09-50026-mg Doc 14745 Filed 05/11/20 Entered 05/11/20 17:05:11 Main Document Pg 1 of 5

Hearing Date and Time: TBD

Lisa M. Norman (admitted pro hac vice) T. Joshua Judd (admitted pro hac vice) ANDREWS MYERS, P.C. 1885 St. James Place, 15th Floor Houston, Texas 77056 713-850-4200 Telephone 713-850-4211 Facsimile Lnorman@andrewsmyers.com Jjudd@andrewsmyers.com

Counsel for Additional Ignition Switch Pre-Closing Plaintiffs

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK In re: MOTORS LIQUIDATIONS COMPANY, et al. f/k/a General Motors Corp., et al.

Debtors.

Case No.: 09-50026 (MG)

(Jointly Administered)

Chapter 11

REPLY BRIEF TO THE RESPONSES AND OBJECTIONS TO BRIEF IN SUPPORT OF MOTION FILED BY ADDITIONAL IGNITION SWITCH PRE-CLOSING ACCIDENT PLAINTIFFS FOR AUTHORITY TO FILE LATE PROOFS OF CLAIM FOR PERSONAL INJURIES AND WRONGFUL DEATHS

The Additional Ignition Switch Pre-Closing Accident Plaintiffs¹ (the "Movants" or

"Andrews Myers Plaintiffs"), by and through the undersigned counsel, hereby file this Reply

Brief to the Responses and Objections to their Motion to File Late Proofs of Claim for Personal

Injuries and Wrongful Deaths ("Motion") and supplements thereto [ECF Nos. 14018, 14046,

14112, 14195 and 14346], and in support thereof, the Movants respectfully state as follows:

¹ The "Additional Ignition Switch Pre-Closing Accident Plaintiffs", identified in Doc. 14018, 14046, 14112, 14195 and 14346, were not included in the Omnibus Motion filed by Certain Ignition Switch Pre-Closing [Docket No. 13807] but are seeking the same relief set forth in the motion at Docket No. 13807, which was still pending and for which oral arguments had not yet occurred when these "Additional Ignition Switch Pre-Closing Accident Plaintiffs" filed their late claims motion, and supplements thereto. These "Additional Ignition Switch Pre-Closing Accident Plaintiffs" are included in the subset of the Pre-Closing Accident Plaintiffs that had the Ignition Switch in their Subject Vehicles, but did not receive notice of the filing of

IDENTIFICATION OF MOVANTS

1. The twenty (20) Movants identified below have continued to seek authority from this Court since 2017 to allow them to file late claims.² On two separate occasions, they were parties to settlement agreements with the GUC Trust, but ultimately neither settlement agreement was approved. Accordingly, their last resort for recovery in this case is to obtain authority to file late claims.

	Last	First
1.	Bednar	Jared
2. 3.	Brown	Bertha
3.	Donato	Joann
4.	Dullen	Ryan
5.	El-Cheikh	Sheryl
6.	Enders	Kathryn
7.	Gentry	Rodney
8.	Gillis	Michael
9.	Grant	Chas
10.	Johnson	Shanga
11.	Lynch	Melinda
12.	Martinez	Louella
13.	McDonough	John
14.	Merritt	Ruby
15.	Overcast	Deborah
16.	Pier	David
17.	Riley	Jibreel
18.	Salm	Kenneth
19.	Samuels	Sandra
20.	Stephenson	Shakira

ARGUMENTS & AUTHORITIES

2. The GUC Trust asserts that the *Pioneer* factors must be applied. While Movants respectfully disagree with this assertion, Movants will address the *Pioneer* factor to the extent that the Court intends to consider them in its analysis.

Docket No. 13807 or the deadline to join in that motion.

² See Exhibit 1 through 20, attached and incorporated by reference.

09-50026-mg Doc 14745 Filed 05/11/20 Entered 05/11/20 17:05:11 Main Document Pg 3 of 5

3. In *Pioneer* the Supreme Court endorsed a broad reading of the phrase "excusable neglect." The Court interpreted the "excusable neglect" provision in Rule 9006(b)(1) of the Federal Rules of Bankruptcy Procedure, which "empowers a bankruptcy court to permit a late filing if the movant's failure to comply with an earlier deadline 'was the result of excusable neglect." 507 U.S. at 382, 113 S.Ct. 1489. Rejecting what it termed a "narrow view of 'excusable neglect," under which the failure to meet a deadline had to be "caused by circumstances beyond the movant's control," the Court advanced "a more flexible analysis." *Id.* at 387 n. 3, 113 S.Ct. 1489. The Court observed that the ordinary meaning of the word "neglect" encompasses not just unavoidable omissions, but also negligent ones, and concluded that "Congress plainly contemplated that the courts would be permitted, where appropriate, to accept late filings caused by inadvertence, mistake, or carelessness, as well as by intervening circumstances beyond the party's control." *Id.* at 388, 113 S.Ct. 1489.

4. The Court then identified factors to be weighed in evaluating a claim of excusable neglect:

we conclude that the determination is at bottom an equitable one, taking account of all relevant circumstances surrounding the party's omission. These include . . . the danger of prejudice to the [non-moving party], the length of the delay and its potential impact on judicial proceedings, the reason for the delay, including whether it was within the reasonable control of the movant, and whether the movant acted in good faith.

Id. at 395, 113 S.Ct. 1489. When considering these four (4) *Pioneer* factors, it is clear that Movants meet the standard of excusable neglect.

5. First, there is no danger of prejudice to the GUC Trust if Movants are allowed to file late claims. As stated by counsel for the GUC Trust at the hearing on the settlement motion between the GUC Trust and the Economic Loss Plaintiffs, the GUC Trust maintains sufficient

3

09-50026-mg Doc 14745 Filed 05/11/20 Entered 05/11/20 17:05:11 Main Document Pg 4 of 5

resources to pay Movants' claims, if they are allowed. These are the last remaining late claims before this Court for consideration, so there is no continuous risk of additional late claims as alleged by the GUC Trust.

6. Second, with regard to the length of delay, Movants filed their motion to allow late claims as soon as they became aware that this Court was still considering potential late claims. Just as Movants did not receive notice of the initial order setting a bar date, they also did not receive notice of the December 2016 Show Cause Order setting the deadline for filing late claims motions. While Movants are similarly situated to the Hilliard Plaintiffs who filed the original late claims motion, unlike the Hilliard Plaintiffs, Movants were not recipients of that order. Once they became aware of the order, and the fact that the late claims motion filed by the Hilliard Plaintiffs was still pending, each of the Movants herein joined in seeking the same relief as the Hilliard Plaintiffs.

7. Third, the earliest that any of the Movants became aware of the December 2016 Show Cause Order was mid-2017. At that time, Movants' initial late claims motion was filed. Prior to that time, Movants believed that there was no longer a vehicle by which they could recover in this bankruptcy case.

8. Finally, Movants acted in good faith. They did not purposefully delay in filing their claims. All they have ever sought was the opportunity to recover for their personal injury and wrongful death claims, and they did so as soon as they became aware that such an opportunity might still exist in this Court.

9. Based on the foregoing, Movants submit that to the extent *Pioneer* applies, the factors have been met and they request that an order be entered allowing them to file their late claims.

4

09-50026-mg Doc 14745 Filed 05/11/20 Entered 05/11/20 17:05:11 Main Document Pg 5 of 5

CONCLUSION

WHEREFORE, Movants respectfully request that this Court enter an Order granting them leave to file their proposed late claims.

Dated: May 11, 2020

Respectfully submitted,

ANDREWS MYERS, P.C.

<u>/s/Lisa M. Norman</u> Lisa M. Norman (admitted pro hac vice) T. Joshua Judd (admitted pro hac vice) ANDREWS MYERS, P.C. 1885 St. James Place, 15th Floor Houston, Texas 77056 713-850-4200 Telephone 713-850-4211 Facsimile Lnorman@andrewsmyers.com Jjudd@andrewsmyers.com

Bankruptcy Counsel for Additional Ignition Switch Pre-Closing Plaintiffs

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing document, filed through the CM/ECF system, will be sent electronically to the registered participants as identified on the Notice of Electronic Filing (NEF), copies will also be served by email on May 11, 2020 on those parties listed as "Notice Parties" under the Court's December 12, 2016 Order to Show Cause [ECF No. 13802], with paper copies served by first class mail postage prepaid on all Notice Parties for whom email addresses are unavailable.

<u>/s/ Lisa M. Norman</u> LISA M. NORMAN 09-50026-mg Doc 14745-1 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case:

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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?	Shakiria Stephenson 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?	Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman	Where should payments to the creditor be sent? (if different)				
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1885 St. James Place, 15th Floor	Name				
	Number Street Houston TX 77056	Number Street				
	City State ZIP Code Contact phone 713-850-4200	City Stale ZIP Code				
	Contact email Lnorman@andrewsmyers.com	Contact email				
4. Does this claim amend one already filed?	Yes Claim number on court claims registry (if known) _	MM / DD / YYYY				
 Do you know if anyong else has filed a proof of claim for this claim 	Ves Who made the earlier filing?					

Official Form 410

Proof of Claim

page 1

EXHIBIT 1 - STEPHENSON

09-50026-mg Doc 14745-1 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

-

Part 2: Give Informatio	on About the Claim as of the Date the Case Was Filed				
 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?	s UNigudated. Does this amount include interest or other charges?				
	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.				
Ciaim r	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.				
	Personal injury claim - ignition switch				
9. Is all or part of the claim	NO NO				
secured?	Sec. 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 tille, 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				
10. Is this claim based on a	2 No				
lease?	Yes. Amount necessary to cure any default as of the date of the petition.				
11. Is this claim subject to a	₩ No				
right of setoff?	Yes. identify the property:				

Official Form 410

Proof of Claim

EXHIBIT 1 - STEPHENSON

09-50026-mg Doc 14745-1 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	V No Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	S
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2,850* 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or aft	er the date of adjustment.

Part 3: Sign Below				
The person completing	Check the approp	oriate box:		
this proof of claim must sign and date it.	I am the cree	ditor.		
FRBP 9011(b).	-	ditor's attorney or authorized agent.		
If you file this claim	_	tee, or the debtor, or their authorized agent. Ba	nkruptcy Rule (3004.
electronically, FRBP 5005(a)(2) authorizes courts	🔲 i am a guara	intor, surety, endorser, or other codebtor. Bankr	uptcy Rule 300	05.
to establish local rules				
specifying what a signature Is.	I understand that	an authorized signature on this Proof of Claim	serves as an ac	cknowledgment that when calculating the
A person who files a	amount of the cla	im, the creditor gave the debtor credit for any p	ayments receiv	red toward the debt.
fraudulent claim could be	I have examined	the information in this <i>Proof of Claim</i> and have a	a reasonable h	elief that the information is true
fined up to \$500,000, imprisoned for up to 5	and correct.			
years, or both.	l de slore under s	maile of manipus that the formation is to a said a		
18 U.S.C. §§ 152, 157, and 3571.	i declare under p	enalty of perjury that the foregoing is true and c	DITECI.	
50/1.	Executed on date			
		MM / DD / YYYY		
	/s/Lisa M Signature	Jussian in)oema	20
	Print the name of	f the person who is completing and signing	this claim:	
	Name	Lisa M. Norman		
		First name Middle name		Last name
	Title	Attorney		
	Company	Andrews Myers, PC		
		Identify the corporate servicer as the company if the	authorized agent	tis a servicer.
	Address	1885 St. James Place, 15th Floor		
		Number Street		
		Houston	ТХ	77056
		City	State	ZIP Code
	Contact phone	713-850-4200	Email Lr	norman@andrewsmyers.com

Official Form 410

Proof of Claim

EXHIBIT 1 - STEPHENSON

09-50026-mg Doc 14745-1 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Stephenson
First Name of Claimant	Shakiria
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Hillsboro, FL
Accident Description	Client skidded off the road and the vehicle rolled several times
Injury Description	Broken collarbone
Airbag Deployed	No
Date of Injury	00/00/2007
Year and Model of Vehicle	2004 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Amount of Claim	10 be determined (uniquidated)
Prior or Current Litigation	No.
The of current Linguistic	
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with
	respect to the adjudication of this claim. Pursuant to 28 U.S.C.
	§157(e), claimant does not consent to such jury trial being conducted
	in the United States Bankruptcy Court for the Southern District of
	Texas ("Bankruptcy Court").
No Consent to Bankruptcy	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right
Court Adjudication	to dispute the jurisdiction of the Bankruptcy Court and does not waive the right
	proceeding, motion or other matter related to this claim or any other
	rights of claimant apart from this claim. Claimant hereby expressly
	does not consent to this claim being adjudicated in the Bankruptcy
	Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release
-	any of claimant's rights against any other entity or person that may
	be liable for all or part of this claim.

09-50026-mg Doc 14745-2 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fillin this information to deptdy the case -

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse if Sing)

United States Bankruptcy Court for the Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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.

