

UNITED STATES BANKRUPTCY COURT		DISTRICT OF <u>DELAWARE</u>		PROOF OF CLAIM
Name of Debtor <u>GRACEWAY PHARMACEUTICALS</u>		Case Number <u>11-13036</u>		
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.				
Name of Creditor (The person or other entity to whom the debtor owes money or property): <u>STERLING COMMERCE, INC</u>		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.		
Name and address where notices should be sent: <u>4600 LAKEHURST CT. DUBLIN, OH 43016</u>		THIS SPACE IS FOR COURT USE ONLY		
Telephone number:				
Last four digits of account or other number by which creditor identifies debtor: <u>903575</u>		Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____		
1. Basis for Claim <input checked="" type="checkbox"/> Goods sold RECEIVED <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Wages, salaries, and compensation (fill out below) <input checked="" type="checkbox"/> Services performed NOV 10 2011 <input type="checkbox"/> Taxes <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Money loaned BMC GROUP <input type="checkbox"/> Other _____ From _____ to _____ (date) (date)				
2. Date debt was incurred:		3. If court judgment, date obtained:		
4. Classification of Claim. Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time the case was filed. See reverse side for important explanations.				
Unsecured Nonpriority Claim \$ <u>3,805.50</u> <input type="checkbox"/> Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or c) none or only part of your claim is entitled to priority.		Secured Claim <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Other _____ <input type="checkbox"/> Motor Vehicle Value of Collateral: \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____		
Unsecured Priority Claim <input type="checkbox"/> Check this box if you have an unsecured claim, all or part of which is entitled to priority. Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950),* earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).		<input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____). *Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.		
5. Total Amount of Claim at Time Case Filed: <u>\$ 3,805.50</u> (unsecured) (secured) (priority) (total) <u>\$ 3,805.50</u> <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.				
6. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.				
7. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.				
8. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.				
Date <u>10-28-11</u>	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any) <u>David W. Wilson</u> <u>AIR Dept.</u>			

THIS SPACE IS FOR COURT USE ONLY
 NOV-3 AM 9:22
 FILED
 CLERK
 BANKRUPTCY COURT
 DISTRICT OF DELAWARE

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ Graceway Pharmaceuticals LLC



Handwritten signature/initials

Item List **Advanced Search**

SetID: AMRID Unit: Customer: 903575 Graceway Pharmaceuticals Inc*Level: N

Search

Advanced Search

*Status: Open Add A Conversation View/Update Conversations Account Overview Display Currency

Row Selection

Range:

Item Action

Select Action...

Item List **Customize | Find | View All | First 1-2 of**

Seg Nbr	Item	PO	Status	Line	Accounting Date	Activities Due	Days Late	Balance Amt	Item Orig Item	Dispute Collector	Cur	Unit	Terms
1	<input type="checkbox"/>	30015048	450000379	O	09/10/2011	1 10/10/2011	18	1935.00	1935.00		C10	USD	R1100 NET30 9r
2	<input type="checkbox"/>	30024870	450000379	O	10/10/2011	1 11/09/2011	-12	1870.50	1935.00		C10	USD	R1100 NET30 9r

Search Result Totals

Debits:	2	Debit Amount:		Currency:	USD
Credits:		Credit Amount:		Currency:	USD
Total:	2	Total Amount:		Currency:	USD
Selected:		Selected Amount:	\$ 3,805.50	Currency:	Selected

Item List | **Advanced Search**

Bankruptcy filed CH 11 9-29-11



Customer No	Invoice No	Invoice Date	Current Charges	Tax	Amount Due
903575	30015048	09/10/2011	1,800.00	135.00	1,935.00
					Amount Enclosed

BILL TO:
Sterling Commerce America, Inc

SHIP TO:

Graceway Pharmaceuticals Inc
April Ryder
340 Martin Luther King Jr Blvd Ste 400
Bristol, TN 37620-4082

Graceway Pharmaceuticals Inc
April Ryder
340 Martin Luther King Jr Blvd Ste 400
Bristol, TN 37620-4082

Detach & return this part with payment

Customer Number 903575	Invoice Number 30015048	Invoice Date 09/10/2011				Page 1 of 1
Billing Period	Terms	Purchase Order	Gross Charges	Discount	Tax	Total Amount
Aug-2011	NET 30	4500003793	1,800.00	0.00	135.00	1,935.00

INVOICE

Item Code	Item Description	Code	Quantity	Unit Price	Item Total	Total
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Charges below are for mailbox(es):
SJMWK

Sterling Collaboration Network

17009 MONTHLY MAILSLÖT FEE	1.00	0.0000	0.00	
17013 PUBLIC NETWORK INTERCONNECT	4.00	0.0000	0.00	
17066 STORAGE/REPORT SERVICE FEE	1.00	0.0000	0.00	
17149 MONTHLY MAILBOX FEE	1.00	0.0000	0.00	
17392 CHARACTERS SENT TO CUSTOMERS	151.91	0.0000	0.00	
17393 CHARACTERS SENT TO NON-CUST	757.49	0.0000	0.00	
17394 CHARACTERS RECD FROM CUSTOMERS	3,539.14	0.0000	0.00	
17395 CHARACTERS RECD FROM NON-CUST	10,320.98	0.0000	0.00	
60796 MONTHLY MINIMUM PROCESSING AMOUNT	1.00	1,800.0000	1,800.00	
				1,800.00

