

B 10 (Official Form 10) (4/10)

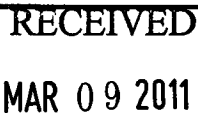
UNITED STATES BANKRUPTCY COURT FOR THE CENTRAL DISTRICT OF CALIFORNIA **PROOF OF CLAIM**

Name of Debtor: **Harrington West Financial Group, Inc.** Case Number: **10-14677-RR**

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): **Wells Fargo Bank, National Association, as guarantee trustee**

Name and address where notices should be sent:
Eric A. Schaffer, Esq.
Reed Smith LLP
225 Fifth Avenue, Suite 1200
Pittsburgh, PA 15222
 Telephone: (412) 288-3131



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

Court Claim Number: _____
(If known)

Filed on: _____

Name and address where payment should be sent (if different from above):
James R. Lewis
Wells Fargo Bank, National Association
45 Broadway - 17th Floor
New York, NY 10006



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: Contingent
 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.

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 \$1,725*) 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).
 Contribution 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)(____).

2. Basis for Claim: See Attached Addendum
(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: _____
(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: \$ _____

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. (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: 12/21/10

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.

JAMES R. LEWIS
VICE PRESIDENT

Harrington West

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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.

**ADDENDUM TO PROOF OF CLAIM OF
WELLS FARGO BANK, NATIONAL ASSOCIATION**

CLAIMANT

1. Wells Fargo Bank, National Association ("Wells Fargo" or the "Guarantee Trustee") is the claimant in its capacity as guarantee trustee.
2. Wells Fargo has offices at 45 Broadway – 17th Floor, New York, New York 10006 (Attn: James R. Lewis).
3. Wells Fargo is authorized to file this proof of claim (the "Claim") pursuant to the Guarantee (as defined below).
4. James R. Lewis is authorized to make this Claim on behalf of Wells Fargo.

BASIS FOR CLAIM

5. Wells Fargo is the institutional trustee and Wells Fargo Delaware Trust Company is the Delaware trustee (together, the "Trustees") under an Amended and Restated Declaration of Trust (the "Declaration"), dated as of September 27, 2004, among Harrington West Financial Group, Inc. (the "Debtor"), as sponsor, the Trustees, William H. Phillips, Jr. and Kerry Steele, as administrators, and the holders of the Certificates of Capital Securities and Common Securities (together, the "Securities") of the Harrington West Capital Trust II (the "Trust"), pursuant to which the Securities were issued by the Trust.
6. Wells Fargo is also the guarantee trustee under the Guarantee Agreement (the "Guarantee"), dated as of September 27, 2004, executed and delivered by the Debtor in favor of the Guarantee Trustee for the benefit of the holders (the "Holders") of the Capital Securities, pursuant to which the Debtor irrevocably and unconditionally guaranteed certain obligations of the Trust as and when due.

7. As guarantee trustee, Wells Fargo is the agent and attorney-in-fact of the Holders for the purpose of filing any claims relating to the Guarantee. Except as set forth below, Wells Fargo holds no claims in its individual capacity. The Guarantee Trustee asserts claims on behalf of the Holders pursuant to the Guarantee.

AMOUNT OF CLAIM

8. The nature and amount of the claims of the Holders and the Guarantee Trustee are contingent.

NATURE OF CLAIM

9. The Claim is unsecured.

SUPPORTING DOCUMENTS

10. The Claim is supported by the Guarantee and the Declaration, which are attached hereto as **Exhibit A** and **Exhibit B**, respectively.

RESERVATION OF RIGHTS

11. The Guarantee Trustee reserves the right to amend, modify, and/or supplement its Proof of Claim and Addendum to Proof of Claim as it deems appropriate. Nothing in this Proof of Claim or Addendum to Proof of Claim shall be deemed a waiver of any rights or remedies that the Guarantee Trustee may have under the Guarantee and/or in connection with this bankruptcy case. All such rights and remedies are expressly reserved.

Central District Of California Claims Register

9:10-bk-14677-RR Harrington West Financial Group, Inc.

Judge: Robin Riblet **Chapter:** 11

Office: Santa Barbara **Last Date to file claims:** 01/20/2011

Trustee: **Last Date to file (Govt):** 03/09/2011

<i>Creditor:</i> (28221193) ERIC A SCHAFFER ESQ REED SMITH LLP 225 FIFTH AVE SUITE 1200 PITTSBURGH PA 15222	Claim No: 7 <i>Original Filed</i> Date: 12/23/2010 <i>Original Entered</i> Date: 12/23/2010	<i>Status:</i> Filed by: CR Entered by: Ortiz, Amber Modified:
Total claimed:		
<i>History:</i>		
Details <u>7-1</u> 12/23/2010 Claim #7 filed by ERIC A SCHAFFER ESQ, total amount claimed: \$0 (Ortiz, Amber)		
<i>Description:</i>		
<i>Remarks:</i>		

Claims Register Summary

Case Name: Harrington West Financial Group, Inc.

Case Number: 9:10-bk-14677-RR

Chapter: 11

Date Filed: 09/10/2010

Total Number Of Claims: 1

	Total Amount Claimed	Total Amount Allowed
Unsecured		
Secured		
Priority		
Unknown		
Administrative		
Total	\$0.00	\$0.00