

d. Subparagraphs a, b, and c above do not apply, but I am entitled to payment of such monies because (*submit evidence establishing basis for right to obtain payment*): _____

3. Please complete each of the following subparagraphs:

a. The following is the creditor's address and phone number:

b. A brief history of the creditor (from the filing of the claim to the present) which includes, if applicable, identification of any sale of the company and the new and prior owner(s). Submit evidence establishing the sale of the company from the prior to the new owner(s):

4. I understand that, pursuant to 18 U.S.C. § 152, I may be fined or imprisoned, or both, if I have knowingly and fraudulently made any false statements in this document.

(Corporate seal

Signature of creditor/successor

If applicable)

Printed creditor's/successor's name

Creditor's/successor's address

STATE OF CALIFORNIA, COUNTY OF _____

On _____ before me, personally appeared (*insert name and title of the signer*)

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.

(SEAL)

Notary Public

My commission expires on _____

Signature of attorney/attorney-in-fact (if appointed)

Printed name

Address

STATE OF CALIFORNIA, COUNTY OF _____

On _____ before me, personally appeared (*insert name and title of the signer*)

_____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.

(SEAL)

Notary public

My commission expires on _____

Presented by:

PROOF OF SERVICE OF DOCUMENT

I hereby certify under penalty of perjury under the laws of the United States that on _____, I mailed in a sealed envelope, with postage thereon fully prepaid, a fully completed true and correct copy of the document entitled: **MOTION FOR ORDER RELEASING UNCLAIMED FUNDS** to the United States attorney's office, United States trustee's office, and other persons and entities required to be served by LBR 3011-1(b) and addressed as follows:

United States attorney's office Address: _____ _____ _____	United States trustee's office Address: _____ _____ _____
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Name and address of the trustee appointed in the case and the trustee's counsel, if any:

Name and address of the Debtor, reorganized Debtor, or other fiduciary appointed to supervise the distribution of funds and assets of the estate (if not the claimant) and their counsel, if any:

If Movant is not the original creditor or an employee thereof, insert the name and address of the original creditor and the creditor's counsel, if any:

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

Date	Printed Name	Signature
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This form is optional. It has been approved for use in the United States Bankruptcy Court for the Central District of California.