7	Part 1: Identify the C	laim					
1.	Who is the current	Sandra Samuels					
	CIWERDIT	Name of the current crea	htor (the person or e	entity to be paid for this d	am)		
		Other names the credito	rused with the debu	or			
2.	Has this claim been acquired from someone else?	2 No Ves. From whom					
3	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)			
	Federal Rule of	Andrews Myers,	PC - ATTN: Li	isa M. Norman			
	Bankruptcy Procedure	Name			Name		
	(FRBP) 2002(g)	1885 St. James Place, 15th Floor		DOL			
		Number Street	TV	77050	Number Stree	et	
		Houston	TX	77056			
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone 713-8	50-4200		Contact phone		
		Contact email Lnorm		myers.com	Contact email		
		Unform claim identifier f	Drelectronic paymei	nts in chapter 13 (if you u	se one) 		
4	Does this claim amend one already filed?	💋 No 🗋 Yes. Claim numb	er on court claim	s registry (if known)		Filed on	0 / 1777
5.	Do you know if anyone else has filed a proof of claim for this claim?	90 No Ves. Who made	the earlier filling?				

Proof of Claim

EXHIBIT 1 - SAMUELS

09-50026-mg Doc 14745-2 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

Ρ	art 2: Give Informatio	n About the Claim as of the Date the Case Was Filed				
8 .	Do you have any number you use to identify the debtor?	Ves. Last 4 digits of the debtor's account or any number you use to identify the debtor.				
۲.	How much is the claim?	SUNIGUNIAN Does this amount include interest or other charges?				
	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.				
		Personal injury claim - ignition switch				
	is all or part of the claim ecured?	 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: S				
		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				
	is this claim based on a lease?	No Yes Amount necessary to cure any default as of the date of the petition. \$				
	Is this claim subject to a right of setof??	Yes Identify the property				

Proof of Claim

EXHIBIT 1 - SAMUELS

09-50026-mg Doc 14745-2 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pq 3 of 4

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.

ษี 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 \$2,850° of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	s
Wages, salaries, or commissions (up to \$12,850°) 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).	s
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 4/01/19 and every 3 years after that for cases begun on or after	er the date of adjustment.

Part 3: Sign Bolow

If you file this claim

electronically, FRBP

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

5005(a)(2) authorizes courts to establish local rules specifying what a signature

A person who files a fraudulent claim could be fined up to \$560,000,

18 U.S.C. §§ 152, 157, and

imprisoned for up to 5 years, or both.

3571.

- Check the appropriate box I am the creditor
- 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 07/21/2017

Phila /s/ Lisa M. Norman Man Signature

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

Name	Lisa M. Norman						
	First name	Middle name		Last name			
Title	Attorney						
Company	Andrews Myers, I	PC					
	Identify the corporate servicer as the company if the authorized agent is a servicer.						
Address	1885 St. James F	Place, 15th Floor					
	Number Street						
	Houston		ТХ	77056			
	City		State	ZiP Code			
Contact phone	713-850-4200		Emai Lr	orman@andrewsm	yers.com		

EXHIBIT 1 - SAMUELS

09-50026-mg Doc 14745-2 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Samuels
First Name of Claimant	Sandra
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Canton, TX
Accident Description	The Claimant was driving when the car lost control, swerved across
	a lane, spun across the median and hit an oncoming car.
Injury Description	The Claimant suffered loss of consciousness, acute multiple trauma, head injury, multiple rib and vertebral fractures, scapular fracture, pulmonary contusion, pelvis fracture, bilateral pneumothoraces and lacerations.
Airbag Deployed	No
Date of Injury	3/19/2008
Year and Model of Vehicle	2008 Chevy Malibu
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Νο
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
N. C	Desirtes of filling this are of a falloing algiment door not concert to
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-3 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors Q

Debtor 2 (Spouse. if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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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 C	laim					
1.	Who is the current creditor?	Jibreel Riley	iter (the person of a	nfity to be paid for this of			
_		Other names the creditor	used with the debto	۳			
2.	Has this claim been acquired from someone else?	2 No Ves. From whom	?				
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)			
	Federal Rule of	Andrews Myers,	PC - ATTN: Li	sa M. Norman		······	
	Bankruptcy Procedure	Name 1885 St. James F	Place 15th Flo	or	Name		
	(FRBP) 2002(g)	Number Street			Number	Street	
		Houston	ТХ	77056			
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone 713-85	50-4200		Contact phone	e	_
		Contact email Lnorm	an@andrewsn	nyers.com	Contact email		_
		Uniform claim identifier fa	or electronic paymen	nts in chapter 13 (if you u	se one):		
4.	Does this claim amend one already filed?	Ø No ☐ Yes Claim numb	er on court claims	; registry (if known)		Filed on	/ YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	V No Yes. Who made t	he earlier filing?				

Official Form 410

Proof of Claim

page 1

EXHIBIT 1 - RILEY

09-50026-mg Doc 14745-3 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

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Part 2: Give Informatio	n About the Claim as of the Date the Case Was Filed		
6. Do you have any number 20 No you use to identify the debtor?			
7. How much is the claim?	 SUNIQUE TEC: 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	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.		
claim?	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.		
	Personal injury claim - ignition switch		
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		
	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	22 No		
lease?	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:		

EXHIBIT 1 - RILEY

09-50026-mg Doc 14745-3 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim	ST No	
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2,850° 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after	er the date of adjustment.

Part 8: Sign Below						
The person completing	Check the appro	priate box:				
this proof of claim must sign and date it.	l am the cre	ditor.				
FRBP 9011(b).	I am the cre	ditor's attorney or authorized agent.				
If you file this claim	I am the true	stee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
electronically, FRBP 5005(a)(2) authorizes courts	🔲 i am a guara	antor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
to establish local rules						
specifying what a signature is.	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.					
A person who files a fraudulent claim could be						
fined up to \$500,000, Imprisoned for up to 5	I have examined and correct.	the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true				
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	l declare under p	enalty of perjury that the foregoing is true and correct.				
307 1.	Executed on date	9 09/19/2017 MM / DD / YYYY				
	/s/ Lisa M Signature Print the name	. Norman King Min Olk Man				
	•	Lisa M. Norman				
	Name	First name Middle name Last name				
	Title	Attorney				
	Company	Andrews Myers, PC				
		Identify the corporate servicer as the company if the authorized agent is a servicer				
	Address	1885 St. James Place, 15th Floor				
		Number Street				
		Houston TX 77056				
		City State ZIP Code				
	Contact phone	713-850-4200 Email Lnorman@andrewsmyers.com				

Official Form 410

Proof of Claim

EXHIBIT 1 - RILEY

09-50026-mg Doc 14745-3 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Riley
First Name of Claimant	Jibreel
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Buffalo, New York
Accident Description	Claimant was a driver when his car was hit on driver's side by delivery van.
Injury Description	Injuries to his elbow and head.
Airbag Deployed	No
Date of Injury	6/18/2007
Year and Model of Vehicle	2006 Chevy Cobalt
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-4 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case:

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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.

F	Part 1: Identify the Claim						
1.	Who is the current creditor?			entity to be paid for this cl			
2.	Has this claim been acquired from someone else?	V No Yes. From whom	n?				
3.	Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notic Andrews Myers, Name 1885 St. James Number Street Houston City	PC - ATTN: Li Place, 15th Flo TX State	isa M. Norman	Where should pay different) Name Number Stree City	yments to the creditor b	·
		Contact phone 713-8 Contact email Lnorr	nan@andrews	myers.com	Contact email		
4.	Does this claim amend one already filed?	🗹 No 🗋 Yes. Claim num		s registry (if known)		Filed on	/ YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	🗹 No 🗋 Yes. Who made					

Proof of Claim

EXHIBIT 1 - PIER

09-50026-mg Doc 14745-4 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

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Part 2: Give Informatio	n About the Claim as of the Date the Case Was Filed
 Do you have any number you use to identify the debtor? 	V No Ves. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7. How much is the claim?	s_Unliguidated Does this amount include interest or other charges?
	V Ses. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
3. 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.
	Personal injury claim - ignition switch
9. Is all or part of the claim	⊠ No
secured?	Sec. 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 <i>Proof of Claim.</i> 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) %
	Variable
0. Is this claim based on a	1 No
lease?	Yes. Amount necessary to cure any default as of the date of the petition.
1. Is this claim subject to a right of setoff?	M No
	Yes. Identify the property:

EXHIBIT 1 - PIER

09-50026-mg Doc 14745-4 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim	S No	
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitied to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2,850* 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after	er the date of adjustment.
Part 3: Sign Below		

The person completing this proof of claim must	Che	ack the approp	oriate box:			
sign and date it.		I am the crea	ditor.			
FRBP 9011(b).	র্থ	I am the cred	ditor's attorney or authorized agent.			
If you file this claim		I am the trus	tee, or the debtor, or their authorized agent. Bankru	uptcy Ru	le 3004.	
electronically, FRBP 5005(a)(2) authorizes courts to establish local rules		l am a guara	intor, surety, endorser, or other codebtor. Bankrupt	cy Rule 3	3005.	
specifying what a signature ls.		I understand that an authorized signature on this <i>Proof of Claim</i> 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.				
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5			e belief that the information is true			
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	l de	iclare un der p	enalty of perjury that the foregoing is true and corre	ct.		
5011.	Exe	ecuted on date	09/19/2017 MM / DD / YYYY			
	_	Signature	. Norman K Sam. Do	RA s claim:	ran	
	Nam	ne	Lisa M. Norman			
			First name Middle name		Last name	
	Title	•	Attorney		·····	
	Company	npany	Andrews Myers, PC			
			Identify the corporate servicer as the company if the aut	norized ag	ent is a servicer	
Address 1885 St. James Place, 15th Floor						
			Houston	тх	77056	
			City	State	ZIP Code	
	Con	tact phone	713-850-4200	Email	Lnorman@andrewsmyers.com	

EXHIBIT 1 - PIER

09-50026-mg Doc 14745-4 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Pier
First Name of Claimant	David
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Suffolk, VA
Accident Description	Son of claimant, Joshua, fell asleep while driving, veered off the
	road and hit a tree
Injury Description	Left broken femur, lacerated aorta, died as a result of his injuries
Airbag Deployed	No
Date of Injury	01/16/2005
Year and Model of Vehicle	1997 Pontiac Grand Am
Tear and Mouth of Venicit	
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

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09-50026-mg Doc 14745-5 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this in	formation to identify the case:
Debtor 1	Motors Liquidation Company, et al. f/k/a General Motors 😭
Debtor 2 (Spouse, if filing)	
United States	Bankruptcy Court for the: Southern District of New York
Case number	<u>09-50026 (REG)</u>

Official Form 410

Proof of Claim

04/16

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?	Deborah Overcast 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?	Where should notices to the creditor be sent?		Where should pa different)	Where should payments to the creditor be sent? (if different)		
	Federal Rule of	Andrews Myers, I		sa w. Norman	Name		
	Bankruptcy Procedure			0r	INGUIC		
	(FRBP) 2002(g)	1885 St. James F	lace, 15th Flo	Or	Number Stree		
		Houston	тх	77056			
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone 713-85	0-4200		Contact phone		
		Contact email Lnorm	an@andrewsn	nyers.com	Contact email		
		Uniform claim identifier fo	r electronic paymen		ıse one):	· <u></u>	
4.	Does this claim amend one already filed?	☑ No ❑ Yes. Claim numb	er on court claims	registry (if known)		Filed on	D / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ❑ Yes. Who made t	he earlier filing?				

