Fill in this information to identify the case:

Debtor 1 YOGAWORKS, INC., a Delaware C-Corporation

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: District of Delaware, Wilmington Division

Case number 1:20-bk-12599

E-Filed on 02/08/2021
Claim # 361

Official Form 410
Proof of Claim

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) **that you received.**

Part 1: Identify the Claim

1. Who is the current creditor?

Oracle America, Inc. ("Oracle")
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

☑ No
☐ Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent?** (if different)
Shawn M. Christianson, Esq. (Name)	(Name)
Buchalter, a Professional Corporation 55 2nd St (Number Street)	(Number Street)
San Francisco CA 94105 (City State ZIP Code)	(City State ZIP Code)
Contact phone (415) 227-0900	Contact phone _____
Contact email schristianson@buchalter.com	Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

_ _

4. Does this claim amend one already filed?

☑ No
☐ Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☑ No
☐ Yes. Who made the earlier filing? _____

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. **Do you have any number you use to identify the debtor?**

☑ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ____ ____ ____ ____

7. **How much is the claim?**

$ 160,987.32 . **Does this amount include interest or other charges?**

☑ No
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. **What is the basis of the claim?**

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.

Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).

Limit disclosing information that is entitled to privacy, such as health care information.

Cloud Service Agmt.

9. **Is all or part of the claim secured?**

☑ No
☐ Yes. The claim is secured by a lien on property.

Nature of property:

☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim.*
☐ Motor vehicle
☐ Other. Describe: _____

Basis for perfection: _____

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: $_____

Amount of the claim that is secured: $_____

Amount of the claim that is unsecured: $_____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: $_____

Annual Interest Rate (when case was filed)_____%

☐ Fixed
☐ Variable

10. **Is this claim based on a lease?**

☑ No
☐ Yes. **Amount necessary to cure any default as of the date of the petition.** $ 0.00

11. **Is this claim subject to a right of setoff?**

☑ No
☐ Yes. Identify the property: _____

12. **Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☑ No

☐ Yes. *Check one:*

	Amount entitled to priority
☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	$ 0.00
☐ Up to $3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	$ 0.00
☐ Wages, salaries, or commissions (up to $13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	$ 0.00
☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	$ 0.00
☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	$ 0.00
☐ Other. Specify subsection of 11 U.S.C. § 507(a)(__) that applies.	$ 0.00

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☑ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/08/2021
MM / DD / YYYY

Shawn M. Christianson
Signature

Print the name of the person who is completing and signing this claim:

Name: Shawn M. Christianson
First name | Middle name | Last name

Title: Counsel to Oracle

Company: Buchalter PC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: _____
Number | Street

_____
City | State | ZIP Code

Contact phone _____ Email _____

Attachment 1 - YogaWorks-Oracle RD Claim.pdf
Description -

Fill in this information to identify the case:

Debtor 1 YogaWorks, Inc.

Debtor 2 (Spouse, if filing) _____

United States Bankruptcy Court for the: District of Delaware

Case number 20-12599 (KBO)

Official Form 410

Proof of Claim

04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached 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. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) **that you received.**

Part 1: Identify the Claim

1. Who is the current creditor?

Oracle America, Inc. ("Oracle")
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor _____

2. Has this claim been acquired from someone else?

☒ No
☐ Yes. From whom? _____

3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Where should notices to the creditor be sent?	**Where should payments to the creditor be sent?** (if different)
Shawn M. Christianson, Esq. Buchalter, a Professional Corporation Name	Name
55 Second Street, 17th Floor Number Street	Number Street
San Francisco CA 94105 City State ZIP Code	City State ZIP Code
Contact phone 415-227-0900	Contact phone _____
Contact email schristianson@buchalter.com	Contact email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

_____

4. Does this claim amend one already filed?

☒ No
☐ Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No
☐ Yes. Who made the earlier filing? _____

American LegalNet, Inc.
www.FormsWorkFlow.com

Part 2: **Give Information About the Claim as of the Date the Case Was Filed**

6. **Do you have any number you use to identify the debtor?**
   ☒ No
   ☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____

7. **How much is the claim?** 160,987.32 (rejection damages). **Does this amount include interest or other charges?**
   ☒ No
   ☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. **What is the basis of the claim?**
   Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
   Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).
   Limit disclosing information that is entitled to privacy, such as health care information.

   Oracle Cloud Service Agreement and related ordering documents

9. **Is all or part of the claim secured?**
   ☒ No
   ☐ Yes. The claim is secured by a lien on property.

