Fill in this information to identify the case:					
Debtor	Tricida, Inc.	1			
United States Bankruptcy Court for the District of Delaware					
Case number	23-10024				

## Official Form 410

## **Proof of Claim**

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or 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.

Who is the current creditor?	Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor	Tullian		
Has this claim been acquired from someone else?	No Yes. From whom?			
3. Where should notices and payments to the	Where should notices to the creditor be sent?  Christian M. Julian	Where should payments to the creditor be sent? (if different)		
creditor be sent? Federal Rule of	Name 5400 LOS ROBLES DR. Number Street	Name  Number Street		
Bankruptcy Procedure (FRBP) 2002(g)	CARLSBAD, CA. 92008 City State ZIP Code	City	State :	. ZIP Co
RECEWED	U. S. A.  Country  Contact phone 760 889 - 3415	Country  Contact phone		
MAR 0 7 2023	Contact email Comjulliay a yshoo.com	Contact email		
DAN CARSON CONSINTANTS	Uniform claim identifier for electronic payments in chapter 13 (if you use	one):		
Does this claim     amend one already	No No		•	
filed?	Yes. Claim number on court claims registry (if known)		Filed on	DD / YYYY
5. Do you know if anyone else has filed	∑ No			,
a proof of claim for this claim?	Yes. Who made the earlier filing?			

Do you have any number	No			
you use to identify the debtor?	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:			
How much is the claim?	\$ 10,556.90 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).			
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.			
	Funds gaid for 1100 TCDA on 7/19/22			
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: \$  The sum of the congred and unaccured			
	Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amount should match the amount in line 7			
RECEIVED	Amount necessary to cure any default as of the date of the petition: \$			
MAR 0 7-2023	Annual Interest Rate (when case was filed)%			
KURTZAJAH CARSUH COHSILTA	Fixed  Variable			
). Is this claim based on a lease?	Yes. Amount necessary to cure any default as of the date of the petition.			
Is this claim subject to a right of setoff?	Ď No			

12. Is all or part of the claim entitled to priority under	No No	•			
11 U.S.C. § 507(a)?	Yes. Chec	ck all that apply:		Amount entitled to priority	
A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.		estic support obligations (including alimony and child $S.C. \S 507(a)(1)(A)$ or $(a)(1)(B)$ .	support) under	\$	
	Up to service	\$3,350* of deposits toward purchase, lease, or rences for personal, family, or household use. 11 U.S.C	tal of property or c. § 507(a)(7).	\$	
	days	es, salaries, or commissions (up to \$15,150*) earne before the bankruptcy petition is filed or the debtor's never is earlier. 11 U.S.C. § 507(a)(4).	d within 180 s business ends,	\$	
	☐ Taxes	s or penalties owed to governmental units. 11 U.S.C.	§ 507(a)(8).	\$	
	☐ Contr	ibutions to an employee benefit plan. 11 U.S.C. § 5	07(a)(5).	\$	
	Other	r. Specify subsection of 11 U.S.C. § 507(a)() that	applies.	\$	
	* Amounts	s are subject to adjustment on 4/01/25 and every 3 years after	er that for cases begur	on or after the date of adjustment.	
13. Is all or part of the claim	<b>⊠</b> No				
pursuant to 11 U.S.C. § 503(b)(9)?	davs befo	cate the amount of your claim arising from the value ore the date of commencement of the above case, in ary course of such Debtor's business. Attach docum	n which the goods	have been sold to the Debtor	
	\$				
Part 3: Sign Below				<del></del>	
The person completing this proof of claim must	Check the approp				
sign and date it. FRBP 9011(b).	I am the creditor.				
If you file this claim	I am the creditor's attorney or authorized agent.				
electronically, FRBP 5005(a)(2) authorizes courts	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
to establish local rules specifying what a signature	l am a guara	antor, surety, endorser, or other codebtor. Bankrupto	y Rule 3005.		
is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgement 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	I have examined the information in this <i>Proof of Claim</i> and have reasonable belief that the information is true and correct				
fined up to \$500,000, imprisoned for up to 5	I declare under penalty of perjury that the foregoing is true and correct.				
years, or both. 18 U.S.C. §§ 152, 157, and 3571.	Executed on date	3 3 2023 MM / DD / YYYY			
·	<u>Chist</u> Signature	ian Marcel Tulliay			
	Print the name of	of the person who is completing and signing this	claim:		
	Name	CHRISTIAN MARCEL First name Middle name	JU .	LLIAY	
	Title				
	Company	Identify the corporate servicer as the company if the author	ized agent is a senion	· · · · · · · · · · · · · · · · · · ·	
RECEIVED	A 11	5400 LOS ROBLES	zed agent is a service $\mathcal{DR}$ .		
MAR 0 7 2023	Address	Number Street	an.	108 1100	
IIMI O # 2020		CARLSBAD CA. State	ZIP Co	ode Country	
TZHANCARSON CONSULTANTS	Contact phone	760 889-3415	Email <i>C</i>	Mjulling a yahor	