09-50026-mg Doc 14745-5 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

P	art 2:	Give Informatio	n About the Claim as of the Date the Case Was Filed
6.		have any number e to identify the ?	 ✓ No ❑ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How m	uch is the claim?	 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 claim?	the basis of the	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. Personal injury claim - ignition switch
9.	Is all or secure	part of the claim d?	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:
10	ls this (lease?	claim based on a	 ✓ No □ Yes. Amount necessary to cure any default as of the date of the petition.
11		claim subject to a i setoff?	V No Ves. Identify the property:

09-50026-mg Doc 14745-5 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim	M No	
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	□ Up to \$2,850* 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or aft	er the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must	Check the approp				
sign and date it. FRBP 9011(b).	-				
. ,		ditor's attorney or authorized a	-		
If you file this claim electronically, FRBP		stee, or the debtor, or their auth	•	•	
5005(a)(2) authorizes courts to establish local rules specifying what a signature	I am a guara	antor, surety, endorser, or othe	r codebtor. Bankruptcy	/ Rule 30	005.
is.		an authorized signature on this im, the creditor gave the debto			acknowledgment that when calculating the ived toward the debt.
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	the information in this Proof of	Claim and have a reas	sonable	belief that the information is true
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	l declare under p	enalty of perjury that the forego	oing is true and correct	t.	
	Executed on date	MM / DD / YYYY			
	/s/ Lisa M Signature Print the name of	. Norman of the person who is complet	ing and signing this	claim:	
	Name	Lisa M. Norman			
		First name	Middle name		Last name
	Title	Attorney		•••	
	Company	Andrews Myers, PC			
		Identify the corporate servicer as	the company if the autho	rized age	ent is a servicer.
	Address	1885 St. James Place,	15th Floor		
		Number Street			77050
		Houston		ТХ	77056
		City		State	ZIP Code
	Contact phone	713-850-4200		Email (_norman@andrewsmyers.com

EXHIBIT of claim ERCAST

09-50026-mg Doc 14745-5 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Overcast
First Name of Claimant	Deborah
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Mountain Home, Arkansas
Accident Description	Claimant was driving a Chevrolet Malibu when she was hit head on by another vehicle and the air bag failed to deploy.
Injury Description	Claimant suffered multiple broken bones and fractures.
Airbag Deployed	No
Date of Injury	10/20/2000
Year and Model of Vehicle	2000 and Chevrolet Malibu
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	N/A
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-6 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Ellinithic loforn abon to idontify the case

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse, 4 filing)

United States Bankruptcy Court for the Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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 C	laim								
		Ruby M	erritt							
Creation	,	Name of the current creditor (the person or entity to be paid for this claim)								
		Other name	is the creditor u	sed with the deblo	·					
Has this claim been 22 No acquired from 21 No someone else? 21 Yes From whom?										
3. Where should notices and payments to the creditor be sent? Federal Rule of		Where sh	ould notices	to the creditor	be sent?	Where shou different)	ild payments to the creditor b	e sent? (if		
		Andrews	s Myers, Po	C - ATTN: Li	sa M. Norman					
		Name			· · · · · · · · · · · · · · · · · · ·	Name	· · · · · · · · · · · · · · · · · · ·	-		
		1885 St	. James Pla	ace, 15th Flo	or					
• - •		Number	Street			Number	Street			
		Houston	1	тх	77056					
		City		State	ZIP Code	City	State	ZIP Code		
		Contact pho	me 7 <u>13-850</u>	-4200		Contact phone	·	_		
		Contact emi	d Lnormar	n@andrewsr	nyers.com	Contact email		-		
Dees this	- doing amount		m dentifier for (electronic paymen	its in chapter 13 (if you u	/se one).				
			Claim number	on court claims	i registry (rf known)		Filed on MM / DO	(9999		
else has	filed a proof	21 No D Yes. V	Who made the	earlier filing?						
	Who is 1 creditor Has this acquired someon Where s and pay creditor Federal I Bankrupi (FRBP) 2 (FRBP) 2 Does this one alres	Who is the current creditor? Has this claim been acquired from someone else? Where should notices and payments to the creditor be sent?	Who is the current creditor? Ruby Mit Name of the Name of the Other name of the Other name acquired from someone else? Has this claim been acquired from someone else? Image: No Imag	Who is the current creditor? Ruby Merritt Name of the current credit Other names the creditor u Has this claim been acquired from someone else? Image: Comparison of the current credit Where should notices and payments to the creditor be sent? Yes Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) Andrews Myers, Procedure 1885 St. James Planame Image: Contact phone 713-850 Contact phone 713-850 Contact email Lnormal Uniform claim dentifier for the contact phone 713-850 Does this claim amend one already filed? Image: No Do you know if anyone etse has filed a proof Yes	Who is the current creditor? Ruby Merritt Name of the current creditor (the person or e Other names the creditor used with the debte other names the state other names the creditor used with the debte other name other the sector the creditor and the other the sector other name other	Who is the current creditor? Ruby Merritt Name of the current creditor (the person or entity to be pad for the c Other names the creditor used with the debtor Has this claim been acquired from someone else? Image: Content of the current creditor used with the debtor Where should notices and payments to the creditor be sent? Image: Content of the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman Name Norman 1885 St. James Place, 15th Floor Number Street Houston TX 77056 City State ZiP Code Contact phone 713-850-4200 Contact error Uniform claim identifier for electronic payments in chapter 13 (if you contact error Uniform claim identifier for electronic payments in chapter 13 (if you contact error Doese this claim armend one already filed? No Yes Ves Claim number on court claims registry (if known) Do you know if anyone eise has filed a proof Yes	Who is the current creditor? Ruby Merritt Name of the current creditor (the person or entry to be pad for this claim) Other names the creditor used with the debtor	Who is the current creditor? Ruby Merritt Name of the current creditor (the person or entry to be pad for this claim) Other names the creditor used with the debtor Has this claim been acquired from beensetse? Where should notices and payments to the creditor be sent? Marine Tederal Rule of Bankruptcy Procedure (FRBP) 2002(g) Name (FRBP) 2002(g) Name (FRBP) 2002(g) No Base this claim arrend one already filed? Mo one sineady filed? Mo base this claim arrend one sineady filed? Mo base this claim arrend one sineady filed? Mo base thes filed a proof		

Proof of Claim

page 1

EXHIBIT 1 - MERRITT

09-50026-mg Doc 14745-6 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

			the Claim as of the Date the Case		
6.	Do you have any number you use to identify the debtor?	21 No C Yes.	Last 4 digits of the debtor's account or any	number you use to identify	/ the debtor:
7.	How much is the claim?	<u>، ال</u>		amount include interest	-
				Attach statement itemizing i charges required by Bankn	interest, fees, expanses, or other uptcy Rule 3001(c)(2)(A)
) .	What is the basis of the claim?	-	is: Goods sold, money loaned, lease, servic		-
			closing information that is entitled to privacy	•	
		Persor	nal injury claim - ignition switch		
					
).	is all or part of the claim secured?	No Ves.	The claim is secured by a lien on property		
			Nature of property:		
			Real estate. If the claim is secured by Attachment (Official Form Motor vehicle Other. Describe:	the debtor's principal resid a 410-A) with this <i>Proof of</i> (
			Basis for perfection: Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til been filed or recorded.)		
			Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til		
			Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til been filed or recorded.)	le, financing statement, or	
			Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til been filed or recorded.) Value of property:	k, financing statement, or s s s c	
			Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til been filed or recorded.) Value of property: Amount of the claim that is secured:	lė, financing statemant, or \$ \$ \$(other document that shows the lien hat The sum of the secured and unsecured mounts should match the amount in lin
			Attach redacted copies of documents, if a example, a mortgage, lien. certificate of the been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured:	te, financing statement, or SS S(as of the data of the patit	other document that shows the lien hat The sum of the secured and unsecured mounts should match the amount in lin
		54	Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: Amount necessary to cure any default. Annual Interest Rate (when case was file Fixed	te, financing statement, or SS S(as of the data of the patit	other document that shows the lien hat The sum of the secured and unsecured mounts should match the amount in lin
D.	is this claim based on a locso?	DÍ No Q Yes, A	Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: Amount necessary to cure any default. Annual Interest Rate (when case was file Fixed Variable	té, financing statement, or \$\$ \$(as of the date of the patit td)%	other document that shows the lien hat The sum of the secured and unsecured mounts should match the amount in lin ion: \$
			Attach redacted copies of documents, if a example, a mortgage, lien, certificate of til been filed or recorded.) Value of property: Amount of the claim that is secured: Amount of the claim that is unsecured: Amount necessary to cure any default. Annual Interest Rate (when case was file Fixed	té, financing statement, or \$\$ \$(as of the date of the patit td)%	other document that shows the lien hat The sum of the secured and unsecured mounts should match the amount in lin ion: \$

Official Form 410

Proof of Claim

page 2

EXHIBIT 1 - MERRITT

09-50026-mg Doc 14745-6 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pq 3 of 4

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 provity.

2	No	
0	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).	\$ <u></u>
	Up to \$2,850° of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	s
	Wages, sataries, or commissions (up to \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part	3:	Sian	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 ís.

A person who files a fraudulent claim could be fined up to \$500,000. imprisoned for up to 5 ers, or both. VØ 18 U.S.C. §§ 152, 157, and 3671.

Check the appropriate box

ω.

- 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 07/21/2017

gling Morman /s/ Lisa M. Norman Signature

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

Name	Lisa M. Norman							
	First name	Niddle name		Last name				
Title	Attorney							
Company	Andrews Myers, PO	C						
	identify the corporate service	er as the company if the authoriz	nage be	It is a servicer				
Address	1885 St. James Pla	ace, 15th Floor						
	Number Street							
	Houston	1	X	77056				
	City	S	tate	ZIP Code				
Contact phone	сњу <u>713-850-4200</u>	-		ZIP Code norman@andrewsmyers.com				

Official Form 410

Proof of Claim

EXHIBIT 1 - MERRITT

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Merritt
First Name of Claimant	Ruby
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Canton, TX
Accident Description	The Claimant was a passenger in the car when the car lost control,
	swerved across a lane, spun across the median and hit an oncoming
	car.
Injury Description	The Claimant died from her traumatic injuries.
Airbag Deployed	No
Date of Injury	3/19/2008
Year and Model of Vehicle	2008 Chevy Malibu
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with
	respect to the adjudication of this claim. Pursuant to 28 U.S.C.
	§157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of
	Texas ("Bankruptcy Court").
	By virtue of filing this proof of claim, claimant does not consent to
No Consent to Bankruptcy	the jurisdiction of the Bankruptcy Court and does not waive the right
Court Adjudication	to dispute the jurisdiction of the Bankruptcy Court to hear any
	proceeding, motion or other matter related to this claim or any other
	rights of claimant apart from this claim. Claimant hereby expressly
	does not consent to this claim being adjudicated in the Bankruptcy
	Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release
Nesei valion of Menus	any of claimant's rights against any other entity or person that may
	be liable for all or part of this claim.

09-50026-mg Doc 14745-7 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case:

Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 1 Debtor 2 (Spcuse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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.

	ant 1: Identify the C									
1.	Who is the current creditor?	John McDonough	1							
	creatori	Name of the current creditor (the person or entity to be paid for this claim)								
		Other names the credito	r used with the debt							
2.	Has this claim been acquired from someone else?	2 No Yes. From whom	1?							
3.	Where should notices and payments to the creditor be sent?	Where should notic	Where should payments to the creditor be sent? (if different)			e sent? (if				
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Andrews Myers, PC - ATTN: Lisa M. Norman			Name					
		1885 St. James Place, 15th Floor			Name					
		Number Street			Number	Street				
		Houston	тх	77056						
		City	State	ZIP Code	City	Sta	te	ZIP Code		
		Contact phone 713-8	50-4200		Contact pho	one		_		
		Contact email Lnorm	an@andrews	myers.com	Contact em	ail		-		
		Uniform claim identifier f	or electronic payme	ise one):						
 I.	Does this claim amend one already filed?	☑ No ❑ Yes. Claim numb	er on court claim	s registry (if known)		Filed on	MM / DD	/ үүүү		
5.	Do you know if anyone else has filed a proof of claim for this claim?	☑ No □ Yes. Who made	the earlier filing?							

Official Form 410

Proof of Claim

09-50026-mg Doc 14745-7 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

u have any number se to identify the r? nuch is the claim?	No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:						
nuch is the claim?							
	charges required by Bankruptcy Rule 3001(c)(2)(A).						
s the basis of the ?	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.						
	Personal injury claim - ignition switch						
er part of the claim	☑ 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						
claim based on a	20 No						
	Yes. Amount necessary to cure any default as of the date of the petition. \$						
claim subject to a	20 No						
f setoff?	Yes. Identify the property:						
	claim based on a						

Official Form 410

Proof of Claim

page 2

the bacteria

09-50026-mg Doc 14745-7 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim	D No					
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority				
A claim may be partly priority and partly nonpriority. For example,	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$				
in some categories, the law timits the amount entitled to priority.	□ Up to \$2,850* 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after	er the date of adjustment.				

Part 3: Sign Below							
The person completing	Check the approp	riate box:					
this proof of claim must sign and date it.	I am the cred	am the creditor.					
FRBP 9011(b).	I am the cred	I am the creditor's attorney or authorized agent.					
If you file this claim	I am the trus	ee, or the debtor, or their authorized agent. Ba	nkruptcy Rule	e 3004.			
electronically, FRBP 5005(a)(2) authorizes courts	🔲 í am a guara	ntor, surety, endorser, or other codebtor. Bankr	ruptcy Rule 3	005.			
to establish local rules							
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> 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.						
A person who files a	amount of the cla	m, the creditor gave the debtor credit for any pa	ayments rece	eived toward the dept.			
fraudulent claim could be	I have examined the information in this Proof of Claim and have a reasonable belief that the information is true						
fined up to \$500,000, Imprisoned for up to 5	and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.						
3571.							
	Executed on date 09/19/2017						
	/s/ Lisa M Signature Print the name o	Norman Sistem Qo	ence this claim:	<u>n</u>			
	N	Lisa M. Norman					
	Name	First name Middle name		Last name			
	Title	Attorney					
	Company	Andrews Myers, PC					
		Identify the corporate servicer as the company if the authorized agent is a servicer,					
	Address	1885 St. James Place, 15th Floor					
		Number Street	тх	77056			
		Houston	State	ZIP Code			
		-					
	Contact phone	713-850-4200	Email	Lnorman@andrewsmyers.com			

Official Form 410

Proof of Claim

09-50026-mg Doc 14745-7 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	McDonough
First Name of Claimant	John
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Beaufort, SC
Accident Description	Client was rear ended by someone going more than 50 miles per hour which caused him to hit the vehicle in front of him
Injury Description	Head trauma, mouth and spine injured
Airbag Deployed	No
Date of Injury	03/03/1998
Year and Model of Vehicle	
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-8 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case:

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors Ca

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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.