   Nature of property:
   ☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim.*
   ☐ Motor vehicle
   ☐ Other. Describe: _____

   Basis for perfection: _____
   Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

   Value of property: $ _____
   Amount of the claim that is secured: $ _____
   Amount of the claim that is unsecured: $ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.)

   Amount necessary to cure any default as of the date of the petition: $ _____

   Annual Interest Rate (when case was filed) _____ %
   ☐ Fixed
   ☐ Variable

10. **Is this claim based on a lease?**
    ☒ No
    ☐ Yes. **Amount necessary to cure any default as of the date of the petition.** $ _____

11. **Is this claim subject to a right of setoff?**
    ☒ No
    ☐ Yes. Identify the property: _____

American LegalNet, Inc.
www.FormsWorkFlow.com

12. **Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. *Check one:*

	Amount entitled to priority
☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	$
☐ Up to $3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	$
☐ Wages, salaries, or commissions (up to $13,650*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	$
☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	$
☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	$
☐ Other. Specify subsection of 11 U.S.C. § 507(a)(_____) that applies.	$

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to $500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.
☒ I am the creditor's attorney or authorized agent.
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/08/2021
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name: Shawn M. Christianson, Esq.
First name | Middle name | Last name

Title: Counsel to Oracle

Company: Buchalter, a Professional Corporation
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 55 Second Street, 17th Floor
Number | Street

San Francisco | CA | 94105
City | State | ZIP Code

Contact phone _____ Email _____

American LegalNet, Inc.
www.FormsWorkFlow.com

Attachment to Rejection Damages Proof of Claim
Oracle America, Inc.

YogaWorks, Inc. ("Debtor")
Case No. 20-12599 (KBO)

Oracle America, Inc. ("Oracle"), hereby files a rejection damages claim ("Claim"), stating:

On January 6, 2021, the Debtor filed its *Notice of Rejection of Certain Executory Contracts* [Dkt. No. 258] ('Rejection Notice").

Pursuant to the Rejection Notice, a proof of claim arising from the rejection must be submitted on or before the later of (i) the claims bar date established in these chapter 11 cases (i.e., 2/10/21); and (b) 35 days after the date of the Rejection Notice (i.e., 2/10/21).

The Rejection Notice identified the following Oracle agreement for rejection ("Rejected Agreement"), with the rejection's effective date being December 28, 2020:

Title/Description of Executory Contract	Counterparty
ERP Accounting System	Oracle America, Inc. (Fusion)

Attached hereto as Exhibit "A" is a copy of the outstanding invoices ("Invoices"), included in the summary below. In addition to the Invoices, Oracle is owed additional sums which represent the remaining amounts due under the Rejected Agreement. These sums also are identified below as "Future Invoices":

Invoice Number	Invoice Date	Invoice Due	Invoice Amount
8448988	3/14/2020	6/13/2020	12,383.64
8491993	6/14/2020	9/13/2020	12,383.64
8531481	9/14/2020	12/13/2020	12,383.64
8570622	12/14/2020	3/13/2021	12,383.64
Future Invoice	3/14/2021	6/13/2021	12,383.64
Future Invoice	6/14/2021	9/13/2021	12,383.64
Future Invoice	9/14/2021	12/13/2021	12,383.64

Future Invoice	12/14/2021	3/13/2022	12383.64
Future Invoice	3/14/2022	6/13/2022	12,383.64
Future Invoice	6/14/2022	9/13/2022	12,383.64
Future Invoice	9/14/2022	12/13/2022	12,383.64
Future Invoice	12/14/2022	3/13/2023	12,383.64
Future Invoice	3/14/2023	6/13/2023	12,383.64
		Total	**160,987.32**

EXHIBIT A

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8491993
INVOICE DATE	14-Jun-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	14-Jul-2020
CUSTOMER REF	

BILL TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

PAYMENT INSTRUCTIONS:

REFERENCE 8491993 **ON YOUR REMITTANCE**

MAIL CHECKS TO: Oracle America, Inc.
PO BOX 44471
SAN FRANCISCO CA 94144

WIRE TRANSFERS TO: WELLS FARGO BANK
ABA 121000248
ACCT 4522-020841

SHIP TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

FOR BILLING QUESTIONS, CALL: (888) 803-7414 OR EMAIL: COLLECTIONS_US@ORACLE.COM

ORACLE SALESPERSON	ORACLE ORDER NUMBER	CUSTOMER CONTACT	END USER
Dugheanu, Miss Irina Simona	10447073	Michael Roberts	

