UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE HMP Services Holding Sub III, LLC, et al. Claims Processing Center	PROOF OF CLAIM			
c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5082	Filed: USBC - District of Delaware			
New York, NY 10150-5082  Name of Debtor Against Which Claim is Held Case No. of Debtor	HMP Services Holding, Et Al.			
BIDE1-OF SULL HOLDING HOLDING PORT STANDARD SOLVES HOLDING SOME	\$(1.21.8( <b>1.0</b> ))	10-13618 (BLS) 000000018		
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 and address of Creditor: (and name and address where notices should be sent if		S FOR COURT USE ONLY		
different from Creditor)	Check this box to indicate that this claim amends a previously filed claim.			
HMP (CREDITOR.DBF,CREDNUM)CREDNUM # 1000000196****** GONZALES, ERIC				
9823 LAREDO DR COMMERCE CITY, CO 80022	Court Claim Number:			
	(If known)			
	Filed on:			
D 53 2500 7933				
Telephone number: 9677515 5188 Email Address: CON Name and address where payment should be sent (if different from above)				
Esic 7 Conscies	Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach			
Commerce City CO 50092	copy of statement giving particulars.			
Telephone number 109/519. Slovy Email Address: COL. COM	Check this box if you are the debtor or trustee in this case.			
		5. Amount of Claim Entitled to Priority		
1. Amount of Claim as of Date Case Filed: \$ \( \frac{1}{3} \) \( \frac{3}{3} \) If all or part of your claim is secured, complete Item 4 below; however, if all of your claim is secured.	ur claim is unsecured, do not	under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following		
complete item 4.  If all or part of your claim is entitled to priority, complete Item 5.	SSO2(L)(O) complete Itom 6	categories, check the box and state the amount.		
If all or part of your claim qualifies as an Administrative Expense under 11 U.S.C  Check this box if claim includes interest or other charges in addition to the p		Specify the priority of the claim:		
Attach itemized statement of interest or additional charges.		Domestic support obligations under 11		
2. Basis for Claim: 401 K Ret. Tement Account NE	ver cashed out	U.S.C. § $507(a)(1)(A)$ or $(a)(1)(B)$ .		
(See instruction #2 on reverse side.) TEM Em  3. Last four digits of any number by which creditor identifies debtor:	Sp. 1900	☐ Wages, salaries or commissions (up to \$11,725), earned within 180 days before filing		
3a. Debtor may have scheduled account as:		of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11		
(See instruction #3a on reverse side.)  4. Secured Claim (See instruction #4 on reverse side.)		U.S.C. § 507(a)(4).  Contributions to an employee benefit plan -		
Check the appropriate box if your claim is secured by a lien on property or a right	of setoff and provide the requested	11 U.S.C. § 507(a)(5).  Up to \$2,600 of deposits toward purchase,		
information.  Nature of property or right of setoff: ☐ Real Estate ☐ Motor Vehicle	☐ Other	lease, or rental of property or services for personal, family, or household use - 11 U.S.C.		
Describe:		§ 507(a)(7).		
Value of Property: \$ Annual Interest Rate Amount of arrearage and other charges as of time case filed included in secured cl	% aim. if any:	☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).		
\$ Basis for perfection:		☐ Other – Specify applicable paragraph of 11 U.S.C. § 507(a)( ).		
Substitution percentage.				
Amount of Secured Claim: \$ Amount Unsecured: \$	<u>Q</u>	Amount entitled to priority:		
6. Amount of Claim that qualifies as an Administrative Expense under 11 U.S.C (See instruction #6 on reverse side.)	C. §503(b)(9): \$	<u>\$</u>		
7. Credits: The amount of all payments on this claim has been credited for the purpo		FOR COURT USE ONLY		
8. Documents: Attach redacted copies of any documents that support the claim, such orders, invoices, itemized statements of running accounts, contracts, judgments, mortga	FILED / DECENTED			
may also attach a summary. Attach redacted copies of documents providing evidence of You may also attach a summary. (See instruction 8 and definition of "redacted" on rev	FILED / RECEIVED			
DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY	JAN - 3 2011			
SCANNING.  If the documents are not available, please explain:				
Date: Signature: The person filing this claim must sign it. Sign and print name	and title, if any, of the creditor or other	EPIQ BANKRUPTCY SOLUTIONS, LLC		
person authorized to file this claim and state address and telephone number above. Attach copy of power of automey, if any.	if different from the notice address	5525116N3, EEC		
Course Courses				
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or	imprisonment for up to 5 years, or bo	th. 18 U.S.C. §§ 152 and 3571.		

