

Proof of Claim Form

Matter: HighKey ABC, LLC as Assignee for Summit Naturals, Inc.

Assignment Date: 03/01/2024

Name of Current Creditor:

Other Names Used with the Debtor:

Creditor Information

a. Where should Notices and Payments Be Sent?

Mailing Address for Notices			Mailing Address for Payments (if different)		
Street			Street		
City	State	Zip	City	State	Zip
Phone Number:			Phone Number:		
Email Address:			Email Address:		

Claim Information

b. Amount of claim (as of assignment date):

c. Basis for Claim:

- ☐ Goods sold ☐ Services Performed
☐ Equipment lease ☐ Money loaned
☐ Equity Interest ☐ Real estate lease
☐ Other (please describe):

d. Is this an amended claim?

☐ No ☐ Yes

e. What type of claim is this and what is the claim amount?

Secured: ☐ No ☐ Yes Amount:
Unsecured: ☐ No ☐ Yes Amount:
Priority: ☐ No ☐ Yes Amount:
Equity: ☐ No ☐ Yes Amount:

f. Has this claim been acquired from someone else?

☐ Unsure ☐ No ☐ Yes (If yes, who?):

g. Has anyone else filed a proof of claim for this claim?

☐ Unsure ☐ No ☐ Yes (If yes, who?):

Secured Claims

Complete this section if all or part of your claim is secured, as indicated by question "e."

h. Secured claim amount:

i. Nature of Property or Right of Setoff of the secured claim?

- ☐ Real Estate ☐ Personal Property ☐ Motor Vehicle ☐ Intellectual Property ☐ Digital Property
☐ Other (please describe):

j. Value of the property under lien by the secured claim:

k. Annual interest rate on the secured claim:

☐ Fixed Rate ☐ Variable Rate

l. Amount necessary to cure any default as of the date of the petition:

m. Proof of secured claim:

- ☐ I have attached redacted copies of documents, if any, that show evidence of perfection of a security interest

Unsecured Claims

Complete this section if all or part of your claim is unsecured, as indicated by question "e."

n. Unsecured claim amount:

o. Proof of unsecured claim:

- ☐ I have attached redacted copies of documents, if any, that show evidence of the unsecured claim

Priority Claims

Complete this section if all or part of your claim is priority, as indicated by question "e."

p. Priority claim amount:

q. Basis for Claim:

- ☐ Wages, salaries, bonuses, severance, or commissions earned
- ☐ Contributions to an employee benefit plan
- ☐ Taxes or penalties owed to governmental units
- ☐ Other (please describe):

r. Proof of priority claim:

- ☐ I have attached redacted copies of documents, if any, that show evidence of the unsecured claim

Equity Claims

Complete this section if all or part of your claim is equity, as indicated by question "e."

s. Equity claim amount:

t. Proof of equity claim:

- ☐ I have attached redacted copies of documents, if any, that show evidence of the unsecured claim

Signature and Mailing Instructions

u. Please check the appropriate box:

- ☐ I am the creditor
- ☐ I am the creditor's authorized agent
- ☐ I am a guarantor, surety, endorser, or other co-debtor

v. Declaration

BY MY SIGNATURE BELOW, I DECLARE UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE STATE OF DELAWARE, THAT THE INFORMATION PROVIDED HEREIN AND ATTACHED HERETO IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Signature:

Signature

Date

Name:

Title

Company:

Address:

Street

City

State

Zip

Contact Phone:

Contact Email:

Please mail all correspondence to:

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