

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE
HMP Services Holding Sub III, LLC, et al. Claims Processing Center
c/o Epiq Bankruptcy Solutions, LLC
FDR Station, P.O. Box 5082
New York, NY 10150-5082

PROOF OF CLAIM

Name of Debtor Against Which Claim is Held

HMP Services
Holding-Sub III LLC

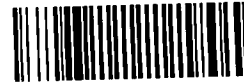
Case No. of Debtor

10-13618

Filed: USBC - District of Delaware
HMP Services Holding, Et Al.
10-13618 (BLS)

0000000122

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.



JLY

Name and address of Creditor: (and name and address where notices should be sent if different from Creditor)

HMP (CREDITOR.DBF,CREDNUM)CREDNUM # 100000329*****
MURRAY, BRYAN
154 GREENFIELD DR.
BLOOMINGDALE, IL 60108

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

Court Claim
Number:

(If known)

Filed on:

630.205.2898

Vumalecheer44@yahoo.com

Telephone number:

Email Address:

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

☐ 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.

Telephone number:

Email Address:

1. Amount of Claim as of Date Case Filed: \$ 870-
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.

If all or part of your claim qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9), complete Item 6.

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of interest or additional charges.

2. Basis for Claim: ESOP Pitman Co Stock
(See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: 7040

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

4. Secured Claim (See 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: \$ _____

6. Amount of Claim that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____
(See instruction #6 on reverse side.)

7. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

8. 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 8 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:

2/10/11

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

[Signature]

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:

\$ 870-

FOR COURT USE ONLY

FILED / RECEIVED

FEB 11 2011

EPIQ BANKRUPTCY
SOLUTIONS, LLC

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.

Very Urgent

This envelope is for use with the following services:

**UPS Next Day Air®
UPS Worldwide Express™
UPS 2nd Day Air®**

or call **1-800-PICK-UPS®** (1-800-742-5877)
to schedule a pickup or find a drop off location near you.

Shipments

For the Letter rate, UPS Express Envelopes are suitable for documents, urgent documents, and/or parcels weighing less than 8 oz. or less. UPS Express Envelopes are not suitable for parcels weighing more than 8 oz. will

International Shipments

Express Envelope may be used only in certain countries. Consider electronic import/export to verify if your shipment is eligible for international shipping.

For the Letter rate, the UPS Express Envelope is suitable for documents, urgent documents, and/or parcels weighing less than 8 oz. or less.

Express Envelopes are not recommended for sensitive personal information or business documents.

630-351-7045
PITMAN, COMPANY, IL
221 COVINGTON DRIVE
BLOOMINGDALE IL 60108

LTR 1 OF 1

SHIP TO:
HMP SERVICES HOLDING SUB III
757 THIRD AVENUE 3RD FLOOR
C/O EPIQ BANKRUPTCY SOLUTIONS LLC
NEW YORK NY 10017

NY 100 7-02

UPS NEXT DAY AIR **1**
TRACKING #: 1Z A86 62F 01 1143 1495

FILED / RECEIVED
FEB 11 2011

BILLING: P/P

010195101 1/10 PAC United Parcel Service, Louisville, KY

Apply shipping documents on this side.

Do not use this envelope for:

**UPS Ground
UPS Standard
UPS 3 Day Select®
UPS Worldwide Expedited®**

HMP Services Holding Sub III, LLC, et al. Claims Processing Center
c/o EPIQ Bankruptcy Solutions, LLC
757 Third Avenue, 3rd Floor
New York, NY 10017

Notice — Carriage hereunder may be subject to the rules relating to liability and other terms and/or conditions established by the Convention for the Unification of Certain Rules Relating to International Carriage by Air (the "Warsaw Convention") and/or the Convention on the International Carriage of Goods by Road (the "CMR Convention"). These commodities, technology or software were exported from the U.S. in accordance with the Export Administration Regulations. Diversion contrary to U.S. law prohibited.

010195101 1/10 PAC United Parcel Service, Louisville, KY