

UNITED STATES BANKRUPTCY COURT District of Delaware PROOF OF CLAIM

Name of Debtor: GRACEWAY PHARMACEUTICALS LLC, et al., Case Number: 11-13036 PJW

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: FISHER CLINICAL SERVICES
Name and address where notices should be sent: Fisher Scientific Co Attn Gary Barnes 300 Industry Dr Pittsburgh, PA 15275
Telephone number:
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Check this box to indicate that this claim amends a previously filed claim.
Court Claim Number:
Filed on:

Name and address where payment should be sent (if different from above):
Telephone number:
Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 3,785.00
If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.
If all or part of your claim is entitled to priority, complete item 5.
Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. Basis for Claim: Goods sold (See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor:
3a. Debtor may have scheduled account as: C17438 (See instruction #3a on reverse side.)

4. Secured Claim (Sec instruction #4 on reverse side.)
Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.
Nature of property or right of setoff: Real Estate Motor Vehicle Other
Describe:
Value of Property: \$ Annual Interest Rate %
Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ Basis for perfection:
Amount of Secured Claim: \$ Amount Unsecured: \$

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.
Specify the priority of the claim.
Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).
Wages, salaries, or commissions (up to \$11,725*) 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).
Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).
Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).
Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).
Other - Specify applicable paragraph of 11 U.S.C. §507 (a)().
Amount entitled to priority: \$
*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.
If the documents are not available, please explain:
Date: 11/3/11 Signature: Gary Barnes Credit Manager

FOR COURT-USE ONLY
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BANKRUPTCY COURT
DISTRICT OF DELAWARE
NOV 10 AM 8:59

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

Graceway Pharmaceuticals LLC
00043

BWR

C17438 GRACEWAY PHARMACEUTICALS, LLC										
Invoice #	Date	Due Date	Description	Protocol	PO #	Invoice Total	0 - 30 Days	31 - 60 Days	61-90 Days	> 90 Days
269660	8/17/11	9/16/11	20908	GW01-0701		\$ 50.00	\$ -	\$ -	\$ 50.00	\$ -
269661	8/17/11	9/16/11	21512	GW01-0702		\$ 170.00	\$ -	\$ -	\$ 170.00	\$ -
269662	8/17/11	9/16/11	21575	GW01-0801		\$ 130.00	\$ -	\$ -	\$ 130.00	\$ -
269663	8/17/11	9/16/11	21581	GW01-0805		\$ 130.00	\$ -	\$ -	\$ 130.00	\$ -
269664	8/17/11	9/16/11	21946	GW01-0705		\$ 255.00	\$ -	\$ -	\$ 255.00	\$ -
269665	8/17/11	9/16/11	22584	GW01-0706		\$ 65.00	\$ -	\$ -	\$ 65.00	\$ -
269666	8/17/11	9/16/11	24270	GW01-0702/GW01-0704		\$ 455.00	\$ -	\$ -	\$ 455.00	\$ -
269667	8/17/11	9/16/11	24363	GW01-0804		\$ 65.00	\$ -	\$ -	\$ 65.00	\$ -
269668	8/17/11	9/16/11	25786	GW01-0901		\$ 150.00	\$ -	\$ -	\$ 150.00	\$ -
269669	8/17/11	9/16/11	28440	GW05-0904		\$ 380.00	\$ -	\$ -	\$ 380.00	\$ -
271698	9/13/11	10/13/11	20908	GW01-0701		\$ 50.00	\$ -	\$ 50.00	\$ -	\$ -
271699	9/13/11	10/13/11	21512	GW01-0702		\$ 255.00	\$ -	\$ 255.00	\$ -	\$ -
271700	9/13/11	10/13/11	21575	GW01-0801		\$ 130.00	\$ -	\$ 130.00	\$ -	\$ -
271701	9/13/11	10/13/11	21581	GW01-0805		\$ 130.00	\$ -	\$ 130.00	\$ -	\$ -
271702	9/13/11	10/13/11	21946	GW01-0705		\$ 255.00	\$ -	\$ 255.00	\$ -	\$ -
271703	9/13/11	10/13/11	22584	GW01-0706		\$ 65.00	\$ -	\$ 65.00	\$ -	\$ -
271704	9/13/11	10/13/11	24270	GW01-0702/GW01-0704		\$ 455.00	\$ -	\$ 455.00	\$ -	\$ -
271705	9/13/11	10/13/11	24363	GW01-0804		\$ 65.00	\$ -	\$ 65.00	\$ -	\$ -
271706	9/13/11	10/13/11	25786	GW01-0901		\$ 150.00	\$ -	\$ 150.00	\$ -	\$ -
271707	9/13/11	10/13/11	28440	GW05-0904		\$ 380.00	\$ -	\$ 380.00	\$ -	\$ -
						\$ 3,785.00	\$ -	\$ 1,935.00	\$ 1,850.00	\$ -