Who is the current creditor?	Louella Martinez							
creator	Name of the current creditor (the person or entity to be paid for this claim)							
	Other names the creditor	used with the debt						
Has this claim been acquired from someone else?	2 No Ves. From whom?)						
Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman			Where should payments to the creditor be sent? (if different)			nt? (if	
Federal Rule of	Name	C-ATTN. L	Name					
Bankruptcy Procedure	1885 St. James P	laco 15th Ek		(Vallio				
(FRBP) 2002(g)	Number Street	ace, ISITER		Number	Street			
	Houston	тх	77056					
	City	State	ZIP Code	City	State		ZIP Code	
	Contact phone 713-85	0-4200		Contact phone				
	Contact email Lnorma	an@andrews	myers.com	Contact email				
	Uniform claim identifier for	r electronic payme	nts in chapter 13 (if you u	se one): 				
Does this claim amend one already filed?	☑ No □ Yes. Claim numbe	er on court claim	s registry (if known)		Filed on	MM / DD / Y		
Do you know if anyone else has filed a proof of claim for this claim?	V No Yes. Who made the	ne earlier filing?						

Official Form 410

Proof of Claim

page 1

EXHIBIT 1 - MARTINEZ

09-50026-mg Doc 14745-8 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

-

7.		☑ No □ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:					
	How much is the claim?	\$10011 quidatle Does this amount include interest or other charges?					
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).					
3.	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.					
		Personal injury claim - ignition switch					
	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: 					
		Book for portantian					
		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 					
	Is this claim based on a lease?	2 No					
		Yes. Amount necessary to cure any default as of the date of the petition.					
	is this claim subject to a right of setoff?	2 No					
1	right of secon r	Yes. Identify the property:					

Official Form 410

EXHIBIT 1 - MARTINEZ

09-50026-mg Doc 14745-8 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	Vo No Yes. Check one:	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 \$2,850* 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 \$12,850*) 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).	3
	Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$
	* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or aft	er the date of adjustment.

Part 3: Sign Below						
The person completing	Check the appro	priate box:				
this proof of claim must sign and date it. FRBP 9011(b).	□ I am the creditor. ☑ Lam the creditor's attorney or authorized agent					
	_	ditor's attorney or authorized agent.				
If you file this claim electronically, FRBP	-	stee, or the debtor, or their authorized a				
5005(a)(2) authorizes courts to establish local rules	🖵 iam a guar	antor, surety, endorser, or other codebto	r. Bankruptcy Rule	e 3005.		
specifying what a signature is.		I understand that an authorized signature on this <i>Proof of Claim</i> 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.				
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true				
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	I declare under p	I declare under penalty of perjury that the foregoing is true and correct.				
307 I.	Executed on date 09/19/2017					
	<u>/s/ Lisa M. Norman</u> Signature Print the name of the person who is completing and signing this claim:					
	Name	Lisa M. Norman First name Middle	name	Last name	-	
	Tille	Attorney				
	0	Andrews Myers, PC			—	
	Company	Identify the corporate servicer as the comp	ny if the authorized a	agent is a servicer.	-	
	Address 1885 St. James Place, 15th Floor					
		Number Street			_	
		Houston	тх	77056		
		City	State	e ZIP Code	_	
	Contact phone	713-850-4200	Emai	il Lnorman@andrewsmyers.com		

Official Form 410

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EXHIBIT 1 - MARTINEZ

09-50026-mg Doc 14745-8 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Martinez
First Name of Claimant	Louella
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Las Alamos, NM
Accident Description	Client was driving on the freeway when a man walked out in front of her. She avoided hitting him but hit an embankment of dirt and rolled her vehicle 4 times.
Injury Description	Had pins put in 4 of her fingers, all nerves severed in left hand
Airbag Deployed	No
Date of Injury	03/15/2008
Year and Model of Vehicle	* Pontiac Grand Prix
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	*
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-9 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case

Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Socuse, # time)

Debtor 1

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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.

. Who is the current creditor?	Melinda Lynch								
	Name of the current creditor (the person or entity to be paid for this clarm)								
	Other names the creditor used with the debtor								
Has this claim been acquired from someone else?	2 No Yes. From whom	?							
Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?			Where should payments to the creditor be sent? (if different)			e sent? (if		
Federal Rule of	Andrews Myers, PC - ATTN: Lisa M. Norman			Name					
Bankruptcy Procedure (FRBP) 2002(g)	1885 St. James Place, 15th Floor			14 GRI PC					
(1101) 2002(8)	Number Street	•		Number	Street				
	Houston	ТХ	77056						
	City	State	ZIP Code	City	Sta	ite	ZIP Code		
	Contact phone 713-850-4200			Contact phe	one		-		
	Contact email Lnorm	Contact em	ai		-				
	Uniform claim identifier fo	or electronic payme	nts in chapter 13 (if you u	se one):					
Does this claim amend one already filed?	2 No Yes, Claim numb	er on court claim	s registry (if known)		Filed on	MM / DD	1 4444		
Do you know if anyone else has filed a proof of claim for this claim?	2 No Yes Who made t	he earlier filing?							

Official Form 410

Proof of Claim

page 1

EXHIBIT 1 - LYNCH

09-50026-mg Doc 14745-9 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

Р	art 2: Give Informatio	n 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?	s Unliquidated. 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. Personal injury claim - ignition switch
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 vehice 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: Xanount of the claim that is secured: \$ (The sum of the secured and unsecured around in line 7.) Amount necessary to cure any default as of the date of the petition:
	is this claim based on a	Annual Interest Rate (when case was filed)% Fixed Variable Variable
10.	is this claim based on a lease?	V2 No Yes. Amount necessary to cure any default as of the date of the petition. \$
11.	is this claim subject to a right of setof?	Image: No Image: Property:
L		

Official Form 410

EXHIBIT 1 - LYNCH

09-50026-mg Doc 14745-9 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12.	is all or part of the claim entitled to priority under	₩ No Yes, Check one:	
11 U.S.C.	11 U.S.C. § 507(a)?		Amount entitled to priority
	A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
	nonpriority. For example, in some categories, the law limits the amount entitled to priority.	□ Up to \$2,850* 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or aft	er the date of adjustment.

Part 3: Sign Below								
The person completing	Check the approp	riate box:						
this proof of claim must sign and date it.	I am the cred	litor.						
FRBP 9011(b).	M am the cred	I am the creditor's attorney or authorized agent.						
If you file this claim	I am the trus	tee, or the debtor, or their authorized agent. Bankru	uptcy Rul	le 3004.				
electronically, FRBP 5005(a)(2) authorizes courts	📮 I am a guara	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
to establish local rules								
specifying what a signature is.		an authorized signature on this Proof of Claim serve						
A person who files a	amount of the cla	m, the creditor gave the debtor credit for any paym	ients rec	eived toward the debt.				
fraudulent claim could be		he information in this <i>Proof of Claim</i> and have a rea	asonable	e belief that the information is true				
fined up to \$500,000, imprisoned for up to 5	and correct.							
years, or both. 18 U.S.C. §§ 152, 157, and	l declare under pe	enalty of perjury that the foregoing is true and correc	ct.					
3571.	Executed on date	09/19/2017						
	Executed on date	MM / DD / YYYY						
	/s/Lisa M. Norman CliSa M. DORMAN Signature							
	Print the name o	f the person who is completing and signing this	s claim:					
	Name	Lisa M. Norman						
		First name Middle name		Last name				
	Title	Attorney						
	Company	Andrews Myers, PC						
		Identify the corporate servicer as the company if the auth	norized ag	ient is a servicer.				
		1885 St. James Place, 15th Floor						
	Address	Number Street						
		Houston	тх	77056				
		City	State	ZIP Code				
	Contact phone	713-850-4200	Email	Lnorman@andrewsmyers.com				

Official Form 410

Proof of Claim

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EXHIBIT 1 - LYNCH

09-50026-mg Doc 14745-9 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Lynch
First Name of Claimant	Melinda
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Plano, TX
Accident Description	Traveling on Legacy and Preston Meadow with husband and 3 kids, client was in passenger side front seat. Person ran a red light and hit the passenger side of vehicle causing it to spin and hit a fire hydrant on passenger side. Jaws of life to remove client from car.
Injury Description	Brain injury, spine injuries, multiple surgeries: Cervical Spine Fusion from C3- T2
Airbag Deployed	No
Date of Injury	11/24/2002
Year and Model of Vehicle	2002 Cadillac Deville DTS
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes, recover money for medical bills. Lawyer Lynn McGrew.
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-10 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Finite conformation to intendity the case

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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.

Who is the current creditor?	Shanga Johnson Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor							
Has this claim been acquired from someone else?	2 No Yes. From who	m?						
Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman Name 1885 St. James Place, 15th Floor			Where should payments to the creditor be sent? (if different) Name				
Federal Rule of								
Bankruptcy Procedure (FRBP) 2002(g)								
(FRDF) 2002(g)	Number Street	1 1000, 100111		Number Stre				
	Houston	тх	77056					
	City	State	ZIP Code	City	State	ZIP Cod		
	Contact phone 713-850-4200			Contact phone				
	Contact email Lnon	nan@andrewsi	myers.com	Contact email				
	Uniform claim identifier	for electronic paymer	nts in chapter 13 (if you u	ise one)				
Does this claim amend one already filed?	V No Yes. Claim num		s registry (if known)		Filed on	/ ****		
Do you know if anyone else has filed a proof of claim for this claim?	☑ No □ Yes. Who made	the earlier filing?			aanaa	name of services		

Proof of Claim

EXHIBIT 1 - JOHNSON

09-50026-mg Doc 14745-10 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

	on About the Claim as of the Date the Case Was Filed						
Do you have any number you use to identify the debtor?	Vo Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:						
How much is the claim?	Stuning-UNKDOWD Does this amount include interest or other charges?						
	Yes. Attach statement itemizing interest, fees. expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).						
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.						
	Personal injury claim - ignition switch						
is all or part of the claim							
secured?	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: \$						
	Amount necessary to cure any default as of the date of the petition: \$						
is this claim based on a	Amount necessary to cure any default as of the date of the petition: \$						
is this claim based on a lease?	Amount necessary to cure any default as of the date of the petition: \$						
lease? Is this claim subject to a	Amount necessary to cure any default as of the date of the petition: \$						
lease?	Amount necessary to cure any default as of the date of the petition: \$						
is this claim subject to a	Amount necessary to cure any default as of the date of the petition: \$						

Official Form 410

Proof of Claim

EXHIBIT 1 - JOHNSON

09-50026-mg Doc 14745-10 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim	Se No	
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly nonpriority. For example,	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ <u></u>
in some categories, the law limits the amount entitled to priority.	Up to \$2,850° 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after	ar the date of adjustment.

Ρ	art	3:	Sign	Belo

Part 3: Sign Below					· · · · _ ·		
The person completing	Check the approp	oriate box:					
this proof of claim must sign and date it.	I am the cre	ditor.					
FRBP 9011(b).	am the creditor's attorney or authorized agent.						
If you file this claim	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.						
electronically, FRBP 5005(a)(2) authorizes courts to establish local rules	A Long a superstant super-						
specifying what a signature is.						cknowledgment that when calculating the ed toward the debt.	
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined and correct.	the informatio	n in this Proof of (<i>Naim</i> and have a re	asonable b	elief that the information is true	
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	I declare under penalty of perjury that the foregoing is true and correct.						
3011.	Executed on date	07/21/201	17 YYYY				
	/s/ Lisa M. Norman glund Dolman						
	Print the name o	f the person	who is completii	ig and signing this	s claim:		
	Neme	Lisa M. N	orman				
		First name		Middle name		Last name	
	Title	Attomey				a a magnetic sector and an	
	Company	Andrews I					
		Identify the col	porate servicer as t	e company if the auth	iorized agent	is a servicer.	
	Address	1885 St. J	ames Place, 1	5th Floor			
		Houston			тх	77056	
		City		······································	State	ZIP Code	
	Contact phone	713-850-4	200	_	Email Li	orman@andrewsmyers.com	

Proof of Claim

EXHIBIT 1 - JOHNSON

09-50026-mg Doc 14745-10 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Johnson
First Name of Claimant	Shanga
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Vicksburg, Mississippi
Accident Description	Claimant was hit from behind.
Injury Description	Injuries to back and neck.
Airbag Deployed	No
Date of Injury	7/6/2009
Year and Model of Vehicle	2003 Chevy Malibu
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-11 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Filler, this information to identify the case

Debtor 1 Motors Liguidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Proof of Claim

04/16

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 C	laim							
	no is the current aditor?	Chas Grant							
CR	PORLOF 7	Name of the current creditor (the person or entity to be paid for this claim)							
		Other names the credito	or used with the debu						
	s this claim been	ZÍ No							
	quired from meone else?	Yes. From whom?							
an	nere should notices d payments to the aditor be sent?	Where should notices to the creditor be sent?		Where should payments to the creditor be sent? (if different)		oe sent? (if			
		Andrews Myers,	PC - ATTN: Li	isa M. Norman					
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name			Name				
		1885 St. James	Place, 15th Fk	oor					
		Number Street			Number	Street			
		Houston	TX	77056					
		City	State	ZIP Code	City	State	ZIP Code		
		Contact phone 713-8	50-4200		Contact phone	•	_		
		Contact email Lnorm	nan@andrews	myers.com	Contact email		_		
		Uniform claim identifier	for electronic payme	nts in chapter 13 (if you u	se one).				
	es this claim amend e already filed?	2 No Yes. Claim num	ber on court claim	s registry (if known)		Filed on MM / CC	1 -774Y		
els	you know if anyone e has filed a proof claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?						