ITEM NO.	DESCRIPTION	QTY/ NO. OF USERS	TAX	EXTENDED AMOUNT
1	B73947 : Oracle Fusion Automated Invoice Processing Cloud Service - Hosted 1K Records : 14-Jun-2020 - 13-Sep-2020 Quantity : 10 Order: 9175044	1	N	439.92
2	B69711 : Oracle Fusion Financials Cloud Service - Hosted Named User : 14-Jun-2020 - 13-Sep-2020 Quantity : 10 Order: 9175044	1	N	6,598.80
3	B69717 : Oracle Fusion Purchasing Cloud Service - Hosted Named User : 14-Jun-2020 - 13-Sep-2020 Quantity : 10 Order: 9175044	1	N	4,200.00
4	B69713 : Oracle Fusion Expenses Cloud Service - Hosted Expense Report : 14-Jun-2020 - 13-Sep-2020 Quantity : 1000 Order: 9175044	1	N	705.00
5	B73948 : Oracle Fusion WebCenter Forms Recognition Cloud Service - Hosted 1K Records : 14-Jun-2020 - 13-Sep-2020 Quantity : 10 Order: 9175044	1	N	439.92

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8491993
INVOICE DATE	14-Jun-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	14-Jul-2020
CUSTOMER REF	

SPECIAL INSTRUCTIONS:	**SUBTOTAL**	**TAX**	**TOTAL(USD)**
	12,383.64	0.00	12,383.64
	Less Payments		0.00
	Credits/Adjustments		0.00
	Outstanding Balance as of 15-Jun-2020		12,383.64

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8448988
INVOICE DATE	14-Mar-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	13-Apr-2020
CUSTOMER REF	

BILL TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

PAYMENT INSTRUCTIONS:

REFERENCE 8448988 **ON YOUR REMITTANCE**

MAIL CHECKS TO: Oracle America, Inc.
PO BOX 44471
SAN FRANCISCO CA 94144

WIRE TRANSFERS TO: WELLS FARGO BANK
ABA 121000248
ACCT 4522-020841

SHIP TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

FOR BILLING QUESTIONS, CALL: (888) 803-7414 OR EMAIL: COLLECTIONS_US@ORACLE.COM

ORACLE SALESPERSON	ORACLE ORDER NUMBER	CUSTOMER CONTACT	END USER
Dugheanu, Miss Irina Simona	10447073	Michael Roberts	

ITEM NO.	DESCRIPTION	QTY/ NO. OF USERS	TAX	EXTENDED AMOUNT
1	B69713 : Oracle Fusion Expenses Cloud Service - Hosted Expense Report : 14-Mar-2020 - 13-Jun-2020 Quantity : 1000 Order: 9175044	1	N	705.00
2	B73948 : Oracle Fusion WebCenter Forms Recognition Cloud Service - Hosted 1K Records : 14-Mar-2020 - 13-Jun-2020 Quantity : 10 Order: 9175044	1	N	439.92
3	B69711 : Oracle Fusion Financials Cloud Service - Hosted Named User : 14-Mar-2020 - 13-Jun-2020 Quantity : 10 Order: 9175044	1	N	6,598.80
4	B73947 : Oracle Fusion Automated Invoice Processing Cloud Service - Hosted 1K Records : 14-Mar-2020 - 13-Jun-2020 Quantity : 10 Order: 9175044	1	N	439.92
5	B69717 : Oracle Fusion Purchasing Cloud Service - Hosted Named User : 14-Mar-2020 - 13-Jun-2020 Quantity : 10 Order: 9175044	1	N	4,200.00

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8448988
INVOICE DATE	14-Mar-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	13-Apr-2020
CUSTOMER REF	

SPECIAL INSTRUCTIONS:	**SUBTOTAL**	**TAX**	**TOTAL(USD)**
	12,383.64	0.00	12,383.64
	Less Payments		0.00
	Credits/Adjustments		0.00
	Outstanding Balance as of 16-Mar-2020		12,383.64

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8570622
INVOICE DATE	14-Dec-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	13-Jan-2021
CUSTOMER REF	

BILL TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

PAYMENT INSTRUCTIONS:

REFERENCE 8570622 **ON YOUR REMITTANCE**

MAIL CHECKS TO: Oracle America, Inc.
PO BOX 44471
SAN FRANCISCO CA 94144

WIRE TRANSFERS TO: WELLS FARGO BANK
ABA 121000248
ACCT 4522-020841

SHIP TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

FOR BILLING QUESTIONS, CALL: (888) 803-7414 OR EMAIL: COLLECTIONS_US@ORACLE.COM

ORACLE SALESPERSON	ORACLE ORDER NUMBER	CUSTOMER CONTACT	END USER
Dugheanu, Miss Irina Simona	10447073	Michael Roberts	

