

United States Bankruptcy Court  
*For The* District of *Delaware*

PROOF OF CLAIM

In re (Name of Debtor)  
*We The People USA, INC.*

Case Number  
*10-10503-KJC*

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" of payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor  
*American Arbitration Association*  
(The person or entity to whom the debtor owes money or property)  
Name and Addresses Where Notices Should be Sent  
*American Arbitration Association*  
*1633 Broadway, 19th Floor*  
*New York, NY 10019*  
Telephone No. *212-716-5800*

- 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 box if you have never received any notices from the bankruptcy court in this case.
- Check box if the address differs from the address on the envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:  
*14-114-00676-09-01*

Check here if this claim:  replaces a previously filed claim, dated: \_\_\_\_\_  
 amends

1. BASIS FOR CLAIM:

- Goods sold
- Services performed
- Money loaned
- Personal injury/wrongful death
- Taxes
- Other (Describe briefly)

RECEIVED  
APR 01 2010  
BMC GROUP

- Retiree benefits as defined in 11 U.S.C. § 1114(a)
- Wages, salaries, and compensations (Fill out below)  
Your social security number \_\_\_\_\_  
Unpaid compensations for services performed  
from \_\_\_\_\_ (date) to \_\_\_\_\_ (date)

2. DATE DEBT WAS INCURRED:  
*12/29/09*

3. IF COURT JUDGMENT, DATE OBTAINED:

4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM.

SECURED CLAIM \$ \_\_\_\_\_  
Attach evidence of perfection of security interest  
Brief Description of Collateral:  
 Real Estate  Motor Vehicle  Other (Describe briefly)  
Amount of arrearage and other charges included in secured claim above, if any \$ \_\_\_\_\_  
 UNSECURED NONPRIORITY CLAIM \$ *30,987.50*  
A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.

UNSECURED PRIORITY CLAIM \$ \_\_\_\_\_  
Specify the priority of the claim.  
 Wages, salaries, or commissions (up to \$2000), earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier—11 U.S.C. § 507(a)(3)  
 Contributions to an employee benefit plan—U.S.C. § 507(a)(4)  
 Up to \$900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use—11 U.S.C. § 507(a)(6)  
 Taxes or penalties of governmental units—11 U.S.C. § 507(a)(7)  
 Other—11 U.S.C. §§ 507(a)(2), (a)(5)—(Describe briefly)

5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED: \$ *30,987.50* (Unsecured) \$ \_\_\_\_\_ (Secured) \$ \_\_\_\_\_ (Priority)

\$ *30,987.50* (Total)

Check this box if claim includes prepetition charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.  
 SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach We the People

8. TIME-STAMPED COPY: To receive an acknowledgement of the filing of your claim envelope and copy of this proof of claim.

Date  
*3/22/10*

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)  
*Felix Edem*  
**FELIX EDEM (Collection Adm.)**



THIS SPACE IS FOR COURT USE ONLY  
U.S. BANKRUPTCY COURT  
DISTRICT OF DELAWARE  
CLERK  
19 MAR 30 AM 10:27



**American Arbitration Association**  
*Dispute Resolution Services Worldwide*

1633 Broadway  
 10th Floor  
 New York, NY 10019

#1

STMT DATE	AMOUNT DUE
03/22/2010	30987.50
CASE#	
14-114-00676-09 01 JAAN-R	

Payment Due Upon Receipt

**INVOICE/STATEMENT**

Leonard H. MacPhee Esq.  
 Perkins Coie LLP  
 1899 Wynkoop Street, Ste. 700  
 Denver CO 80202

Representing We The People LLC  
 Re: Arkady Portnoy

Please Detach and Return with Payment to the Above Address

Please Indicate Case No. on check



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 10th Floor  
 New York, NY 10019

**NAME** Leonard H. MacPhee Esq.  
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 Denver CO 80202

Representing We The People LLC  
 Re: Arkady Portnoy

STMT DATE	CASE#	PREVIOUS BALANCE	CURRENT CREDITS	NEW CHARGES	TOTAL BALANCE DUE
03/22/2010	14-114-00676-09 01 JAAN-R	0.00	2750.00-	33737.50	30987.50

DATE	REF#	DESCRIPTION	AMOUNT	CREDITS	BALANCE
04/22/2009	9788201	Initial Administrative Fee	2750.00		
04/24/2009	48588	Payment recvd from : WE THE PEOPLE LLC		2000.00 -	
06/24/2009	48658	Payment recvd from : WE THE PEOPLE LLC		750.00 -	
11/19/2009	9885668	Your Share of the Neutral Compensation Deposit covering 1 hour of Preliminary Matters	112.50		112.50
11/19/2009	9885672	Your Share of the Neutral Compensation Deposit covering 1 hour of Preliminary Matters	225.00		225.00
12/21/2009	9898876	Case Service Fee	1250.00		1250.00
12/29/2009	9901484	Your Share of the Neutral Compensation Deposit covering 5 days of Hearing for Arbitrator Mondoil	3750.00		3750.00
12/29/2009	9901489	Your Share of the Neutral Compensation Deposit covering 56 hours of Study for Arbitrator Mondoil	6300.00		6300.00
12/29/2009	9901493	Your Share of the Neutral Compensation Deposit covering 5 days of Hearing for Arbitrator Green	6750.00		6750.00
12/29/2009	9901496	Your Share of the Neutral Compensation Deposit covering 56 hours of Study for Arbitrator Green	12600.00		12600.00

**Remarks:** For any inquiry please call: 401-431-4716  
 This is a full statement showing all financial activity on this case.

<b>TOTAL BALANCE DUE</b>	30987.50
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Please Indicate Case No. on check

INVOICE SUMMARY:	NET BILLED	NET PAID	NET DUE
INITIAL/COUNTER-CLAIM FEES	4000.00	2750.00	1250.00
HEARING/POSTPONEMENT/ROOM/PROCESSING FEES	0.00	0.00	0.00
REALLOCATION AT CASE END FEES	0.00	0.00	0.00
NEUTRAL COMPENSATION/EXPENSES	29737.50	0.00	29737.50

EIN: 13-0429745



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 10th Floor  
 New York, NY 10019

#2

STMT DATE	AMOUNT DUE
03/22/2010	30987.50
CASE#	
14-114-00676-09 01 JAAN-R	

Payment Due Upon Receipt

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Representing We The People LLC  
 Re: Arkady Portnoy

STMT DATE	CASE#	PREVIOUS BALANCE	CURRENT CREDITS	NEW CHARGES	TOTAL BALANCE DUE
03/22/2010	14-114-00676-09 01 JAAN-R	0.00	2750.00-	33737.50	30987.50

DATE	REF#	DESCRIPTION	AMOUNT	CREDITS	BALANCE
					12600.00

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REALLOCATION AT CASE END FEES	0.00	0.00	0.00
NEUTRAL COMPENSATION/EXPENSES	29737.50	0.00	29737.50

EIN: 13-0429745