Fill in this information to identify the case:		
Debtor	Medley LLC	
United States Bankruptcy Court for the:		District of Delaware (State)
Case number	21-10526	<u> </u>

Official Form 410

Proof of Claim 04/19

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	art 1: Identify the Clair	n	
1.	Who is the current creditor?	Prager Metis CPAs LLC 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? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? Prager Metis CPAs LLC Joseph Fox, General Counsel 14 Penn Plaza 18th Floor New York, NY 10122, United States Contact phone 2128228284 Contact email jfox@pragermetis.com	Where should payments to the creditor be sent? (if different) Contact phone Contact email
4.	Does this claim amend one already filed?	Uniform claim identifier for electronic payments in chapter 13 (if you use of the control of the	<u></u>
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 debtor's account or any number you use to identify the debtor: 2619		
7.	How much is the claim?	\$ 900.00 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. Accounting Services Performed		
9.	Is all or part of the claim secured?	Yes. The claim is secured by a lien on property. Nature or property: Real estate: If the claim is secured by the debtor's principle 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: S		

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

12. Is all or part of the claim	№ No		
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Chec	k 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	☐ Dome	estic support obligations (including alimony and child support) u S.C. \S 507(a)(1)(A) or (a)(1)(B).	nder
		\$3,025* of deposits toward purchase, lease, or rental of propvices for personal, family, or household use. 11 U.S.C. § 507	
entitled to priority.	days	es, salaries, or commissions (up to \$13,650*) earned within 1 before the bankruptcy petition is filed or the debtor's business ever is earlier. 11 U.S.C. § 507(a)(4).	80 s 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. § 507(a)(5).	\$
	Other	. Specify subsection of 11 U.S.C. § 507(a)() that applies.	\$
	* Amounts	are subject to adjustment on 4/01/22 and every 3 years after that for case	es begun on or after the date of adjustment.
13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?	days befor	ate the amount of your claim arising from the value of any go re the date of commencement of the above case, in which th ry course of such Debtor's business. Attach documentation s	e goods have been sold to the Debtor in
Part 3: Sign Below			
to establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$500,000,		litor's attorney or authorized agent. tee, or the debtor, or their authorized agent. Bankruptcy Rule 3 ntor, surety, endorser, or other codebtor. Bankruptcy Rule 300 an authorized signature on this <i>Proof of Claim</i> serves as an acclaim, the creditor gave the debtor credit for any payments receive information in this <i>Proof of Claim</i> and have reasonable belief analty of perjury that the foregoing is true and correct. 84/19/2021 MM / DD / YYYYY	5. knowledgement that when calculating eived toward the debt.
	ŭ	f the person who is completing and signing this claim:	
	Name	Joseph Fox	
		First name Middle name	Last name
	Title	General Counsel	
	Company	<u>Prager Metis CPAs LLC</u> Identify the corporate servicer as the company if the authorized agent is	a servicer.
	Address		
	Contact phone	Em	ail



Official Form 410 Proof of Claim

KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877) 634-7166 | International 001-310-823-9000

Debtor:		
21-10526 - Medley LLC		
District:		
District of Delaware		
Creditor:	Has Supporting Doc	umentation:
Prager Metis CPAs LLC	Yes, supporting	g documentation successfully uploaded
Joseph Fox, General Counsel	Related Document S	tatement:
14 Penn Plaza		
18th Floor	Has Related Claim:	
New York, NY, 10122	Yes	_
United States	Related Claim Filed I	Зу:
Phone:	Filing Party:	
2128228284	Authorized age	ent
Phone 2:		
Fax:		
Email:		
ifox@pragermetis.com		
Other Names Used with Debtor:	Amends Claim:	
	No	
	Acquired Claim:	
	No	
Basis of Claim:	Last 4 Digits:	Uniform Claim Identifier:
Accounting Services Performed	Yes - 2619	
Total Amount of Claim:	Includes Interest or 0	Charges:
900.00	No	
Has Priority Claim:	Priority Under:	
No		
Has Secured Claim:	Nature of Secured A	mount:
No	Value of Property:	
Amount of 503(b)(9):	Annual Interest Rate:	
No	Auraaraa Amaunti	
Based on Lease:	Arrearage Amount:	
No	Basis for Perfection:	
Subject to Right of Setoff:	Amount Unsecured:	
No		
Submitted By:		
Joseph Fox on 19-Apr-2021 4:04:58 p.m. Eastern Time		
Title:		
General Counsel		
Company:		
Prager Metis CPAs LLC		



MEDLEY LLC C/O ROBERT VEEREN 280 PARK AVENUE 6TH FLOOR NEW YORK, NY 10017 Date: 2/16/2021 Invoice Number: 70905

Client: PM102619.008

FOR PROFESSIONAL SERVICES RENDERED

Preparation of 2020 Form 1096/1099's, including electronic filing.

Invoice Amount Due: \$900.00

PAYMENT DUE UPON PRESENTATION

Finance charge of 1.5% per month will be charged on past due accounts over 30 days

Remittance Address: 100 Sunnyside Blvd Ext Suite 200 Woodbury NY 11797

PLEASE REMIT THIS PORTION WITH PAYMENT OR

LOG ONTO https://www.pragermetis.com TO PAY YOUR BILL ONLINE

We accept Cryptocurrency Payments. Please visit our website for more information.

Client ID: PM102619.008	Amount Enclosed: \$ Invoice #:
VISA MASTER AMERICAN	ACH Paument
Card Type:	Routing #:
Card #:	Account #:
Exp Date: CVV:	Date: