

PROOF OF CLAIM



YOUR CLAIM IS SCHEDULED AS:
Schedule/Claim ID s85

Name of Debtor:
Gulf Packaging, Inc.

Case Number:
15-15249

Amount/Classification
\$211.72 Unsecured

NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property):
Laddawn, Inc.

Name and address where notices should be sent:
36759531001417
LADDAWN
155 JACKSON RD
DEVENS, MA 01434

The amounts reflected above constitute your claim as scheduled by the Debtor or pursuant to a filed claim. If you agree with the amounts set forth herein, and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below.

If the amounts shown above are listed as Contingent, Unliquidated or Disputed, a proof of claim must be filed.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

Creditor Telephone Number (978) 563 6223 email: sdunnbenson@laddawn.com

Name and address where payment should be sent (if different from above):

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.

Check this box to indicate that this claim amends a previously filed claim.

Court Claim Number (if known):

Payment Telephone Number () email:

Filed on: _____

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 211.72

If all or part of your claim is secured, 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)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 8497

3a. Debtor may have scheduled account as:
(See instruction #3a)

3b. Uniform Claim Identifier (optional):
(See instruction #3b)

4. SECURED CLAIM: (See instruction #4)

Check the appropriate box if your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information.

Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$ _____

Nature of property or right of setoff:
Describe:

Basis for Perfection: _____

Real Estate Motor Vehicle Other _____

Amount of Secured Claim: \$ _____

Value of Property: \$ _____

Amount Unsecured: \$ _____

Annual Interest Rate: _____ % Fixed or Variable
(when case was filed)

RECEIVED
JUL 29 2015
BMC GROUP

5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.

Amount entitled to priority: \$ _____

You MUST specify the priority of the claim:

- Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).
- Up to \$2,775* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(7).
- Wages, salaries, or commissions (up to \$12,475*), 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).

- Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).
- Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).

* Amounts are subject to adjustment on 4/01/16 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. (See instruction #6)

Gulf Packaging, Inc. POC



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7. DOCUMENTS: Attached are redacted copies of documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. (See instruction #7, and definition of "redacted").

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

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.

The original of this completed proof of claim form must be sent by mail or hand delivered (NEITHER FAXES NOR E-MAILS WILL BE ACCEPTED) so that it is actually received no later than 5:00 pm, prevailing Central Time on July 31, 2015 for all Entities other than Governmental Units OR no later than 5:00 pm, prevailing Central Time on October 26, 2015 for all Governmental Units.

BY MAIL TO:
BMC Group, Inc.
Attn: Gulf Packaging, Inc. Claims Processing
PO Box 90100
Los Angeles, CA 90009

BY MESSENGER OR OVERNIGHT DELIVERY TO:
BMC Group, Inc.
Attn: Gulf Packaging, Inc. Claims Processing
300 N. Continental Blvd., #570
El Segundo, CA 90245

8. SIGNATURE: (See instruction #8)

Check the appropriate box.

I am the creditor. I am the creditor's authorized agent. I am the trustee, or the debtor, or their authorized agent. I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Scott Dunn-Benson
Title: Controller
Company: Laddawn, Inc.


(Signature)

7/27/15
(Date)

Address and telephone number (if different from notice address above):

Telephone number: _____ email: _____

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.



155 Jackson Rd
Devens, MA 01434-5614

Phone: (800) 446-3639
Fax: (800) 253-5246
www.laddawn.com

ISO 9001 REGISTERED
EIN: 04-2590187

INVOICE NBR. 1191816

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|---|--|----------------------------------|-----------------------------|
| PAYMENT TERMS NET 30 | | DATE INVOICED 03/02/15 | |
| SHIPPING WHSE 04 | | DATE SHIPPED 03/02/15 | |
| CUSTOMER PURCHASE ORDER NO. 0005755 | | | |
| SALES REPRESENTATIVE EZRA KNIGHT | | | CODE 16 |
| SHIPPED VIA UPS. | | | FRT TERMS P&A |
| SALES ORDER NO. / MASTER ORDER NO. 1167647A / 1167647 | | | TAX TAX CODE X TE |

