



PROOF OF CLAIM

(See attached for instructions)

IN THE MATTER OF THE CCAA PROCEEDINGS OF WESTPHALIA DEV. CORP. (the "APPLICANT")

Regarding the claim of _____ (referred
to in this form as (the "**Claimant**").
(name of Claimant)

All notices or correspondence regarding this claim to be forwarded to the Claimant at the following address:

Telephone Number: _____

Facsimile Number: _____

Attention (Contact Person): _____

Email Address: _____

(All future correspondence will be delivered to the designated email address unless the Claimant specifically requests that hardcopies be provided)

Please provide hardcopies of materials to the address above.

I, _____ (*name of the Claimant or representative of the Claimant*), of _____ (*City, Province or State*) do hereby certify that:

I am the Claimant;

OR

I am _____ (*state position/title*) of the Claimant.

I have knowledge of all the circumstances connected with the claim referred to in this form.

The Applicant was at January 14, 2025 and still is indebted to the Claimant in the sum of CDN\$ _____ (*insert CDN\$ value of claim*) as shown by the statement of account attached hereto and marked Schedule "A". Claims should not include the value of goods and/or services supplied, or interest accrued after January 14, 2025. If a Claimant's claim is to be reduced by deducting any counterclaims to which the CCAA Applicant is entitled and/or amounts associated with the return of equipment and/or assets by the CCAA Applicant, please specify.

The statement of account must specify the evidence in support of the claim including the date and location of the delivery of all services and materials. Any claim for interest must be supported by contractual documentation evidencing the entitlement to interest.

- A. UNSECURED CLAIM OF\$ _____. That in respect of this claim, the Claimant does not hold and has not held any assets as security.
- B. SECURED CLAIM OF\$ _____. That in respect of this claim, the Claimant holds assets valued at\$ ___ as security, particulars of which are as follows:

Give full particulars of the security, including the date on which the security was given and the value at which the Claimant assesses the security together with the basis of valuation, and attach a copy of the security documents as Schedule "B".



Corporate Finance & Restructuring

1610, 520 – 5th Ave. SW
Calgary, Alberta, T2P 3R7

Have you acquired this Claim by assignment?

No

Yes

(if yes, attach documents evidencing assignment)

(if yes) Full Legal Name of original creditor(s):

DATED this ____ day of _____, 2025.

Per:

Witness

Claimant Signature

Print name of Claimant:

If Claimant is other than an individual, print name and title of authorized signatory.

Signature: _____

Name: _____

Title: _____



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Restructuring**

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