of	f \$,								
		F. CLAI	м вү	EMPI	_OYE	3E F(OR (JNPA	AID AI	MOL	INT R	EGAF	RDIN	G PE	NSIC	N PL	AN	OF S	\$									
		That I h	ereby	make	a ck	aim u	ınde	r sub	sectio	on 81	.5 of t	the Ad	ct in tl	he an	nouni	of \$_												
		That I h	ereby	make	a cla	aim u	ınde	rsub	sectio	on 81	.6 of t	the Ad	ct in tl	he an	nount	of \$_			,									
ĺ		G. CLA	M AG	AINS	T DIF	RECT	ГOR	\$		·																		
	That	e comple I hereby full part	make	a clai	im un	ider s	subs	ection	n 50(ˈ	13) c	f the /	Act, p	articu	ılarş d	of wh	ich ar	e as	i foli	ows:									
j		H. CLAIN	1 OF A	CUS	NOTE	1ER	OF A	A BAI	VKRL	JPT :	SECU	IRITIE	S FIF	RM \$.			_											
	That (Give	hereby full parti	make culars	a clai of the	m as e <i>clai</i>	a cu m, in	stor clud	ner fo	or net ne cai	equi Icula	ty as α tions ι	conte upon i	mplat which	ted by the o	sect claim	ion 2 is ba	62 o sed.	of the	e Act	part	icula	rs of	whic	ch ar	e as f	ollows	•	
5. within th	That, ne mea	to the b	est of ection	my l 4 of	inowl the A	ledge let, a	e, I _ nd _		((a nave	ım/am /has/h	n not) nave n	(or ti not/ha	he at s not	ove-) dea	name It with	d ci the	redit deb	or _ otor ii	ı a n	on-a	(is rm's-	/is n leng	ot)) th m	relate anner	d to t	ne debt	or
meaning	g of su within	he mear	2(1) o ina of	f the . secti	Act th on 4	hat li of the	have e Ac	e bee ct or w	n priv vere r	/y to not d	or a p ealing	oarty to with	o with each	the other	debto at a	r with rm's l	nin tl enat	he th th. w	ree ithin	nont the 1	hs (c l2 m	or, if t onths	he c s) im	redit med	or an	d the c before	lebtor a	re
7.	⊐ Wi	cable on nenever t yments u t that the	he tru nder s	stee r	eviev	ws the	e fin e Ac	ancia	ai situ ques	ation	of a l	hankri	upt to , purs	rede suant	termi to pa	ne wl ragra	heth ph 6	er o 38(4)	r not) of th	the b	ankr et, of	rupt i the r	s rec	quire fixed	d to n I amo	nake unt or d	of the	
	☐ I re	quest the s	at a co sent to	py of the a	the r	epor add	t file ress	d by	the tr	uste	e rega	arding	the b	ankrı	ıpt's	applio	catio	n fo	r disc	charg	e pu	rsua	nt to	subs	sectio	n 170(1) of	
Dated at										, this	 				d	ay of												
		Witne	ess															-				Cre	edito	r			-	
																Phon	e Ni	umb	er:									
																Fax I				_								
																E-ma	all Ac	ddre	SS:									
NOTE:	lf an a	fidavit is atta	ched, it m	ust have	been л	nade be	efore a	person	qualified	d to take	affidavil	ts.																
WARNINGS:		ee may, purs	•						•				red credi	itor of th	e debt c	r the val	ue of t	the sec	curity as	asses	sed, in	a proof	of sect	urity, by	y the			

Subsection 201(1) of the Act provides severe penalties for making any false claim, proof, declaration or statement of account.

ADAMSON & ASSOCIATES INC.

INSTRUCTIONS FOR COMPLETING PROOF OF CLAIM FORMS

Every creditor who does not prove his claim is not entitled to share in any distribution. Claim forms not completed correctly in every respect do not constitute a proven claim and will be returned.

In completing the form, your attention is directed to the following requirements:

Proof of Claim

- 1. The declaration must be completed by an <u>individual</u> and not by a corporation. If you are acting for a corporation or other person you must state the capacity in which you are acting, such as, "Credit Manager", "Treasurer", "Authorized Agent", etc.
- 2. You must have knowledge of the circumstances connected with the claim.
- 3. The debtor's name and date of the bankruptcy must be filled in and a Statement of Account containing details of the claim must be attached and marked "A". The date of bankruptcy and the correct name of the bankrupt may be found on the Notice to Request a First Meeting of Creditors.
- 4. The nature of your claim must be indicated by ticking the type of claim which applies. E.g.
 - Ticking (A) indicates your claim is unsecured; either with or without priority;
 - Ticking (B) indicates your claim is by a Lessor for Disclaimer of Lease, and providing full details of disclaimer;
 - Ticking (C) indicates your claim is secured and you must insert the value at which you assess your security. Give full particulars of the security, including the date on which the security was given and attach a copy of the security documents.
 - . Ticking (D) indicates you are making a claim under subsection 81.2(1) of the Act for the unpaid amount. Attach a copy of sales agreement and delivery documents.
 - Ticking (E) indicates you were an Employee of the Debtor and owed wages;
 - Ticking (F) indicates you were an Employee of the Debtor and owed for unpaid amount regarding Pension Plan;
 - Ticking (G) indicates you are making a claim under subsection 50(13) of the Act which can be made when a proposal is made in respect of a corporation and the proposal includes a term for the compromise of claims against directors of the corporation.
- 5. You must indicate (by striking out "are" or "are not") whether the creditor and the debtor are related. Section 4 (formerly Section 2B) of the *Bankruptcy and Insolvency Act* defines persons related to bankrupt. If you are related by blood or marriage to the bankrupt, then you should consider yourself to be a related person. If the bankrupt is a corporation, you would be considered to be related to it, if you were a shareholder or if your company was controlled by the same shareholders as the bankrupt corporation.
- 6. You must provide full details of all payments and credits received from or allowed to the debtor during the period indicated. If none, so state.
- 7. You must date and sign the proof of claim form and <u>have your signature witnessed.</u>

IF YOU HAVE ANY QUESTIONS IN COMPLETING YOUR PROOF OF CLAIM, PLEASE WRITE OR TELEPHONE THE OFFICE OF THE TRUSTEE.