Official Form 410

Proof of Claim

page 1

09-50026-mg Doc 14745-11 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

	The second s
Do you have any number you use to identify the debtor?	2 No Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
How much is the claim?	supliquidated Does this amount include interest or other charges?
	Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
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.
	Personal injury claim - ignition switch
is all or part of the claim	DÍ NO
secured?	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)%
Is this claim based on a lease?	RÍ No
	Yes. Amount necessary to cure any default as of the date of the petition. \$
Is this claim subject to a	DÍ No
right of setof?	Yes. identify the property:

Official Form 410

Proof of Claim

09-50026-mg Doc 14745-11 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12. Is all or part of the claim	BE No						
entitied to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority					
A claim may be partly priority and partly nonpriority. For example,	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$					
in some categories, the law limits the amount entitled to priority.	Up to \$2,850° 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after the subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the subject to adjustment on 4/01/19 and every 3 years after the subject to adjustment on 4/01/19 and every 3 years after the subject to adjustment on 4/01/19 and every 3 years after the subject to adjustment on 4/01/19 and every 3 years after the subject to adjustment on 4/01/19 and every 3 years after the subject to adjustment on adjustment on 4/01/19 and every 3 years after the subject to adjustment on adjustment of the subject to adjustment o	er the date of adjustment.					

The person completing this proof of claim must	Check the approp	viate box:					
sign and date it.	L am the crea	litor.					
FR8P 9011(b).	1 am the crea	litor's attorney or authorized ag	ent.				
If you file this claim	i am the trus	tee, or the debtor, or their auth	orized agent. Bankrug	ntcy Rule 3	3004,		
electronically, FRBP 5005(a)(2) authorizes courts to establish local rules	🗋 I am a guara	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.					
specifying what a signature is.	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.						
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.						
years, or both. 18 U.S.C. §§ 152, 157, and	l declare under p	enalty of perjury that the forego	ng is true and correc	t.			
3571.	Executed on date	09/19/2017 MM / DD / YYYY					
	/s/ Lisa M Signature Print the name of	Norman (h, Sa, Y) f the person who is completi	M . DORM	VQL) claim:	L		
		Lisa M. Norman					
	Name	First name	Middle name		Last name	-	
	Title	Attorney				_	
	Company	Andrews Myers, PC					
	Company	Identify the corporate servicer as I	he company if the autho	rized agent	is a servicer.	-	
	Address	1885 St. James Place,	15th Floor				
		Number Street				-	
		Houston		ТХ	77056		
		City		State	ZIP Code	-	
	Contact phone	713-850-4200		Email Lr	norman@andrewsmyers.com	_]	

Part 3: Si

09-50026-mg Doc 14745-11 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Grant
First Name of Claimant	Chas
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Reno, NV
Accident Description	Client was passenger, taking a potential car buyer on test drive, involved in 5 car pile up. Client was middle car in pile up.
Injury Description	20 cracked teeth, dislocated shoulder and hip, herniated disc.
Airbag Deployed	No
Date of Injury	08/26/2006
Year and Model of Vehicle	1996 Pontiac Grand Am
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	Yes. Client received compensation for accident and medical bills. Attorney Jonathan Whitehead
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-12 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case:					
Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors Co					
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the: Southern District of New York					
Case number 09-50026 (REG)					

Official Form 410 Proof of Claim

04/16

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.

•	Who is the current creditor?	Michael Gillis Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor					
	Has this claim been acquired from someone else?	20 No Yes. Fram whom?					
Where should notices and payments to the creditor be sent?		Where should notices to the creditor be sent? Andrews Myers, PC - ATTN: Lisa M. Norman		Where should payments to the creditor be sent? (if different)			
	Federal Rule of	Name			Name		
	Bankruptcy Procedure (FRBP) 2002(g)	1885 St. James Place, 15th Floor					
	(11(B))2002(g)	Number Stree			Number Street		
		Houston	ТХ	77056			
		City	State	ZIP Code	City	State	ZIP Coo
		Contact phone 713	-850-4200		Contact phone		
		Contact email Lno	rman@andrewsm	iyers.com	Contact email		
		Uniform claim identifi	er for electronic payment	s in chapter 13 (if you u:	se one): 		
	Does this claim amend	MO NO					
	one already filed?		mber on court claims	registry (if known)		Filed on	
						MM / D	D / YYYY
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ❑ Yes. Who mad	de the earlier filing?				

Official Form 410

Proof of Claim

page 1

EXHIBIT 1 - GILLIS

09-50026-mg Doc 14745-12 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

	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: 				
	How much is the claim?	S_Unliquidated at this time □ No				
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).				
.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.				
	claim?	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.				
		Personal injury claim - ignition switch, DOI: 10/23/07				
•	Is all or part of the claim					
	secured?	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:				
		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.)				
		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.)				
		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.)				
		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: \$				
		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: \$				
		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: \$				
		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: \$				
) .	Is this claim based on a	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: S Amount of the claim that is secured: Amount of the claim that is unsecured: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any defau				
).	Is this claim based on a lease?	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: S Amount of the claim that is secured: Amount of the claim that is unsecured: Amount of the claim that is unsecured: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of the date of the petition: Amount necessary to cure any default as of t				
).		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: \$				
	lease? Is this claim subject to a	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: S Amount of the claim that is secured: Amount of the claim that is unsecured: Amount of the claim that is unsecured: Amount of the claim that is unsecured: Amount necessary to cure any default as of the date of the petition: Annual Interest Rate (when case was filed)% Fixed Variable Verificate Amount necessary to cure any default as of the date of the petition: Verificate S				
	lease?	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: \$				

Official Form 410

EXHIBIT 1 - GILLIS

09-50026-mg Doc 14745-12 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

12.	Is all or part of the claim	MÍ No	
	entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
	A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
	nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$2,850* 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after	er 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.

12/12/2017 Executed on date MM / DD / YYYY

mannan

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

Name	Lisa M. Norman						
	First name	Middle name		Last name			
Title	Attorney						
Company	Andrews Myers, P	0					
	Identify the corporate service	cer as the company if the au	thorized agent	is a servicer.			
Address	1885 St. James Pla	ace, 15th Floor					
	Number Street						
	Houston		ТХ	77056			
	City		State	ZIP Code			
Contact phone	713-850-4200		Email Lr	orman@andrewsmyers.co	m		

Print

Save As...

Add Attachment

Official Form 410

Proof of Claim

page 3

EXHIBIT 1 - GILLIS

09-50026-mg Doc 14745-12 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Gillis
First Name of Claimant	Michael
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Southern Pines, North Carolina
Accident Description	Claimant was a driver when the ignition switch failed and he lost control of the vehicle and ran off the roadway and struck several trees. The vehicle then proceeded to roll.
Injury Description	Claimant suffered broken back, head injuries and neck injuries. His injuries necessitated surgery.
Airbag Deployed	No
Date of Injury	10/23/2007
Year and Model of Vehicle	2006 and Chevrolet Cobalt
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	N/A
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-13 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

F- Em this information to identify the ca

Motors Liquidation Company, et al. f/k/a General Motors General Motors

Debtor 2 (Spouse, # feing)

Debtor 1

United States Bankruptcy Court for the: Southern District of New York

Case number <u>09-50026 (RE</u>G)

Official Form 410 Proof of Claim

04/16

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, montgages, 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.

ľ	Part 1: Identify the C	laim					
1.	Who is the current creditor?			ntity to be paid for this cla	aim)		
2.	Has this claim been acquired from someone else?	 ☑ No ☑ Yes. From whom 	1?				1997
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure		Where should notic Andrews Myers, Name		r be sent?		payments to the creditor	be sent? (if
and a subscription of the second s	(FRBP) 2002(g)	1885 St. James Number Street Houston City Contact phone 713-8	TX State	2007 77056 ZIP Code	City	reet State	ZIP Code
an a		Contact email Lnorm	nan@andrewsi		Contact email		
			ior electronic payme	nts in chapter 13 (if you u:	se one):		
4.	Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	per on court claim:	s registry (if known)		Filed on MM / D) / YYYY
5.	Do you know if anyone else has filed a proof of claim for this claim?	21 No Yes. Who made	the earlier filing?				

Official Form 410

Proof of Claim

09-50026-mg Doc 14745-13 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

۶	art 2: Give Informatio	n About the Claim as of the Date the Case Was Filed
6.	Do you have any number you use to identify the debtor?	1 No Ves. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	 \$UDIQUIDED 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.
		Personal injury claim - ignition switch
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?	Image: Second state of the second state of the petition. \$
11.	Is this claim subject to a right of setoff?	Ves. Identify the property:

Official Form 410

1

09-50026-mg Doc 14745-13 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

is all or part of the claim	Red No	
11 U.S.C. § 507(a)?	Yes. Check one:	Amount entitled to priority
A claim may be partly priority and partly	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
in some categories, the law limits the amount entitled to priority.	Up to \$2,850* 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 \$12,850°) 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 4/01/19 and every 3 years after that for cases begun on or after	er the date of adjustment.
	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	entitied to priority under 11 U.S.C. § 507(a)? Yes. Check one: 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 \$2,850° 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, sataries, or commissions (up to \$12,850°) 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.

A 12.	@1	Balas
14 31		1.1.1.1.1.1

~	 	

The person completing	Che	eck the approp	viate box:				
this proof of claim must sign and date it.		I am the cred	itor.				
FRBP 9011(b).	T	J am the creditor's attorney or authorized agent.					
If you file this claim		I am the trus	ee, or the del	otor, or their autho	rized agent. Bankrup	otcy Ru	te 3004.
electronically, FRBP 5005(a)(2) authorizes courts to establish local rules	٦				codebtor. Bankruptcy		
specifying what a signature is.	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.						
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5		I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	l de	declare under penalty of perjury that the foregoing is true and correct.					
	Exe	cuted on date	09/19/201				
		S/LISA M. Signature It the name o		who is completin	umDOR	claim:	Q
	Nam	le	Lisa M. N	orman			
			First name		Middle name		Last name
	Title		Attorney			-	
	Com	ipany	Andrews I	Myers, PC			
		-	identify the co	porate servicer as th	e company if the autho	rized ag	ent is a servicer.
	Addı	255	1885 St. J	ames Place, 1	5th Floor		
			Houston	38661		тх	77056
			City				21P Code
			-			State	
	Cont	lact phone	<u>713-850-4</u>	200	-	Email	Lnorman@andrewsmyers.com

Proof of Claim

page 3

09-50026-mg Doc 14745-13 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Gentry
First Name of Claimant	Rodney
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Schoolcraft, MI
Accident Description	Client and son were driving when they hit black ice and slid into nearby trees.
Injury Description	Severe concussion, traumatic brain injury, non responsive at scene.
Airbag Deployed	No
Date of Injury	01/31/2008
Year and Model of Vehicle	2004 Cadillac CTS
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").
No Consent to Bankruptcy Court Adjudication	By virtue of filing this proof of claim, claimant does not consent to the jurisdiction of the Bankruptcy Court and does not waive the right to dispute the jurisdiction of the Bankruptcy Court to hear any proceeding, motion or other matter related to this claim or any other rights of claimant apart from this claim. Claimant hereby expressly does not consent to this claim being adjudicated in the Bankruptcy Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release any of claimant's rights against any other entity or person that may be liable for all or part of this claim.

09-50026-mg Doc 14745-14 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

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Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Scoure, if films)

United States Bankruptcy Court for the Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Official Form 410

Proof of Claim

04/16

page 1

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.

