

## INSTRUCTIONS FOR FILING PROOF OF CLAIM

There are two ways to file a Proof of Claim – online or U.S. mail. Remember that your Proof of Claim must be **received** on or before the Bar Date at 5:00 p.m. on November 16, 2020.

### ONLINE

Use [this link](#) to create an account for the online POC submission portal.

- The email address used to create the account will receive an activation request. Click on the link in the activation email **within 48 hours** in order to finalize the account creation.
- Once the account has been created and activated, use [this link](#) to log into the account.
- After logging in, click on the green “Create New Claim” button. This brings you to the “Claim Editor” section of the site.
  - After naming your claim at the bottom of the “Start Claim” tab (which can simply be the name of your church), click the blue “Accept and Continue” box. This will take you to next tab.
  - Use the attached line-by-line instructions to help you fill out the information required in each tab. Before moving to the next tab, be sure to click on the green “Save Changes” box.
  - After filling out all of the information, click on the “Review Claim” tab and ensure all information has been entered correctly.
  - Then select the “Sign & File” tab, select “I am the creditor,” and fill in the information for the church representative who will sign the Proof of Claim.
  - After ensuring all information is correct, and after filling in the signature information, click on the green “Save Changes” box, then the blue “File Your Claim” box.

### U.S. MAIL

- Use [this link](#) to download the Proof of Claim form. The form is a PDF, which may open within your web browser. If that happens, take the necessary steps to download/open the PDF so that you can access it outside of the we browser. If that doesn’t work, print the form and complete it by hand, using the attached instructions.
- Use the attached line-by-line instructions to help you complete the form.
- Once the form is completed, print it out and have it signed by the appropriate local church representative.
- Mail the completed and signed form to:

Boy Scouts of America Claims Processing  
c/o Omni Agent Solutions  
5955 De Soto Ave., Suite 100  
Woodland Hills, CA 91367

If you need additional information (not including legal advice) about the Bar Date, Proof of Claim form, filing the Proof of Claim form or other information about the Debtors' bankruptcy cases, you can contact the Claims and Noticing Agent by:

Calling (toll-free): 866-907-BSA1  
Emailing: BSAInquiries@omniagnt.com  
Visiting: <http://omniagentsolutions.com/bsaclaims>

## LINE-BY-LINE INSTRUCTIONS FOR FILLING OUT PROOF OF CLAIM

Attached to this letter is a SAMPLE Proof of Claim intended to provide guidance for your church to fill in the blanks in the Proof of Claim. What follows is a line-by-line description of what is in the Proof of Claim and how to complete it.

<b>Debtor selection:</b>	Select the box beside “In re Boy Scouts of America, Case No. 20-10343 (LSS)” (PDF) or “Boy Scouts of America” (online)
<b>Line 1: Who is the current creditor?</b>	Insert the name of your local church.
<b>Line 2: Has this claim been acquired from someone else?</b>	Select “No”
<b>Line 3: Where should notices and payments to the creditor be sent?</b>	Insert the address and responsible person of your church (e.g., (“Treasurer, ABC UMC”))
<b>Line 4: Does this claim amend one already filed?</b>	Select “No”
<b>Line 5: Do you know if anyone else has filed a proof of claim for this claim?</b>	Select “No”
<b>Line 6: Do you have any number you use to identify the debtor?</b>	Select “No”
<b>Line 7: How much is the claim?</b>	For the PDF, enter “Unknown” and select “No” as to whether this includes interest. Online, leave this blank and select “No.”
<b>Line 8: What is the basis of the claim?</b>	For the PDF, enter “BSA’s obligation to provide insurance coverage, indemnification, and contribution to claimant under BSA’s policies of general liability insurance, and all other agreements, documents and laws providing such rights to claimant.” Online, enter “Indemnification & insurance coverage under charter agreement.”
<b>Line 9: Is all or part of the claim secured?</b>	Select “No” and move on to Line 10
<b>Line 10: Is this claim based on a lease?</b>	Select “No”
<b>Line 11: Is this claim subject to a right of setoff?</b>	Select “No”
<b>Line 12: Is this claim for the value of goods received...?</b>	Select “No”
<b>Line 13: Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</b>	Select “No”
<b>Person completing the proof of claim?</b>	Select “I am the creditor”