TAX 135.00
GRAND TOTAL 1,935.00

USD

REMIT TO: Sterling Commerce-73199 PO Box 73199 Chicago IL 60673

For Invoice Inquiries: Billing_Department@stercomm.com or (866)-616-7087

Invoice reprint generated on 10/28/2011



903575	30024870	10/10/2011	1,800.00	135.00	1,935.00
					Amount Enclosed

BILL TO:
Sterling Commerce America, Inc

SHIP TO:

Graceway Pharmaceuticals Inc
April Ryder
340 Martin Luther King Jr Blvd Ste 400
Bristol, TN 37620-4082

Graceway Pharmaceuticals Inc
April Ryder
340 Martin Luther King Jr Blvd Ste 400
Bristol, TN 37620-4082

Detach & return this part with payment

Customer Number 903575	Invoice Number 30024870	Invoice Date 10/10/2011	Page 1 of 1			
Billing Period Sep-2011	Terms NET 30	Purchase Order 4500003793	Gross Charges 1,800.00	Discount 0.00	Tax 135.00	Total Amount 1,935.00

INVOICE

Item Code	Item Description	Code	Quantity	Unit Price	Item Total	Rate
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Charges below are for mailbox(es):
SJMWK

Sterling Collaboration Network

17009 MONTHLY MAILSLLOT FEE	1.00	0.0000	0.00
17013 PUBLIC NETWORK INTERCONNECT	4.00	0.0000	0.00
17066 STORAGE/REPORT SERVICE FEE	1.00	0.0000	0.00
17149 MONTHLY MAILBOX FEE	1.00	0.0000	0.00
17392 CHARACTERS SENT TO CUSTOMERS	168.82	0.0000	0.00
17393 CHARACTERS SENT TO NON-CUST	764.06	0.0000	0.00
17394 CHARACTERS RECD FROM CUSTOMERS	3,481.78	0.0000	0.00
17395 CHARACTERS RECD FROM NON-CUST	10,046.72	0.0000	0.00
60796 MONTHLY MINIMUM PROCESSING AMOUNT	1.00	1,800.0000	1,800.00
			1,800.00

TAX
GRAND TOTAL

135.00
1,935.00
1,870.50

PRO-RATED \$ 1935.00 ÷ 30 days = \$ 64.50 per day x 29 days

REMIT TO: Sterling Commerce-73199 PO Box 73199 Chicago IL 60673

For Invoice Inquiries, Billing, Department@stercomm.com or (866) 616-7007
Invoice reprint generated on 10/28/2011

United States Bankruptcy Court
District of Delaware

Notice of Bankruptcy Case Filing

A bankruptcy case concerning the debtor(s) listed below was filed under Chapter 11 of the United States Bankruptcy Code, entered on 09/29/2011 at 07:41 AM and filed on 09/29/2011.

Graceway Pharmaceuticals, LLC

340 Martin Luther King Jr. Blvd.
Suite 500
Bristol, TN 37620
Tax ID / EIN: 14-1965385

aka

Duromine

aka

Norflex

aka

Aldara

aka

MetroGel Vaginal

aka

Atopiclair

aka

Minitran

aka

Zyclara

aka

Calcium Disodium Versenate

aka

Norgesic

aka

Theolair

aka

Estrasorb

aka

Benziq

aka

Norgesic Forte

aka

Tambocor

aka

Maxair



The case was filed by the debtor's attorney:

Michael R. Nestor
 Young Conaway Stargatt & Taylor
 The Brandywine Bldg.
 1000 West Street, 17th Floor
 PO Box 391
 Wilmington, DE 19899
 302-571-6600

The case was assigned case number 11-13036-PJW to Judge Peter J. Walsh.

In most instances, the filing of the bankruptcy case automatically stays certain collection and other actions against the debtor and the debtor's property. Under certain circumstances, the stay may be limited to 30 days or not exist at all, although the debtor can request the court to extend or impose a stay. If you attempt to collect a debt or take other action in violation of the Bankruptcy Code, you may be penalized. Consult a lawyer to determine your rights in this case.

If you would like to view the bankruptcy petition and other documents filed by the debtor, they are available at our *Internet* home page www.deb.uscourts.gov or at the Clerk's Office, 824 Market Street, 3rd Floor, Wilmington, DE 19801.

You may be a creditor of the debtor. If so, you will receive an additional notice from the court setting forth important deadlines.

David D. Bird
Clerk, U.S. Bankruptcy
Court

PACER Service Center			
Transaction Receipt			
10/28/2011 10:18:04			
PACER Login:	sc0715	Client Code:	
Description:	Notice of Filing	Search Criteria:	11-13036-PJW
Billable Pages:	1	Cost:	0.08