ŀ	Part 1: Identify the C	läim								
1.	Who is the current creditor?	Kathryn Ei	nders							
	Creakovr		Name of the current creditor (the person or entity to be paid for this claim)							
		Other names t	ne creditor used	I with the debts	ſ	-				
2.	Has this claim been acquired from someone else?	2 No 2 Yes. From whom?								
3.	Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Where should payr different) Andrews Myers, PC - ATTN: Lisa M. Norman		ald payments to the creditor be	sent? (if					
	Federal Rule of	Name	viyers, PC	ATTN. LE	sa w. Norman	Name				
8	Bankruptcy Procedure (FR8P) 2002(g)		ames Plac	e, 15th Flo	or	1440011403				
	(Number	Street			Number	Street			
		Houston		ТΧ	77056					
		City		State	ZIP Code	City	State	ZIP Code		
		Contact phone	713-850-4	200		Contact phone	•			
		Contact email	Lnorman@	andrewsr	nyers.com	Contact email				
		Uniform claim -	dentifier for ele	ctronic paymen	ts in chapter 13 (if you u	nse one) 				
4.	Does this claim amend one already filed?	SÍ No			<i></i>					
		U Yes. Cla	im number or	i court claims	i registry (if known)		Filed on MM / DO	1 1999		
5.	Do you know if anyone else has filed a proof of claim for this claim?	101 No 11 Yes. Wh	o made the e	arlier filing?						

EXHIBIT 1 - ENDERS

Proof of Claim

09-50026-mg Doc 14745-14 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

	art 2: Give Informatio		the Claim as of the Date the Ca	tse Was Filed	
•	Do you have any number you use to identify the debtor?		Last 4 digits of the debtor's account or	any number you use to ider	ntify the debtor:
	How much is the claim?	\$ <u>\\</u>	Nig -unknasn. Does	0	
				es. Attach statement itemizi charges required by Bar	ng interest, feas, expenses, or other kruptcy Rule 3001(c)(2)(A).
	What is the basis of the claim?		-		injury or wrongful death, or credit card.
			idacled copies of any documents suppl	•	
		Limit dis	closing information that is entitled to pri	ivacy, such as health care in	formation.
		Persor	al injury claim - ignition switch		
	is all or part of the claim	EŽÍ No			
	secured?		The claim is secured by a lien on prop	perty.	
			Nature of property:		
			Real estate. If the claim is secured	d by the debtor's principal re	sidence, file a Mortgage Proof of Claim
			Attachment (Official F	Form 410-A) with this Proof	
			Motor vehicle Other, Describe;		
			Basis for perfection:		
			Attach redacted copies of documents.		of perfection of a security interest (for or other document that shows the lien has
			Value of property:	\$	_
			Amount of the claim that is secured		
			Autority of the clean that is secured	1: \$	_
			Amount of the claim that is unsecu		 _{The sum of the secured and unsecured amounts should match the amount in line :
				red: S	amounts should match the amount in line
			Amount of the claim that is unsecu	red: S	amounts should match the amount in line
			Amount of the claim that is unsecu Amount necessary to cure any defa	red: S	amounts should match the amount in line
	s this claim based on a	21	Amount of the claim that is unsecur Amount necessary to cure any defa Annual Interest Rate (when case was Fixed	red: S	amounts should match the amount in line
	is this claim based on a lesse?	ĐÍ No	Amount of the claim that is unsecur Amount necessary to cure any defa Annual Interest Rate (when case was Fixed Variable	red: S suit as of the date of the pr s filed)%	amounts should match the amount in line :
			Amount of the claim that is unsecur Amount necessary to cure any defa Annual Interest Rate (when case was Fixed	red: S suit as of the date of the pr s filed)%	amounts should match the amount in line :
			Amount of the claim that is unsecur Amount necessary to cure any defa Annual Interest Rate (when case was Fixed Variable	red: S suit as of the date of the pr s filed)%	amounts should match the amount in line :

Official Form 410

Proof of Claim

EXHIBIT 1 - ENDERS

09-50026-mg Doc 14745-14 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pq 3 of 4

12. Is all or part of the claim titled 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.

Rấ 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 \$2,850° 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 \$12,850°) 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).	S
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 4/01/19 and every 3 years after that for cases begun on or aft	er 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 ctronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature ís.

A person who files a fraudulent claim could be fined up to \$600,000. imprisoned for up to 5 ers, 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 07/21/2017

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

Name	Lisa M. Norman		
	First name	Middle neme	Last name
Title	Attorney		
Company	Andrews Myers, PC		
	identify the corporate servicer as the	he company if the authorized ag	ent is a servicer.
Ackiress	1885 St. James Place, 1	5th Floor	
	Number Street		
	Houston	тх	77056
	City	State	ZIP Code
Contact phone	713-850-4200	Emeil	Lnorman@andrewsmyers.com

Official Form 410

Proof of Claim

page 3

EXHIBIT 1 - ENDERS

PROOF OF CLAIM SUMMARY

Last Name of Claimant	Endres
First Name of Claimant	Kathryn
Nature of Claim	Personal injuries arising out of motor vehicle accident
Accident Location	Laclede County, MO
Accident Description	The Claimant was a passenger in the car when the car all of a sudden
	jerked to the right causing the car to go up an embankment and hit a
Injury Description	The Claimant suffered abdominal contusions and a fracture of the
Alites Destand	first metacarpal.
Airbag Deployed	No
Date of Injury	9/25/2008
Year and Model of Vehicle	2004 Saturn Ion
Amount of Claim	To be determined (unliquidated)
Prior or Current Litigation	No
Jury Trial Demand	Claimant demands a jury trial, to the extent permitted by law, with
	respect to the adjudication of this claim. Pursuant to 28 U.S.C.
	§157(e), claimant does not consent to such jury trial being conducted
	in the United States Bankruptcy Court for the Southern District of
	Texas ("Bankruptcy Court").
No Consent to Bankruptcy	By virtue of filing this proof of claim, claimant does not consent to
Court Adjudication	the jurisdiction of the Bankruptcy Court and does not waive the right
Court Aujuneation	to dispute the jurisdiction of the Bankruptcy Court to hear any
	proceeding, motion or other matter related to this claim or any other
	rights of claimant apart from this claim. Claimant hereby expressly
	does not consent to this claim being adjudicated in the Bankruptcy
	Court.
Reservation of Rights	The filing of this proof of claim is not intended to waive or release
	any of claimant's rights against any other entity or person that may
	be liable for all or part of this claim.

09-50026-mg Doc 14745-15 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the

Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 1 Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

Official Form 410

Official Form 410

Proof of Claim

04/16

page 1

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.

F	art 1: Identify the C	laim					
1.	Who is the current creditor?	Sheryl El-cheikh					
		Name of the current crea	ditor (the person or e	ntity to be paid for this cl	aim)		
		Other names the credito	r used with the debto	r			
2.	Has this claim been acquired from someone else?	🗹 No 🖵 Yes From whon	n?				
3.	Where should notices and payments to the creditor be sent?	Where should notic	es to the creditor	be sent?	Where sho different)	uid payments to the creditor bo	sent? (if
		Andrews Myers,	PC - ATTN: Li	sa M. Norman			
	Federal Rule of Bankruptcy Procedure	Name			Name		
	(FRBP) 2002(g)	1885 St. James	Place, 15th Flo	or			
		Number Street	_		Number	Street	
		Houston	Тх	77056	**********		
		City	State	ZIP Code	City	State	ZIP Code
		Contact phone 713-8	50-4200		Contact phon	e	_
		Contact email Lnorm	nan@andrewsr	nyers.com	Contact email	ii	
		Uniform claim :dentifier (for electronic paymen	nts in chapter 13 (if you u	ise one): 		
4	Does this claim amend one already filed?	🗹 No 🗋 Yes Claim numi	ber on court claims	i registry (if known) _		Filed on	/ 1999
5	Do you know if anyone else has filed a proof of claim for this claim?	🗹 No 🗋 Yes Who made	the earlier filing?	<u></u>			

Proof of Claim

09-50026-mg Doc 14745-15 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

	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: 					
	How much is the claim?	SUNFACE - UNIC 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).					
3.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful dea Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001 Limit disclosing information that is entitled to privacy, such as health care information.	•				
		Personal injury claim - ignition switch					
	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 Mortga Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe: 	age Proof of Claim				
		Basis for perfection: Attach redacted copies of documents, if any, that show evidence of perfection of a secu example, a mortgage, lien, certificate of title, financing statement, or other document th been filed or recorded.)					
		Value of property: S					
		Amount of the claim that is secured: \$					
		Amount of the claim that is unsecured: \$(The sum of the se amounts should ma	cured and unsecured atch the amount in line				
		Amount necessary to cure any default as of the date of the petition: \$					
D.	is this claim based on a	Amount necessary to cure any default as of the date of the petition: \$ Annual interest Rate (when case was filed)%					
	ls this claim based on a lease?	Amount necessary to cure any default as of the date of the petition: \$ Annual Interest Rate (when case was filed)% Fixed Variable					

Proof of Claim

EXHIBIT 1 - EL-CHEIKH

09-50026-mg Doc 14745-15 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

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.

22 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 \$2,850* 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 \$12,850*) 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 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment

Part 3: Sign Bolow

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

If you file this claim electronically, FR8P 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.
- 1 am the creditor's attorney or authorized agent.
- D 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 08/10/2017

emon /s/ Lisa M. Norman ( M Signature

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

| Name    | Lisa M. Norman                                                                       |                   |    |           |  |  |  |  |
|---------|--------------------------------------------------------------------------------------|-------------------|----|-----------|--|--|--|--|
|         | First name                                                                           | Middle name       |    | Last name |  |  |  |  |
| Title   | Attorney - Andre                                                                     | ws Myers, PC      |    |           |  |  |  |  |
| Company |                                                                                      |                   |    |           |  |  |  |  |
|         | Identify the corporate servicer as the company if the authorized agent is a servicer |                   |    |           |  |  |  |  |
|         |                                                                                      |                   |    |           |  |  |  |  |
| Address | 1885 St. James                                                                       | Place, 15th Floor |    |           |  |  |  |  |
|         | Number Street                                                                        | t                 |    |           |  |  |  |  |
|         | Houston                                                                              | Т                 | (  | 77056     |  |  |  |  |
|         | City                                                                                 | Sta               | te | ZIP Code  |  |  |  |  |
|         |                                                                                      |                   |    |           |  |  |  |  |

#### **EXHIBIT 1 - EL-CHEIKH**

#### PROOF OF CLAIM SUMMARY

| Last Name of Claimant                          | El-cheikh (Annir as time of crash)                                                                                                                                                                                                                                                                                                                                                                                                                |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First Name of Claimant                         | Sheryl                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Nature of Claim                                | Personal injuries arising out of motor vehicle accident                                                                                                                                                                                                                                                                                                                                                                                           |
| Accident Location                              | Dearborn Heights, Michigan                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Accident Description                           | Claimant was hit from behind at a stop light which caused her to hit the car in front of her.                                                                                                                                                                                                                                                                                                                                                     |
| Injury Description                             | Injuries to shoulder and knees requiring knee and rotator cuff surgeries.                                                                                                                                                                                                                                                                                                                                                                         |
| Airbag Deployed                                | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Date of Injury                                 | 7/10/01                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Year and Model of Vehicle                      | 1999 Oldsmobile Alero                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Amount of Claim                                | To be determined (unliquidated)                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Prior or Current Litigation                    | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Jury Trial Demand                              | Claimant demands a jury trial, to the extent permitted by law, with<br>respect to the adjudication of this claim. Pursuant to 28 U.S.C.<br>§157(e), claimant does not consent to such jury trial being conducted<br>in the United States Bankruptcy Court for the Southern District of<br>Texas ("Bankruptcy Court").                                                                                                                             |
| No Consent to Bankruptcy<br>Court Adjudication | By virtue of filing this proof of claim, claimant does not consent to<br>the jurisdiction of the Bankruptcy Court and does not waive the right<br>to dispute the jurisdiction of the Bankruptcy Court to hear any<br>proceeding, motion or other matter related to this claim or any other<br>rights of claimant apart from this claim. Claimant hereby expressly<br>does not consent to this claim being adjudicated in the Bankruptcy<br>Court. |
| Reservation of Rights                          | The filing of this proof of claim is not intended to waive or release<br>any of claimant's rights against any other entity or person that may<br>be liable for all or part of this claim.                                                                                                                                                                                                                                                         |

## 09-50026-mg Doc 14745-16 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Debter 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the Southern District of New York

Case number 09-50026 (REG)

#### Official Form 410

### **Proof of Claim**

04/16

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.

