


UNITED STATES BANKRUPTCY COURT District of Delaware		PROOF OF CLAIM
Name of Debtor: REGEN BIOLOGICS, INC.		Case Number: 11-11083
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): DELAWARE SECRETARY OF STATE, DIVISION OF CORPORATIONS		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.
Name and address where notices should be sent: DELAWARE DIVISION OF CORPORATIONS 401 FEDERAL STREET, STE 4, DOVER DE 19901		Court Claim Number: _____ (If known)
Telephone number: (302) 857-3439		Filed on: _____
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> 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.
Telephone number:		<input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
1. Amount of Claim as of Date Case Filed: \$ <u>226,800.18</u>		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.
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. <input type="checkbox"/> 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: <u>TAXES</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: <u>6574</u> 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: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> 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: \$ _____		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) 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). <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5). <input type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. §507 (a)(7). <input checked="" type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8). <input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. §507 (a)(____).
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		Amount entitled to priority: \$ <u>226,800.18</u>
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:		*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
Date: 09/30/2011	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. AMI JUDD, CORPORATE SPECIALIST <i>Ami Judd</i>	FOR COURT USE ONLY Regen Biologics  00062

520 Payment Maintenance REGEN BIOLOGICS, INC.
 Chapter 11 09-30-11 12:44
 Screen: ___ Corp: 2136574 Pay Seq: 054 Year: 2011 Req: 111028063

Check Number: _____ Returned Check: _____ Deposit Date: 09-30-2011
 Subcode: BP Pre-Petition Effective Date: 04-08-2011
 Amount: 226,800.18 Batch/Seq: _____
 Purpose/Year: M 2010 Miscellaneous Unapplied: _____
 Changed: 09-30-2011 by SDOCALJ Amt Transferred: _____

Reference: _____
 Comment: pre-petition = 226,800.18

A P P L I C A T I O N O F P A Y M E N T

Seq	Year	Chg Date	Subcode	Description	Amount	Flag
01	2010	12-01-2010	FT3	Franchise Tax, 3rd Qtr	1,998.15	
02	2010	03-04-2011	FT	Franchise Tax	170,760.00	
03	2010	03-04-2011	FTP	Penalty	125.00	
04	2010	04-06-2011	FTI	Interest	5,588.26	
05	2011	06-01-2011	FT1	Franchise Tax, 1st Qtr	48,328.77	
06						
07						
08						
09						
10						



DIVISION OF CORPORATIONS
P.O. BOX 898
DOVER, DELAWARE 19903

STATE OF DELAWARE
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
401 FEDERAL STREET, SUITE 4
DOVER, DELAWARE 19901

GENERAL INFORMATION
www.CORP.DELAWARE.GOV
(302) 739-3073

DEPARTMENT OF STATE
PROOF OF CLAIM FOR STATE OF DELAWARE TAXES

IN THE U.S. BANKRUPTCY COURT
DISTRICT OF DELAWARE

DOCKET NO. 11/11083 (PJW)
CLAIM FOR THE STATE OF DELAWARE FOR STATE TAXES

Identification No. 2136574

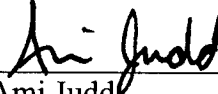
1. REGEN BIOLOGICS, INC. is justly and truly indebted to the State of Delaware in the sum of \$226,800.18 thereon as hereinafter stated.
2. The said debt is for taxes due under Title 8 Delaware Code as follows:

Kind of Tax	Period	Amount Due
2010		
Franchise Tax		\$172,758.15
Penalty		\$125.00
Interest		\$5,588.26
2011		
Franchise Tax		\$48,328.77

3. No part of said debt has been paid and it is now due and payable at the office of Department of State, Dover, Delaware.

4. There are no set offs or counter claims to said debt:
5. Except for the statutory liens which arose as stated above, the Dept. of State does not hold to the Deponent knowledge or belief and security or securities, not or other negotiable instrument for said debt; and
6. SAID DEBT HAS PRIORITY AND MUST BE PAID IN FULL IN ADVANCE OF DISTRIBUTION TO CREDITORS TO THE EXTENT PROVIDED BY LAW.

SIGNATURE


Ami Judd

9/30/11

Corporate Specialist

Office of the Clerk
United States Bankruptcy Court