Fill in this info						
Debtor	Imperial Pacific International	(CNMI),	LLC			
United States Ba	nkruptcy Court for the:	_ District of	Northern	Mari	ana	Island
Case number	24-00002	_	(State)			

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. 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 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. That date is on the notice of bankruptcy (Form 309) that you received.

P	Part 1: Identify the Claim					
1.	Who is the current creditor?	Wushin Corporation 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 payments to the creditor be sent? (if different)			
		Wushin Corporation P.O. Box 500440				
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Building 12760, Lower Base Drive Saipan, MP 96950, USA				
		Contact phone <u>6703227415</u>	Contact phone			
		Contact email wushin2@pticom.com	Contact email			
		Uniform claim identifier for electronic payments in chapter 13 (if you use o	one):			
4.	Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known)	Filed on			
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

6.	Do you have any number you use to identify the debtor?	No✓ Yes. Last 4 digits of the debto	r's account or any number you use to identify the debtor: 2760
7.	How much is the claim?	\$ <u>14557.40</u>	Does this amount include interest or other charges? ✓ No ✓ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Pankruptay Pula 2004(a)(2)(A)
3.	What is the basis of the claim?	Attach redacted copies of any doc	charges required by Bankruptcy Rule 3001(c)(2)(A). ned, lease, services performed, personal injury or wrongful death, or credit card. uments supporting the claim required by Bankruptcy Rule 3001(c). entitled to privacy, such as health care information. I Petroleum Gas
9.	Is all or part of the claim secured?	Claim Attachment Motor vehicle Other. Describe: Basis for perfection:	claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of</i> (Official Form 410-A) with this <i>Proof of Claim</i> .
			of documents, if any, that show evidence of perfection of a security interest (for ien, certificate of title, financing statement, or other document that shows the liended.)

✓ No

Yes. Identify the property:

Yes. Amount necessary to cure any default as of the date of the petition.

Official Form 410 Proof of Claim

10. Is this claim based on a

11. Is this claim subject to a right of setoff?

lease?

12. Is all or part of the claim	✓ No				
entitled to priority under 11 U.S.C. § 507(a)?	_	ck all that apply:	Amount entitled to priority		
A claim may be partly		estic support obligations (including alimony and child support) under			
priority and partly nonpriority. For example,		S.C. § 507(a)(1)(A) or (a)(1)(B).	\$		
in some categories, the law limits the amount entitled to priority.		\$3,350* of deposits toward purchase, lease, or rental of property rvices for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$		
5	days	es, salaries, or commissions (up to \$15,150*) earned within 180 before the bankruptcy petition is filed or the debtor's business ends never is earlier. 11 U.S.C. § 507(a)(4).	\$		
	☐ Taxe	s or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$		
	Cont	ributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$		
	Othe	r. Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$		
	* Amounts	are subject to adjustment on 4/01/25 and every 3 years after that for cases begu	n on or after the date of adjustment.		
Part 3: Sign Below					
The person completing this proof of claim must	Check the approp	priate box:			
sign and date it.	I am the creditor.				
FRBP 9011(b). 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 is.	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.				
A person who files a fraudulent claim could be fined up to \$500,000,	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.				
imprisoned for up to 5 years, or both.	I have examined the information in this <i>Proof of Claim</i> and have reasonable belief that the information is true and correct.				
18 U.S.C. §§ 152, 157, and 3571.	I declare under penalty of perjury that the foregoing is true and correct.				
	Executed on date 10/27/2024 MM / DD / YYYY				
		WWW 7 DD 7 TTT			
	/s/Enoch S L Signature	im			
	Print the name of the person who is completing and signing this claim:				
	Name	Enoch S Lim			
		First name Middle name Las	t name		
	Title	Corporate Secretary			
	Company	Wushin Corporation Identify the corporate servicer as the company if the authorized agent is a service	er.		
		. , , , , , , , , , , , , , , , , , , ,			
	Address				
	Contact phone	Email			

Official Form 410 **Proof of Claim**