

PROOF OF CLAIM

(Pursuant to the *Bankruptcy and Insolvency Act*)

IN THE MATTER OF THE BANKRUPTCY OF RASHIDA ABDULRASUL SAMJI,
SAMJI NOTARY CORPORATION AND SAMJI & ASSOC. HOLDINGS INC.
(collectively, the “**Samji Group**”)

Please read the “**Instructions for Completing Proof of Claim**” carefully prior to completing this Proof of Claim. Please print legibly.

- 1) The properly completed Proof of Claim must be delivered by ordinary mail, registered mail, courier, facsimile or personal delivery to Boale, Wood & Company Ltd. (the “**Trustee**”) at:

Boale, Wood & Company Ltd.
#1140 – 800 West Pender Street
Vancouver, BC V6C 2V6
Fax No.: (604) 605-3359

Attention : Regina Pinto

- 2) Full Legal Name of Creditor: _____ (the “Creditor”).

- 3) Full Mailing Address of the Creditor:
(All notices and correspondence regarding your Claim will be forwarded to this address or to the email address or facsimile address below if appropriate and applicable):

- 4) Telephone Number: _____

- 5) Email: _____

- 6) Fax Number: _____

7) Claim Details:

Check and complete the appropriate box:

I am a **Known Creditor** and **received** a Claims Package from the Trustee. I disagree with the Trustee's determination of my Claim as contained in the Claims Package. My Claim amount is \$ _____

I am an **Unknown Creditor** and **did not receive** a Claims Package from the Trustee. I am a Creditor of the Samji Group. My Claim amount is \$ _____.

THE UNDERSIGNED HEREBY CERTIFIES AS FOLLOWS:

- 1) I am a Creditor of the Samji Group.
- 2) I have knowledge of all the circumstances concerning the Claim hereafter referred to.
- 3) Attached as Schedules to this Proof of Claim are:
 - A. A Statement of Account detailing:
 - i. the Amounts Advanced by you to the Samji Group to invest in the Scheme; and
 - ii. any Amounts Received by you or paid to any third party on behalf of or for the benefit of you from the Samji Group.
 - B. All documents supporting the amounts shown in the Statement of Account.
 - C. Any other documents relevant to the Scheme.

DATED at _____, this _____ day of _____, 2014.

Per: _____
[Name of Creditor – please print]

Signature of Creditor

Witness

NOTE: All relevant documentation on which you rely in making your Claim must be attached to this Proof of Claim, as the validity of your Claim will be determined solely on this Proof of Claim and attachments thereto. If the claim is disallowed for any reason, and you file an appeal of that disallowance, the appeal will be heard as a true appeal and your ability to introduce fresh or new evidence in support of your claim will be limited accordingly.

Attach Schedules to Proof of Claim

**Schedules:
(to be attached to Proof of Claim)**

Schedule "A"

A Statement of Account detailing the Amounts Advanced by you to the Samji Group to invest in the Scheme, and any Amounts Received by you or paid to any third party on behalf of or for the benefit of you from the Samji Group (attach a separate sheet if necessary):

Schedule "B"

The following documents are attached and support the amounts shown in the Statement of Account:

Schedule "C"

The following documents are attached and are relevant to the Scheme:

INSTRUCTIONS FOR COMPLETING PROOF OF CLAIM

This checklist is provided to assist you in preparing a Proof of Claim form in a complete and accurate manner.

- **Delivery:** The properly completed Proof of Claim, together with the Schedules and accompanying documents, must be delivered to the Trustee by ordinary mail, registered mail, courier, facsimile or personal delivery to Boale, Wood & Company Ltd. (the “Trustee”) by the Claims Bar Date at:

Boale, Wood & Company Ltd.
#1140 – 800 West Pender Street
Vancouver, BC V6C 2V6
Fax No. (604) 605-3359

Attention : Regina Pinto

- **Name and Address:** Please ensure that you complete the full name and delivery address, including fax number and email address, if available, of the Creditor making the Claim, as all future notices and correspondence regarding your Claim will be forwarded to this address, or to the email address or facsimile address if appropriate.

If the Creditor operates under a different name or names, please indicate this as a Schedule to the Proof of Claim.

- **Claim Details:** You must be a Creditor of the Samji Group to complete this Proof of Claim.
 - You are a **Known Creditor** if you have received a Claims Package sent to you by Boale, Wood and Company Ltd. (the “Trustee”) setting out the Trustee’s determination of your claim.
 - You are an **Unknown Creditor** if you did not receive a Claims Package from the Trustee.
- **Attached Schedules:** The Proof of Claim is incomplete and may not be accepted unless:
 - a) You have included a Statement of Account detailing the Amounts Advanced by you to the Samji Group to invest in the Scheme, and any Amounts Received by you or paid to any third party on behalf of or for the benefit of you from the Samji Group; and
 - b) All documents supporting the amounts shown in the Statement of Account.

Please also attach:

- c) Any other documents relevant to the Scheme.
- **Signature:** The Proof of Claim must be signed and dated by you.
- **Disallowance:** The Trustee is entitled to disallow your Proof of Claim in whole or in part. If your Claim is disputed in whole or in part, the Trustee will send you a Notice of Disallowance along with particulars about how you may dispute the Notice of Disallowance.