**PITMAN COMPANY HUMAN RESOURCES DEPT.** 721 UNION BOULEVARD TOTOWA, NJ 07512

# **Retirement Account Statement**

### Employee Stock Ownership And 401(k) Plan

Statement Period

07/01/2010 THRU 09/30/2010

**Participant** 

**ERIC GONZALES** 

Statement ID

PIT20751

001297

**ERIC GONZALES** 9823 LAREDO DR

PIT20751

COMMERCE CITY, CO 80022-9842

DO NOT SEND CORRESPONDENCE TO ADDRESS ABOVE. Please send all written correspondence to the mailing address on the last page of your statement.

#### Answers about your account

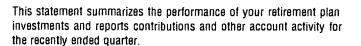
Tag Customer Service Line

800-234-3500

Customer Service Website www.lincoinalliance.com

## Summary of Your Account

Balance as of 07/01/2010	\$4 <b>,363.5</b> 5
Balance as of 09/30/2010	\$4,363.55
Change in Value	.00
▶ Vested Balance	\$1,745.424

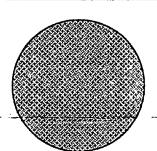


The portfolio interest rate for the Lincoln Stable Value Account for 10/1/10 - 12/31/10 is 3.00%.

More information on the backside of this statement.

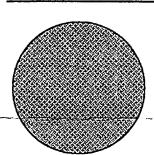
## **Your Fund Allocation Profile**

#### **Existing Balance Allocation**



2 100% PITMAN STOCK

#### Current Investment Election



3 100% PITMAN STOCK





PITMAN COMPANY HUMAN RESOURCES DEPT. 721 UNION BOULEVARD TOTOWA, NJ 07512

## **Retirement Account Statement**

Employee Stock Ownership And 401(k) Plan

Statement Period

07/01/2010 THRU 09/30/2010

Participant Statement ID ERIC GONZALES
PIT20751

# **Personalized Rate of Return**

Plan Statement Period
EMPLOYEE STOCK OWNER .00 %

\*\* See the About Your Statement section for an explanation of the PRR.

**Account Activity** 

		Opening				- Closing
Account	Vested %	Balance	Contributions	Gain/Loss	Withdrawals	Dalonce
ESOP	40%	4,363.56	.00	.00	.00	4,363.56
Account Activit	ty Totals	4,363.56	.00	.00	.00	4,363.56

▶ Your Vested Balance 1,745.42

**Investment Fund Activity** 

Fund	Fund %	Opening Balance	Contributions	Gain/Loss_	Withdrawals	Loans	Transfers	Closing Balance
PITMAN STOCK	100%	4,363.56	.00	.00	.00	.00	.00	4,363.56
Fund Activity Totals	100%	4,363.56	.00	.00	.00	.00	.00	4,363.56

**Shares / Units Activity** 

Fund	Opening	Shares/Units	Shares/Units	Shares/Units	Closing	Closing
	Balance	Purchased	Sold/Delivered	Balance	Price	Balance
PITMAN STOCK	146.232000	.000000	.000000	146.232000	\$29.840000	\$4,363.56



CONTENES CASO

DENVER CO SO

HMP resuices Holding

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