RICHTER

THIS INFORMATION SHEET IS SUPPLIED IN ORDER TO ASSIST YOU IN COMPLETING THE PROOF OF CLAIM FORM

	The pro	pof of claim must be signed by the individual completing the form.	
	The sig	nature of the claimant must be witnessed.	
	Give th	e complete address (including postal code) where all notices and correspondence are to be forwarded.	
	The am	nount on the statement of account must agree with the amount claimed on the proof of claim.	
PARAG	RAPH 1	OF THE PROOF OF CLAIM	
	If the in	dividual completing the proof of claim is not the creditor himself, he must state his position or title.	
	The cre	editor must state the full and complete legal name of the Company or the claimant.	
PARAG	RAPH 3	OF THE PROOF OF CLAIM	
	the dol paymer	led statement of account must be attached to the proof of claim and must show the date, the invoice number and lar amount of all the invoices or charges, together with the date, the number and the amount of all credits or ints. A statement of account is not complete if it begins with an amount brought forward. In addition, a creditor must be his/her address, phone number, fax number and E-mail address.	
PARAG	RAPH 4	OF THE PROOF OF CLAIM	
		ecured creditor (subparagraph (A)) must check and state whether or not a priority rank is claimed under Section the Bankruptcy and Insolvency Act.	
	A claim of landlord (subparagraph (B)) for disclaim of lease must be completed with full particulars and calculations.		
	A secured creditor must complete subparagraph (C) and attach a copy of the security documents.		
	A farme	er, fisherman or aquaculturist must complete subparagraph (D).	
	A wage	e earner must complete subparagraph (E), if applicable.	
	Section	F must be completed with regard to a pension plan.	
		n against director(s) (subparagraph (G)), in a proposal which compromises a creditor's claim, must contain full lars and calculations.	
	A custo	omer of a bankrupt securities firm must complete subparagraph (H).	
PARAG	RAPH 5	OF THE PROOF OF CLAIM	
	The claimant must indicate whether he/she is or is not related to the debtor, as defined in the Bankruptcy and Insolvency Act, by striking out that which is not applicable.		
PARAG	RAPH 6	OF THE PROOF OF CLAIM	
	The cla	imant must attach a detailed list of all payments received and/or credits granted, as follows:	
	a)	within the three months preceding the initial bankruptcy event, in the case where the claimant and the debtor are not related ;	
	b)	within the twelve months preceding the initial bankruptcy event, in the case where the claimant and the debtor are related .	
PROXY			
	a)	A creditor may vote either in person or by proxy;	
	b)	A debtor may not be appointed as proxy to vote at any meeting of the creditors; The Trustee may be appointed as a proxy for any creditor;	
	c) d)	In order for a duly authorized person to have a right to vote he must himself be a creditor or be the holder of a properly executed proxy. The name of the creditor must appear in the proxy.	

T. 514.934.3400 F. 514.934.8603 claims@richter.ca

Richter Advisory Group Inc. Richter Groupe Conseil Inc. 1981 McGill College Montréal, QC H3A 0G6



RICHTER

PROOF OF CLAIM

(Section 50.1, Subsections 65.2(4), 81.2(1), 81.3(8), 81.4(8), 81.5, 81.6, 102(2), 124(2), 128(1), and Paragraphs 51(1)(e) and 66.14(b) of the Act)

All i	notic	es	or correspondence regarding this claim must be forwa	arded to the following address:	
			er of the Bankruptcy of 9327-2979 Québec Inc. (form , and the claim of	nerly Aliments Prolimer Inc.) of the City of Candiac, Province	
 I,				(name of creditor or representative of	•
			<i>r</i>), of		
			am a creditor of the above-named debtor (or that I am	n (state position or (name of creditor or representative of the creditor).	
2.	Tha	at I	have knowledge of all of the circumstances connected	d with the claim referred to below.	
of \$ ded	uctir	ng a	, as specified in the statement o	August 26, 2015, and still is, indebted to the creditor in the sun of account (or affidavit) attached and marked Schedule "A" afte a attached statement of account or affidavit must specify the	
4.	Che	eck	and complete appropriate category		
		Α.	. UNSECURED CLAIM OF \$	_	
		(0	Other than as a customer contemplated by Section 262	2 of the Act)	
		Tł	hat in respect of this debt, I do not hold any assets of	the debtor as security and	
		(0	Check appropriate description)		
			Regarding the amount of \$, I do ("Ordinary Creditor")	not claim a right to a priority.	
			Regarding the amount of \$, I cla ("Preferred Creditor")	nim a right to a priority under section 136 of the Act.	
			(Set out on an attached sheet details to support pri	iority claim)	
		В.	. CLAIM OF LESSOR FOR DISCLAIMER OF A LEAS	SE \$	
			hat I hereby make a claim under subsection 65.2(4) of Give full particulars of the claim, including the calculati		
		С	. SECURED CLAIM OF \$	_	
		ar (G	re as follows:	valued at \$ as security, particulars of which on which the security was given and the value at which you documents.)	1
		D	. CLAIM BY FARMER, FISHERMAN OR AQUACULT	'URIST OF \$	
			hat I hereby make a claim under subsection 81.2(1) of Attach a copy of sales agreement and delivery receipts		

T. 514.934.3400 F. 514.934.8603 <u>claims@richter.ca</u>



FORM 31 (Continued)

Sigriau	re of creditor	Signature of witness	
Signatt	ire of creditor	•	
Jigi iall	no or orounor	•	
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•	ana numbari	Fox numbers	
•	one number:	Fax number:	
Telepho E-mail a	address:	Fax number:	
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