

Fill in this information to identify the case:

Debtor Orexigen Therapeutics, Inc.

United States Bankruptcy Court for the: _____ District of Delaware
(State)

Case number 18-10518

Official Form 410
Proof of Claim

04/16

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.

Part 1: Identify the Claim

1. **Who is the current creditor?** Facebook, Inc.
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?	Where should payments to the creditor be sent? (if different)
See summary page	Facebook, Inc. Hossain Mostaghim 1601 Willow Road Menlo Park, CA 94025
Contact phone <u>650-637-0600</u>	Contact phone <u>650-543-4800</u>
Contact email <u>david@msllp.com</u>	Contact email <u>hossainm@fb.com</u>

(see summary page for notice party information)
Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. **Does this claim amend one already filed?** No
 Yes. Claim number on court claims registry (if known) _____ Filed on _____
MM / DD / YYYY

5. **Do you know if anyone else has filed a proof of claim for this claim?** No
 Yes. Who made the earlier filing? _____



Part 2: Give Information About the Claim as of the Date the Case Was Filed

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: 1961 ____

7. How much is the claim? \$ 659,278.21. 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.
services performed

9. Is all or part of the claim secured? No
 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: \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.)
Amount necessary to cure any default as of the date of the petition: \$ _____
Annual Interest Rate (when case was filed) _____ %
 Fixed
 Variable

10. Is this claim based on a lease? No
 Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? No
 Yes. Identify the property: _____



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

- No
- Yes. Check all that apply:

- | | Amount entitled to priority |
|---|-----------------------------|
| <input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). | \$ _____ |
| <input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). | \$ _____ |
| <input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). | \$ _____ |
| <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). | \$ _____ |
| <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). | \$ _____ |
| <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies. | \$ _____ |

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases 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)?

- No
- Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ _____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* 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.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 05/03/2018
MM / DD / YYYY

/s/Elizabeth M. Kurr
Signature

Print the name of the person who is completing and signing this claim:

Name Elizabeth M. Kurr
First name Middle name Last name

Title Attorney

Company McMahon Serepca LLP
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 985 Industrial Road, Suite 201, San Carlos, CA, 94070, United States

Contact phone 6506370600 Email elizabeth@msllp.com



KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 830-4646 | International (310) 751-2641

Debtor: 18-10518 - Orexigen Therapeutics, Inc.				
District: District of Delaware				
Creditor: Facebook, Inc. Attn: David Serepca, Esq., McMahon Serepca LLP 985 Industrial Road, Suite 201 San Carlos, CA, 94070 United States Phone: 650-637-0600 Phone 2: Fax: Email: david@mllp.com	Has Supporting Documentation: Yes, supporting documentation successfully uploaded			
	Related Document Statement:			
	Has Related Claim: No			
	Related Claim Filed By:			
Filing Party: Authorized agent				
Disbursement/Notice Parties: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> Facebook, Inc. Hossain Mostaghim 1601 Willow Road Menlo Park, CA, 94025 Phone: 650-543-4800 Phone 2: Fax: E-mail: hossainm@fb.com DISBURSEMENT ADDRESS </td> <td style="width: 50%; border: none;"> Facebook, Inc. McMahon Serepca LLP, Attention Elizabeth Kurr 985 Industrial Road, Suite 201 San Carlos, CA, 94070 United States Phone: 6506370600 Phone 2: Fax: E-mail: elizabeth@mllp.com </td> </tr> </table>			Facebook, Inc. Hossain Mostaghim 1601 Willow Road Menlo Park, CA, 94025 Phone: 650-543-4800 Phone 2: Fax: E-mail: hossainm@fb.com DISBURSEMENT ADDRESS	Facebook, Inc. McMahon Serepca LLP, Attention Elizabeth Kurr 985 Industrial Road, Suite 201 San Carlos, CA, 94070 United States Phone: 6506370600 Phone 2: Fax: E-mail: elizabeth@mllp.com
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Other Names Used with Debtor:	Amends Claim: No			
	Acquired Claim: No			
Basis of Claim: services performed	Last 4 Digits: Yes - 1961	Uniform Claim Identifier:		
Total Amount of Claim: 659,278.21	Includes Interest or Charges: No			
Has Priority Claim: No	Priority Under:			
Has Secured Claim: No	Nature of Secured Amount:			
Amount of 503(b)(9): No	Value of Property:			
Based on Lease: No	Annual Interest Rate:			
Subject to Right of Setoff: No	Arrearage Amount:			
	Basis for Perfection:			
	Amount Unsecured:			
Submitted By: Elizabeth M. Kurr on 03-May-2018 6:43:27 p.m. Eastern Time Title: Attorney Company: McMahon Serepca LLP				

Optional Signature Address:

Elizabeth M. Kurr
985 Industrial Road, Suite 201

San Carlos, CA, 94070
United States

Telephone Number:
6506370600

Email:
elizabeth@mllp.com

**Facebook, Inc. - Statement of Account
(for services rendered before 3/12/18)**

Customer Account	Customer Name	Sales Invoice Number	Payment Terms	Transaction Date	Payment Due Date	Billing Period	Entered Currency Code	Total Outstanding (USD)
24701961	Orexigen Therapeutics, Inc	23004240	NET 30	2/2/2018	3/4/2018	Jan-18	USD	\$ 305,795.70
24701961	Orexigen Therapeutics, Inc	23023809	NET 30	3/2/2018	4/1/2018	Feb-18	USD	\$ 242,916.69
24701961	Orexigen Therapeutics, Inc	23039815	NET 30	4/2/2018	5/2/2018	Mar-18	USD	\$ 110,565.82 *
Total Outstanding								\$ 659,278.21

*This amount is the pre-petition amount of fees for services rendered in March 2018.