| | | | |
|----------------|---|----------------|---|
| SOLD TO | 01*8497 GULF PACKAGING 1040 MARYLAND AVE DOLTON IL 60419 USA | SHIP TO | 01*337753 GULF PACIFIC 14379 INDUSTRY CIRCLE LA MIRADA, CA 90638 USA |
|----------------|---|----------------|---|

| ITEM | PRODUCT/DESCRIPTION | UOM | QTY ORDERED | QTY SHIPPED | QTY B.O. | UNIT PRICE | TOTAL PRICE |
|------|--|-----|-------------|-------------|----------|------------|-------------|
| 002 | 3655A ZT 10X12X002 1000/CTN | CS | 4 | 4 | | 36.67 | 146.68 |
| Chg | FRGHT OUT CUSTOMER-FRT BOL:0005755 SHIP ON OR BEFORE 2/26/15 | | | | | | 65.04 |
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THANK YOU FOR YOUR ORDER

Weight: 76
Pieces: 2
Track#: 1ZOX404X0301081972
No price changes can be made on this invoice without authorization from our Credit Department

| | |
|---------------------|---------------|
| SUBTOTAL | 146.68 |
| WEB DISCOUNT | 0.00 |
| TAX | 0.00 |
| FREIGHT | 65.04 |
| OTHER | 0.00 |

TOTAL DUE 211.72



United States

Welcome, Caitlin Peloquin | Logout | Contact UPS | The UPS Store Sub

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Tracking Number

Track

View Tracking History

Other Tracking Options

Tracking Detail

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Print Help A A A

1Z0X404X0301081972

Add Description

Updated: 07/09/2015 1:56 P.M. Eastern Time

Delivered

Delivered On: Thursday, 03/05/2015 at 12:27 P.M.

Left At: Receiver

Signed By: ALEX



Proof of Delivery

Request Status Updates »

Report a Claim »

UPS Live Chat Launch Chat

Shipping Information To: 14379 INDUSTRY CIR LA MIRADA, CA, 90638, US

Shipped By UPS Ground

Shipment Progress

What's This?

| Location | Date | Local Time | Activity |
|-----------------------------|------------|------------|--------------------------------|
| Cerritos, CA, United States | 03/05/2015 | 12:27 P.M. | Delivered |
| United States | 03/02/2015 | 4:09 P.M. | Order Processed: Ready for UPS |

Pickup packages for FREE at The UPS Store and UPS Access Point locations. Sign up for UPS My Choice »

Additional Information

Reference Number(s): 1167647A-2 0005755 Shipped/Billed On: 03/02/2015 Type: Package Weight: 37.60 lbs

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- Contact UPS: Browse Online Support, E-mail UPS, Live Chat, Call Customer Service

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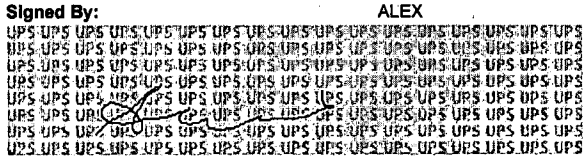
Proof of Delivery

[Close Window](#)

Dear Customer,

This notice serves as proof of delivery for the shipment listed below.

Tracking Number: 1Z0X404X0301081972
Reference Number(s): 1167647A-2, 0005755
Service: UPS Ground
Weight: 37.60 lbs
Shipped/Billed On: 03/02/2015
Delivered On: 03/05/2015 12:27 P.M.
Delivered To: 14379 INDUSTRY CIR
 LA MIRADA, CA, US 90638

Signed By: ALEX


Left At: Receiver

Thank you for giving us this opportunity to serve you.

Sincerely,

UPS

Tracking results provided by UPS: 07/09/2015 1:56 P.M. ET

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