ITEM NO.	DESCRIPTION	QTY/ NO. OF USERS	TAX	EXTENDED AMOUNT
1	B73947 : Oracle Fusion Automated Invoice Processing Cloud Service - Hosted 1K Records : 14-Dec-2020 - 13-Mar-2021 Quantity : 10 Order: 9175044	1	N	439.92
2	B69713 : Oracle Fusion Expenses Cloud Service - Hosted Expense Report : 14-Dec-2020 - 13-Mar-2021 Quantity : 1000 Order: 9175044	1	N	705.00
3	B73948 : Oracle Fusion WebCenter Forms Recognition Cloud Service - Hosted 1K Records : 14-Dec-2020 - 13-Mar-2021 Quantity : 10 Order: 9175044	1	N	439.92
4	B69717 : Oracle Fusion Purchasing Cloud Service - Hosted Named User : 14-Dec-2020 - 13-Mar-2021 Quantity : 10 Order: 9175044	1	N	4,200.00
5	B69711 : Oracle Fusion Financials Cloud Service - Hosted Named User : 14-Dec-2020 - 13-Mar-2021 Quantity : 10 Order: 9175044	1	N	6,598.80

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8570622
INVOICE DATE	14-Dec-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	13-Jan-2021
CUSTOMER REF	

SPECIAL INSTRUCTIONS:	**SUBTOTAL**	**TAX**	**TOTAL(USD)**
	12,383.64	0.00	12,383.64
	Less Payments		0.00
	Credits/Adjustments		0.00
	Outstanding Balance as of 15-Dec-2020		12,383.64

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8531481
INVOICE DATE	14-Sep-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	14-Oct-2020
CUSTOMER REF	

BILL TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

PAYMENT INSTRUCTIONS:

REFERENCE 8531481 **ON YOUR REMITTANCE**

MAIL CHECKS TO: Oracle America, Inc.
PO BOX 44471
SAN FRANCISCO CA 94144

WIRE TRANSFERS TO: WELLS FARGO BANK
ABA 121000248
ACCT 4522-020841

SHIP TO :
Yoga Works, Inc.
Michael Roberts
5780 Uplander Way
CULVER CITY, CA 90230
United States

FOR BILLING QUESTIONS, CALL: (888) 803-7414 OR EMAIL: COLLECTIONS_US@ORACLE.COM

ORACLE SALESPERSON	ORACLE ORDER NUMBER	CUSTOMER CONTACT	END USER
Dugheanu, Miss Irina Simona	10447073	Michael Roberts	

ITEM NO.	DESCRIPTION	QTY/ NO. OF USERS	TAX	EXTENDED AMOUNT
1	B69717 : Oracle Fusion Purchasing Cloud Service - Hosted Named User : 14-Sep-2020 - 13-Dec-2020 Quantity : 10 Order: 9175044	1	N	4,200.00
2	B73947 : Oracle Fusion Automated Invoice Processing Cloud Service - Hosted 1K Records : 14-Sep-2020 - 13-Dec-2020 Quantity : 10 Order: 9175044	1	N	439.92
3	B69711 : Oracle Fusion Financials Cloud Service - Hosted Named User : 14-Sep-2020 - 13-Dec-2020 Quantity : 10 Order: 9175044	1	N	6,598.80
4	B69713 : Oracle Fusion Expenses Cloud Service - Hosted Expense Report : 14-Sep-2020 - 13-Dec-2020 Quantity : 1000 Order: 9175044	1	N	705.00
5	B73948 : Oracle Fusion WebCenter Forms Recognition Cloud Service - Hosted 1K Records : 14-Sep-2020 - 13-Dec-2020 Quantity : 10 Order: 9175044	1	N	439.92

ORACLE

Oracle America, Inc.
500 Oracle Parkway
Redwood Shores, CA 94065
United States

INVOICE

Federal Tax ID: 94-2805249

INVOICE NUMBER	8531481
INVOICE DATE	14-Sep-2020
YOUR P.O. NUMBER	POEF-1/Chang
PAYMENT TERMS	30 NET
DUE DATE	14-Oct-2020
CUSTOMER REF	

SPECIAL INSTRUCTIONS:	**SUBTOTAL**	**TAX**	**TOTAL(USD)**
	12,383.64	0.00	12,383.64
	Less Payments		0.00
	Credits/Adjustments		0.00
	Outstanding Balance as of 15-Sep-2020		12,383.64