**AFTER YOU HAVE FILED THE PROOF OF CLAIM, PLEASE LET THE CONFERENCE KNOW THAT YOU HAVE FILED THE CLAIM.**

Send email to: [bsa@vaumc.org](mailto:bsa@vaumc.org)

UNITED STATES BANKRUPTCY COURT DISTRICT OF DELAWARE

Fill in the information to identify the case (Select only one Debtor per form):

- In re Boy Scouts of America, Case No. 20-10343 (LSS) In re
- Delaware BSA, LLC, Case No. 20-10342 (LSS)

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. With the exception of claims under section 503(b)(9), 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. This form should not be used if you have a claim arising from sexual abuse and you were under the age of eighteen (18) at the time the sexual abuse began. If you have such a claim, you must file a Sexual Abuse Survivor Proof of Claim. For more information on how to file a Sexual Abuse Survivor Proof of Claim, go to: [www.officialbsaclaims.com](http://www.officialbsaclaims.com).

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?	<p style="text-align: center;"><b>Church Name</b></p> <p>Name of the current creditor (the person or entity to be paid for this claim) _____</p> <p>Other names the creditor used with the debtor _____</p>		
2. Has this claim been acquired from someone else?	<p><input type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p> <p>Yes From whom? _____</p>		
3. Where should notices and payments to the creditor be sent?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;"><b>Where should notices to the creditor be sent?</b></p> <p style="text-align: center;"><b>Treasurer/Pastor/Other name</b></p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Contact Phone _____</p> <p>Contact email _____</p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one) _____</p> </td> <td style="width: 50%; vertical-align: top;"> <p style="text-align: center;"><b>Where should payments to the creditor be sent? (if different)</b></p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Contact Phone _____</p> <p>Contact email _____</p> </td> </tr> </table>	<p style="text-align: center;"><b>Where should notices to the creditor be sent?</b></p> <p style="text-align: center;"><b>Treasurer/Pastor/Other name</b></p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Contact Phone _____</p> <p>Contact email _____</p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one) _____</p>	<p style="text-align: center;"><b>Where should payments to the creditor be sent? (if different)</b></p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Contact Phone _____</p> <p>Contact email _____</p>
<p style="text-align: center;"><b>Where should notices to the creditor be sent?</b></p> <p style="text-align: center;"><b>Treasurer/Pastor/Other name</b></p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Contact Phone _____</p> <p>Contact email _____</p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one) _____</p>	<p style="text-align: center;"><b>Where should payments to the creditor be sent? (if different)</b></p> <p>Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Contact Phone _____</p> <p>Contact email _____</p>		
4. Does this claim amend one already filed?	<p><input type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p> <p>Yes Claim Number on court claims registry (if known) _____ Filed On _____ MM / DD / YYYY</p>		
5. Do you know if anyone else has filed a proof of claim for this claim?	<p><input type="checkbox"/> Yes</p> <p><input checked="" type="checkbox"/> No</p> <p>Yes Who made the earlier filing? _____</p>		

**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? \$ **Unknown** 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  
**BSA's obligation to provide insurance coverage, indemnification, and contribution to claimant under BSA's policies of general liability insurance, and all other agreements, documents and laws providing such rights to claimant.**

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: \_\_\_\_\_

12. Is this claim for the value of goods received by the debtor within 20 days before the commencement date of this case (11 U.S.C. §503(b)(9)).?  No  
 Yes Amount of 503(b)(9) Claim: \$ \_\_\_\_\_

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

**No**

Yes *Check all that apply*

**Amount entitled to priority**

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