

UNITED STATES BANKRUPTCY COURT

District of Delaware

PROOF OF CLAIM

Name of Debtor: WE THE PEOPLE USA, INC. ET AL.

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 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): HILARY B. MILLER, ESQ.

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

Name and address where notices should be sent:

RECEIVED

APR 09 2010

BMC GROUP

Court Claim Number: (If known)

Filed on:

500 W PUTNAM AVE STE 400 GREENWICH, CT 06830-6096

Telephone number: (203) 399-1320

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:

1. Amount of Claim as of Date Case Filed: \$ 417.56

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.

2. Basis for Claim: LEGAL SERVICES (See instruction #2 on reverse side.)

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

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.)

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).

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: \$

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

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).

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:

\$

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. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See 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: 4/5/10

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.

Hilary B Miller

FOR COURT USE ONLY

We the People



00018

HILARY B. MILLER
ATTORNEY AT LAW

MEMBER OF NEW YORK,
CONNECTICUT AND
DISTRICT OF COLUMBIA BARS

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GREENWICH, CT 06830-6096
(203) 399-1320
FACSIMILE: (914) 206-3727
HILARY@MILLER.NET

January 31, 2010

We The People USA, Inc.
1436 Lancaster Avenue - Suite 300
Berwyn, PA 19312-1288
Attention: Ms. Florence Ferrante - Legal Department

Invoice

Re: General representation

Invoice No. 5042

Professional Services:

	<u>Hours</u>	<u>Amount</u>
01/06/10 Review docket notice re Pennisi and order copy	0.25	108.75
01/08/10 Review decision re Pennisi and forward to Mark Prior, Esq.	0.08	36.25
Total professional services	0.33	\$145.00

Disbursements :

01/03/10 Lexis	126.33
01/06/10 Online services	19.90
SUBTOTAL: none	[146.23]

Trademark matters

01/29/10 Lexis	126.33
SUBTOTAL: Trademark matters	[126.33]

Total disbursements \$272.56

Total amount of this bill \$417.56

Previous balance \$1,334.15

	<u>Amount</u>
1/13/2010 Payment - thank you	(\$1,334.15)
Total payments and adjustments	(\$1,334.15)
Balance due	<u>\$417.56</u>

Balance of \$417.56 is due on presentation in U.S. funds. Kindly remit immediately.

Federal Tax Identification Number: 06-1311993.

Thank you for your business. I appreciate this opportunity to be of service to you.