| Who is the current<br>creditor?                                             | Ryan Dullen                                                                                                                           | creditor (the person or en  |                           |                                                               |           |         |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|---------------------------|---------------------------------------------------------------|-----------|---------|
|                                                                             |                                                                                                                                       | editor used with the debtor |                           | am)                                                           |           |         |
| Has this claim been<br>acquired from<br>someone else?                       | 2 No<br>Yes. From w                                                                                                                   | /hom?                       |                           |                                                               |           |         |
| Where should notices<br>and payments to the<br>creditor be sent?            | Where should notices to the creditor be sent?<br>Andrews Myers, PC - ATTN: Lisa M. Norman<br>Name<br>1885 St. James Place, 15th Floor |                             |                           | Where should payments to the creditor be sent? (if different) |           |         |
| Federal Rule of                                                             |                                                                                                                                       |                             |                           |                                                               |           |         |
| Bankruptcy Procedure<br>(FRBP) 2002(g)                                      |                                                                                                                                       |                             |                           |                                                               |           |         |
| (FRDF) 2002(9)                                                              | Number Street                                                                                                                         |                             | Number Street             |                                                               |           |         |
|                                                                             | Houston                                                                                                                               | тх                          | 77056                     |                                                               |           |         |
|                                                                             | City                                                                                                                                  | State                       | ZIP Code                  | City                                                          | State     | ZIP Cod |
|                                                                             | Contact phone 713                                                                                                                     | 3-850-4200                  |                           | Contact phone                                                 |           |         |
|                                                                             |                                                                                                                                       | orman@andrewsrr             | iyers.com                 | Contact email                                                 |           |         |
|                                                                             | Unform claim identi                                                                                                                   | fier for electronic payment | s in chapter 13 (if you u | ise one):                                                     |           |         |
| Does this claim amend<br>one already filed?                                 | SO NO                                                                                                                                 | umber on court claims       | registry (if known)       |                                                               | Filled on |         |
|                                                                             |                                                                                                                                       |                             |                           |                                                               | MM / DC   | i m     |
| Do you know if anyone<br>else has filed a proof<br>of claim for this claim? | 2<br>No<br>Yes. Who ma                                                                                                                | ade the earlier filing?     | ·····                     |                                                               |           |         |

**Proof of Claim** 

page 1

### **EXHIBIT 1 - DULLEN**

# 09-50026-mg Doc 14745-16 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

| F   | art 2: Give Informatio                                       | a About the Claim as of the Date the Case Was Filed                                                                                                                                                                    |
|-----|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6.  | Do you have any number<br>you use to identify the<br>debtor? | Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:                                                                                                                               |
| 7.  | How much is the claim?                                       | S_Unlig_Unknown Does this amount include interest or other charges?                                                                                                                                                    |
|     |                                                              | Yes. Attach statement itemizing interest, fees, expenses, or other<br>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.<br>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.<br>Personal injury claim - ignition switch                                                                                  |
|     |                                                              |                                                                                                                                                                                                                        |
| 9.  | is all or part of the claim<br>secured?                      | 2 No<br>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<br>Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle                                   |
|     |                                                              | Other. Describe:                                                                                                                                                                                                       |
|     |                                                              | Basis for perfection:<br>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<br>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 data of the petition: \$                                                                                                                                                |
|     |                                                              | Annual Interest Rate (when case was filed)%                                                                                                                                                                            |
|     |                                                              | C Fixed Variable                                                                                                                                                                                                       |
| 10. | is this claim based on a                                     | 2010 No                                                                                                                                                                                                                |
|     | lease?                                                       | Yes. Amount necessary to cure any default as of the date of the petition.                                                                                                                                              |
| 11  | is this claim subject to a                                   | Ra No                                                                                                                                                                                                                  |
|     | right of setoff?                                             | Yes. Identify the property: Yes. Identify the property:                                                                                                                                                                |
| 0   | fficial Form 410                                             | Proof of Claim page 2                                                                                                                                                                                                  |

## **EXHIBIT 1 - DULLEN**

09-50026-mg Doc 14745-16 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

| 12. Is all or part of the claim                                                                        | Se No                                                                                                                                                                                              |                             |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--|--|--|--|--|
| entitied to priority under<br>11 U.S.C. § 507(a)?                                                      | Yes. Check one:                                                                                                                                                                                    | Amount entitled to priority |  |  |  |  |  |
| A claim may be partly<br>priority and partly                                                           | Domestic support obligations (including alimony and child support) under<br>11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).                                                                                 | \$                          |  |  |  |  |  |
| nonpriority. For example,<br>in some categories, the<br>law limits the amount<br>entitled to priority. | Up to \$2,850* 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 \$12,850*) earned within 180 days before the<br>bankruptcy petition is filed or the debtor's business ends, whichever is earlier.<br>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 4/01/19 and every 3 years after that for cases begun on or after                                                                                            | er the date of adjustment.  |  |  |  |  |  |

| Part 3: Sign Below                                   |                                                                            |                                                                 |                                                   |  |  |  |
|------------------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------------|--|--|--|
| The person completing                                | Check the appro                                                            | priate box.                                                     |                                                   |  |  |  |
| this proof of claim must sign and date it.           | I am the creditor.                                                         |                                                                 |                                                   |  |  |  |
| FRBP 9011(b).                                        | I am the creditor's attorney or authorized agent.                          |                                                                 |                                                   |  |  |  |
| If you file this claim                               | I am the tru:                                                              | stee, or the debtor, or their authorized agent. Bankru          | ptcy Rule 3004.                                   |  |  |  |
| electronically, FRBP<br>5005(a)(2) authorizes courts | 🔲 í am a guar                                                              | antor, surety, endorser, or other codebtor. Bankruptc           | y Rule 3005.                                      |  |  |  |
| to establish local rules                             |                                                                            |                                                                 |                                                   |  |  |  |
| specifying what a signature is.                      | I understand that                                                          | an authorized signature on this Proof of Claim serve            | as as an acknowledgment that when calculating the |  |  |  |
| -                                                    | amount of the cla                                                          | im, the creditor gave the debtor credit for any payme           | ents received toward the debt.                    |  |  |  |
| A person who files a<br>fraudulent claim could be    | I have examined                                                            | the information in this Proof of Claim and have a rea           | sonable belief that the information is true       |  |  |  |
| fined up to \$500,000,                               | and correct.                                                               |                                                                 |                                                   |  |  |  |
| imprisoned for up to 5<br>years, or both.            |                                                                            |                                                                 |                                                   |  |  |  |
| 18 U.S.C. §§ 152, 157, and                           | I declare under penalty of perjury that the foregoing is true and correct. |                                                                 |                                                   |  |  |  |
| 3571.                                                | Executed on date                                                           | 07/21/2017                                                      |                                                   |  |  |  |
|                                                      | /s/ Lisa M<br>Signature                                                    | Norman glide Millorm                                            | an                                                |  |  |  |
|                                                      | Print the name                                                             | of the person who is completing and signing this                | claim:                                            |  |  |  |
|                                                      | Name                                                                       | Lisa M. Norman                                                  |                                                   |  |  |  |
|                                                      |                                                                            | First name Middle name                                          | Lest name                                         |  |  |  |
|                                                      | Title                                                                      | Attorney                                                        |                                                   |  |  |  |
|                                                      | Company                                                                    | Andrews Myers, PC                                               |                                                   |  |  |  |
|                                                      |                                                                            | Identify the corporate servicer as the company if the authority | prized agent is a servicer.                       |  |  |  |
|                                                      |                                                                            |                                                                 |                                                   |  |  |  |
|                                                      | Address                                                                    | 1885 St. James Place, 15th Floor                                |                                                   |  |  |  |
|                                                      |                                                                            | Number Street                                                   | TX 77056                                          |  |  |  |
|                                                      |                                                                            | Houston                                                         | TX         77056           State         ZiP Code |  |  |  |
|                                                      |                                                                            | City                                                            |                                                   |  |  |  |
|                                                      | Contact phone                                                              | 713-850-4200                                                    | Emeil Lnorman@andrewsmyers.com                    |  |  |  |

**Proof of Claim** 

## **EXHIBIT 1 - DULLEN**

# 09-50026-mg Doc 14745-16 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

#### PROOF OF CLAIM SUMMARY

| Last Name of Claimant                          | Dullen                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First Name of Claimant                         | Ryan                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Nature of Claim                                | Personal injuries arising out of motor vehicle accident                                                                                                                                                                                                                                                                                                                                                                                           |
| Accident Location                              | Lock Haven, PA                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Accident Description                           | Claimant was a driver tire blew and lost control of car hitting a tree.                                                                                                                                                                                                                                                                                                                                                                           |
| Injury Description                             | Back injuries, 4 broken ribs and laceration on top of the head                                                                                                                                                                                                                                                                                                                                                                                    |
| Airbag Deployed                                | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Date of Injury                                 | 2004                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Year and Model of Vehicle                      | 201 Pontiac Grand Am                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Amount of Claim                                | To be determined (unliquidated)                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Prior or Current Litigation                    | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Jury Trial Demand                              | Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").                                                                                                                                         |
| No Consent to Bankruptcy<br>Court Adjudication | By virtue of filing this proof of claim, claimant does not consent to<br>the jurisdiction of the Bankruptcy Court and does not waive the right<br>to dispute the jurisdiction of the Bankruptcy Court to hear any<br>proceeding, motion or other matter related to this claim or any other<br>rights of claimant apart from this claim. Claimant hereby expressly<br>does not consent to this claim being adjudicated in the Bankruptcy<br>Court. |
| Reservation of Rights                          | The filing of this proof of claim is not intended to waive or release<br>any of claimant's rights against any other entity or person that may<br>be liable for all or part of this claim.                                                                                                                                                                                                                                                         |

#### 09-50026-mg Doc 14745-17 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case:

Debtor 1 Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse, if filing)

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

#### Official Form 410

#### **Proof of Claim**

04/16

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.

| 1  | Part 1: Identify the C                                                                                      | laim                                                               |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                        |                        |                |
|----|-------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|------------------------|----------------|
| 1. | Who is the current creditor?                                                                                | Joann Donato<br>Name of the current cre<br>Other names the credito | •••                  | · · · · · · · · · · · · · · · · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                        |                        |                |
| 2. | Has this claim been<br>acquired from<br>someone else?                                                       | ☑ No<br>□ Yes. From whor                                           | n?                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                        |                        |                |
| 3. | Where should notices<br>and payments to the<br>creditor be sent?<br>Federal Rule of<br>Bankruptcy Procedure | Where should notic<br>Andrews Myers,<br>Name                       | PC - ATTN: L         | isa M. Norman                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Where should pay<br>different)<br>Name | yments to the creditor | r be sent? (if |
|    | (FRBP) 2002(g)                                                                                              | 1885 St. James Place, 15th Floor                                   |                      | Number Stree                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                        |                        |                |
|    |                                                                                                             | Houston                                                            | тх                   | 77056                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Number Silee                           | 1                      |                |
|    |                                                                                                             |                                                                    | State                | ZIP Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | City                                   | State                  | ZIP Code       |
|    |                                                                                                             | Contact phone 713-8<br>Contact email Lnorm                         |                      | myers.com                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Contact phone                          |                        |                |
|    |                                                                                                             | Uniform claim identifier                                           | for electronic payme | nts in chapter 13 (if you u                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ise one):                              |                        |                |
| 4. | Does this claim amend<br>one already filed?                                                                 | 2 No<br>Yes. Claim num                                             |                      | is registry (if known)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                        | Filed on               | / үүүү         |
| 5. | Do you know if anyone<br>else has filed a proof<br>of claim for this claim?                                 | 21 No<br>Yes, Who made                                             |                      | 999 - 197 - 198 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 199 - 1999 - 1999 - 199 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 199 |                                        |                        |                |

Official Form 410

**Proof of Claim** 

page 1

### **EXHIBIT 1 - DONATO**

# 09-50026-mg Doc 14745-17 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

| Part 2: Give Informatio                                                            | n About the Claim as of the Date the Case Was Filed                                                                                                                                                                                                                                                                                                             |
|------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ol> <li>Do you have any number<br/>you use to identify the<br/>debtor?</li> </ol> | V No<br>Ves. Last 4 digits of the debtor's account or any number you use to identify the debtor:                                                                                                                                                                                                                                                                |
| 7. How much is the claim?                                                          | studiguidaded. Does this amount include interest or other charges?                                                                                                                                                                                                                                                                                              |
| 8. What is the basis of the claim?                                                 | Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.<br>Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).<br>Limit disclosing information that is entitled to privacy, such as health care information.<br>Personal injury claim - ignition switch |
| 9. Is all or part of the claim<br>secured?                                         | <ul> <li>No</li> <li>Yes. The claim is secured by a lien on property.</li> <li>Nature of property:</li> <li>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.</li> <li>Motor vehicle</li> <li>Other. Describe:</li> </ul>                     |
|                                                                                    | Basis for perfection:<br>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: \$<br>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)%                                                                                                                                                                                                                                                                                                                     |
| 10. Is this claim based on a lease?                                                | V 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?                                    | V No Yes. Identify the property:                                                                                                                                                                                                                                                                                                                                |
| Official Form 410                                                                  | Proof of Claim page 2                                                                                                                                                                                                                                                                                                                                           |

