

PROOF OF CLAIM

Date: _____

Liquidator Claim No.: _____
[Liquidator's Use Only]

Post-Mark: _____
[Liquidator's Use Only]

Total Amount Claimed: \$ _____

Name of Claimants: _____
[Print of type full name(s) of Claimants]

This Proof of Claim must be completed, and sent by first class United States mail to Geneva Insurance Company, in Liquidation ("Geneva"), to the attention of:

Geneva Insurance Company, in Liquidation
ATTN: Michael P. Kilkenny, Special Deputy Liquidator
P.O. Box 44807
Indianapolis, IN 46244

This Proof of Claim form must be post-marked not later than **June 30, 2021**, or your claim will not be accepted.

1. (a) *[If Claimant is an individual claiming for himself]* The undersigned, who is the Claimant herein, resides at: _____

or (b) *[If Claimant is a partnership claiming through a partner]*

The undersigned, who resides at: _____

is a member of _____, a partnership, composed of the undersigned and _____ of _____, and doing business at _____

and is authorized to make this claim on behalf of the partnership;

or (c) *[If Claimant is a corporation claiming through an authorized officer]*

The undersigned, who resides at:

is _____ *[title or position]* of _____, a corporation organized under the laws of _____ and doing business at _____

and is authorized to make this claim on behalf of the corporation;

or (d) *[If claim is made by agent]*

The undersigned, who resides at: _____

is the agent of _____ and is authorized to make this claim on behalf of Claimant.

2. Geneva was, at the time of entry of the Order of Liquidation on July 8, 2019 and still is, indebted (or liable) to this Claimant in the amount of \$ _____ *[Insert total dollar amount Claimant is seeking]*.

3. The consideration of this debt (or ground of liability) is as follows *[please specify in detail, and state whether the asserted claim is contingent or a certain amount, and include as exhibits any written documentation to support the claim]*: _____

4. *[If this claim derives from a written instrument]* The written instrument on which this claim is founded (or a duplicate thereof) is attached to this Proof of Claim as Exhibit 4A, or cannot be attached for the reasons set forth in a statement attached hereto.

5. *[If appropriate]* This claim is founded on an open account, which became or will become due on _____, as shown by the itemized statement attached to this Proof of Claim as Exhibit 5A. Unless it is attached to this Proof of Claim or its absence is explained in a statement attached hereto, no note or other negotiable instrument has been received from Geneva as payment for the account or any part of it.

6. No judgment has been rendered on this claim except as follows: _____

7. The amount of all payments on the original amount of this claim have been credited and deducted for the purpose of determining the final amount asserted to be due the Claimant as set forth on this Proof of Claim. The amount and dates of any prior payments which have been credited against the sum named herein are as follow:

<u>Date</u>	<u>Amount</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____

8. This claim is not subject to any setoff, counterclaim or defense except: _____

9. The Claimant is not holding any security interest for this claim except: _____

[If a security interest in any property of Geneva is claimed] The undersigned claims the security interest under the writing referred to in paragraph 4 of this Proof of Claim or under a separate writing which (or a duplicate of which) is attached hereto as Exhibit 9A, or under a separate writing that cannot be attached to this Proof of Claim for the reasons set forth in the statement attached to this Proof of Claim. Evidence of perfection of the security interest also is attached to this Proof of Claim as Exhibit 9B.

10. This claim is a general unsecured claim, except to the extent that the security interest, if any, described in paragraph 9 is sufficient to satisfy the claim. If priority is claimed, state the amount and basis thereof on a statement attached hereto as Exhibit 10A.

11. This claim is filed as (an):

[Please circle one]

Unsecured Claim

Secured Claim

Priority Claim (State the priority class asserted _____)

I affirm under the penalties of perjury that the foregoing facts are true.

Claimant

Title or Official Capacity

RETURN ORIGINAL NO LATER THAN JUNE 30, 2021. MAKE AND RETAIN A COPY FOR YOUR RECORDS.

Geneva Insurance Company, in Liquidation
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Indianapolis, IN 46244