## EXHIBIT 1 - DONATO

09-50026-mg Doc 14745-17 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 3 of 4

| 12. Is all or part of the claim<br>entitled to priority under                                    | € No<br>□ Yes, Check one:                                                                                                                                                                    | Amount entitled to priority |
|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 11 U.S.C. § 507(a)?<br>A claim may be partly<br>priority and partly<br>nonpriority. For example, | Domestic support obligations (including alimony and child support) under<br>11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).                                                                           | \$                          |
| in some categories, the<br>law limits the amount<br>entitled to priority.                        | Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for<br>personal, family, or household use. 11 U.S.C. § 507(a)(7).                                       | \$                          |
|                                                                                                  | Wages, salaries, or commissions (up to \$12,850°) 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.                                                                                                                              | s                           |
|                                                                                                  | * Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after                                                                                      | er the date of adjustment.  |

| Part 3: Sign Below                                            |       |                                         |                        |                          |                        |                      |                                                                       |
|---------------------------------------------------------------|-------|-----------------------------------------|------------------------|--------------------------|------------------------|----------------------|-----------------------------------------------------------------------|
| The person completing                                         | Che   | ck the approp                           | wiate box:             |                          |                        |                      |                                                                       |
| this proof of claim must sign and date it.                    |       | I am the cred                           | litor.                 |                          |                        |                      |                                                                       |
| FRBP 9011(b).                                                 | Z     | I am the cred                           | fitor's attorney       | or authorized ag         | ent.                   |                      |                                                                       |
| If you file this claim                                        |       | I am the trus                           | tee, or the deb        | tor, or their auth       | orized agent. Bankru   | ptcy Ru              | <i>ile 3004.</i>                                                      |
| electronically, FRBP<br>5005(a)(2) authorizes courts          |       | l am a guara                            | ntor, surety, er       | ndorser, or other        | codebtor. Bankrupte    | cy Rule              | 3005.                                                                 |
| to establish local rules                                      |       |                                         |                        |                          |                        |                      |                                                                       |
| specifying what a signature is.                               |       |                                         |                        |                          |                        |                      | n acknowledgment that when calculating the<br>served toward the debt. |
| A person who files a<br>fraudulent claim could be             |       | · · · · · · · · · · · · · · · · · ·     |                        | 1. 11.1. Due - 1 1.      | N-/                    |                      |                                                                       |
| fined up to \$500,000,<br>imprisoned for up to 5              |       | correct.                                | ine information        | In this Proof of (       | Jaim and nave a re-    | asonadi              | e belief that the information is true                                 |
| years, or both.<br>18 U.S.C. <b>§§</b> 152, 157, and<br>3571. | l dec | clare under p                           |                        | , c                      | ing is true and corre  | ct.                  |                                                                       |
|                                                               | Exec  | cuted on date                           | 09/19/201<br>MM / DD / |                          |                        |                      |                                                                       |
| F                                                             |       | S/Lisa M.<br>Signature<br>It the name o |                        | Thi S<br>who is completi | and signing this       | <u>E</u><br>s claim: | an                                                                    |
|                                                               | Nam   | e                                       | Lisa M. No             | orman                    |                        |                      |                                                                       |
|                                                               |       | -                                       | First name             |                          | Middle name            |                      | Last name                                                             |
|                                                               | Tille |                                         | Attorney               |                          |                        |                      |                                                                       |
|                                                               | Сот   | pany                                    | Andrews M              | /iyers, PC               |                        |                      |                                                                       |
|                                                               |       |                                         | Identify the con       | porate servicer as t     | he company if the auth | norized ag           | gent is a servicer.                                                   |
|                                                               | Addr  | <b>255</b>                              | 4                      | ames Place,              | 15th Floor             |                      |                                                                       |
|                                                               |       |                                         | Number                 | Street                   |                        | -                    | 77050                                                                 |
|                                                               |       |                                         | Houston                |                          |                        | TX                   | 77056                                                                 |
|                                                               |       |                                         | City                   |                          |                        | State                | ZIP Code                                                              |
|                                                               | Cont  | act phone                               | <u>713-850-4</u>       | 200                      |                        | Email                | Lnorman@andrewsmyers.com                                              |

Official Form 410

## **EXHIBIT 1 - DONATO**

09-50026-mg Doc 14745-17 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

#### PROOF OF CLAIM SUMMARY

| Last Name of Claimant                          | Donato                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First Name of Claimant                         | Joann                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Nature of Claim                                | Personal injuries arising out of motor vehicle accident                                                                                                                                                                                                                                                                                                                                                                                           |
| Accident Location                              | Suffolk, NY                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Accident Description                           | Other driver was distracted and ran a red light                                                                                                                                                                                                                                                                                                                                                                                                   |
| Injury Description                             | Neck and back injury that required surgery                                                                                                                                                                                                                                                                                                                                                                                                        |
| Airbag Deployed                                | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Date of Injury                                 | 07/18/2005                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Year and Model of Vehicle                      | 2004 Saturn Ion                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Amount of Claim                                | To be determined (unliquidated)                                                                                                                                                                                                                                                                                                                                                                                                                   |
| · · · · · · · · · · · · · · · · · · ·          |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Prior or Current Litigation                    | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Jury Trial Demand                              | Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted                                                                                                                                                                                                                                        |
|                                                | in the United States Bankruptcy Court for the Southern District of<br>Texas ("Bankruptcy Court").                                                                                                                                                                                                                                                                                                                                                 |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| No Consent to Bankruptcy<br>Court Adjudication | By virtue of filing this proof of claim, claimant does not consent to<br>the jurisdiction of the Bankruptcy Court and does not waive the right<br>to dispute the jurisdiction of the Bankruptcy Court to hear any<br>proceeding, motion or other matter related to this claim or any other<br>rights of claimant apart from this claim. Claimant hereby expressly<br>does not consent to this claim being adjudicated in the Bankruptcy<br>Court. |
| Reservation of Rights                          | The filing of this proof of claim is not intended to waive or release<br>any of claimant's rights against any other entity or person that may<br>be liable for all or part of this claim.                                                                                                                                                                                                                                                         |

## 09-50026-mg Doc 14745-18 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 1 of 4

Fill in this information to identify the case:

Motors Liquidation Company, et al. f/k/a General Motors G

Debtor 2 (Spouse, # filing)

Debtor 1

United States Bankruptcy Court for the: Southern District of New York

Case number 09-50026 (REG)

#### Official Form 410

#### **Proof of Claim**

04/16

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.

| 1. Who is the current<br>creditor?                                          | Bertha Brown                |                        |                                |                  |          |         |          |
|-----------------------------------------------------------------------------|-----------------------------|------------------------|--------------------------------|------------------|----------|---------|----------|
|                                                                             | Name of the current cred    | litor (the person or a | entity to be paid for this cla | aim)             |          |         |          |
|                                                                             | Other names the creditor    | r used with the debt   | or                             |                  |          |         |          |
| 2. Has this claim been<br>acquired from                                     | 2 No<br>Xes From whom       | 17                     |                                |                  |          |         |          |
| someone eise?                                                               |                             |                        |                                |                  |          |         |          |
| 3. Where should notices<br>and payments to the<br>creditor be sent?         |                             |                        | creditor b                     | <b>sent?</b> (if |          |         |          |
|                                                                             | Andrews Myers,              | PC - ATTN: Li          | isa M. Norman                  |                  |          |         |          |
| Federal Rule of Name Name Name                                              |                             |                        |                                |                  |          |         |          |
| (FRBP) 2002(g)                                                              | 1885 St. James F            | lace, Isin Fil         | por                            | Number           | Street   |         |          |
|                                                                             | Houston                     | тх                     | 77056                          | in an och        | Jucol    |         |          |
|                                                                             | Cíty                        | State                  | ZIP Code                       | City             | Stat     | le      | ZIP Code |
|                                                                             | Contact phone 713-8         | 50-4200                |                                | Contact phone    | e        |         | ~        |
|                                                                             | Contact email Lnorm         | an@andrews             | myers.com                      | Contact email    |          |         | -        |
|                                                                             | Uniform claim identifier fi | or electronic payme    | nts in chapter 13 (if you u    | se one):         |          |         |          |
| Does this claim amend<br>one already filed?                                 | ☑ No<br>□ Yes. Claim numb   | er on court claim      | s registry (if known)          |                  | Filed on | MM ( 30 |          |
|                                                                             |                             |                        |                                |                  |          |         |          |
| Do you know if anyone<br>else has filed a proof<br>of claim for this claim? | ☑ No<br>□ Yes. Who made t   | the earlier filing?    |                                |                  |          |         |          |

**Proof of Claim** 

# 09-50026-mg Doc 14745-18 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 2 of 4

| ۴   | art 2: Give Informatio                                       | n About the Claim as of the Date the Case Was Filed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|-----|--------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6.  | Do you have any number<br>you use to identify the<br>debtor? | V No<br>Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 7.  | How much is the claim?                                       | Support of the 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<br>claim?                           | Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.<br>Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).<br>Limit disclosing information that is entitled to privacy, such as health care information.<br>Personal injury claim - ignition switch                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| 9.  | Is all or part of the claim<br>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: S 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)% |
| 10. | Is this claim based on a<br>lease?                           | Image: Mo       Image: Second state of the petition       \$         Image: Model state of the petition       \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| 11. | Is this claim subject to a<br>right of setoff?               | No     Yes. Identify the property:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|     |                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |

Official Form 410

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09-50026-mg Doc 14745-18 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pq 3 of 4

| 12. | Is all or part of the claim<br>entitled to priority under                                                                                                                     | D Yes. Check one:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
|     | 11 U.S.C. § 507(a)?<br>A claim may be partly<br>priority and partly<br>nonpriority. For example,<br>in some categories, the<br>law limits the amount<br>entitled to priority. | <ul> <li>Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</li> <li>Up to \$2,850° of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Amount entitled to priority S S |
|     |                                                                                                                                                                               | Wages, salaries, or commissions (up to \$12,850°) earned within 180 days before the<br>bankruptcy petition is filed or the debtor's business ends, whichever is earlier.<br>11 U.S.C. § 507(a)(4).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | s                               |
|     |                                                                                                                                                                               | 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 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after<br>any subject to adjustment on adjustment of the subject to | er the date of adjustment.      |

| irt 3: | Sign Belo | w |
|--------|-----------|---|
|--------|-----------|---|

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

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

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h

3571.

| Check | the a | <b>200100</b> | riate t | юx: |
|-------|-------|---------------|---------|-----|

- 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 09/19/2017 MM / DD / YYYY

Dorman /s/ Lisa M. Norman zami Signature

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

| Name    | Lisa M. Norman                       |                          |    |           |  |
|---------|--------------------------------------|--------------------------|----|-----------|--|
|         | First name                           | Middle name              |    | Last name |  |
| Title   | Attorney                             |                          |    |           |  |
| Company | Andrews Myers, PC                    |                          |    |           |  |
|         | Identify the corporate servicer      | as are company if the so |    |           |  |
| Address | 1885 St. James Place                 |                          |    |           |  |
| Address | 2                                    |                          |    |           |  |
| Address | 1885 St. James Place                 |                          | тх | 77056     |  |
| Address | 1885 St. James Plac<br>Number Street |                          | -  | <u></u>   |  |

09-50026-mg Doc 14745-18 Filed 05/11/20 Entered 05/11/20 17:05:11 Exhibit Pg 4 of 4

#### PROOF OF CLAIM SUMMARY

| Last Name of Claimant                          | Brown                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First Name of Claimant                         | Bertha                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Nature of Claim                                | Personal injuries arising out of motor vehicle accident                                                                                                                                                                                                                                                                                                                                                                                           |
| Accident Location                              | Smith, TX                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Accident Description                           | 4 car accident- it was raining and sheets were slick, client rear ended car in front of her                                                                                                                                                                                                                                                                                                                                                       |
| Injury Description                             | 20 cracked teeth, dislocated shoulder and hip, herniated disc.                                                                                                                                                                                                                                                                                                                                                                                    |
| Airbag Deployed                                | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Date of Injury                                 | 04/17/2009                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Year and Model of Vehicle                      | 2004 Chevrolet Classic (Malibu)                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Amount of Claim                                | To be determined (unliquidated)                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Prior of Commond Little-                       | No                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Prior or Current Litigation                    | 210                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Jury Trial Demand                              | Claimant demands a jury trial, to the extent permitted by law, with respect to the adjudication of this claim. Pursuant to 28 U.S.C. §157(e), claimant does not consent to such jury trial being conducted in the United States Bankruptcy Court for the Southern District of Texas ("Bankruptcy Court").                                                                                                                                         |
| No Consent to Bankruptcy<br>Court Adjudication | By virtue of filing this proof of claim, claimant does not consent to<br>the jurisdiction of the Bankruptcy Court and does not waive the right<br>to dispute the jurisdiction of the Bankruptcy Court to hear any<br>proceeding, motion or other matter related to this claim or any other<br>rights of claimant apart from this claim. Claimant hereby expressly<br>does not consent to this claim being adjudicated in the Bankruptcy<br>Court. |
| Reservation of Rights                          | The filing of this proof of claim is not intended to waive or release<br>any of claimant's rights against any other entity or person that may<br>be liable for all or part of this claim.                                                                                                                                                                                                                                                         |