

Fill in this information to identify the case:

Debtor Pareteum Corporation

United States Bankruptcy Court for the: Southern District of New York
(State)

Case number 22-10615

**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.

Part 1: Identify the Claim

1. Who is the current creditor?	<u>County of Santa Clara Department of Tax and Collections</u> <small>Name of the current creditor (the person or entity to be paid for this claim)</small>	
	Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? See summary page	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Contact phone <u>4088087962</u>	Contact phone _____
	Contact email <u>See summary page</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ <small>MM / DD / YYYY</small>	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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: _____

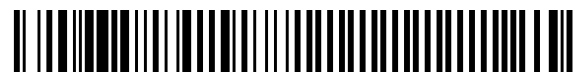
7. How much is the claim? \$ 13,210.88. Does this amount include interest or other charges?
 No
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

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.
Business Personal Property Tax

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: Certificate of Tax Lien
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: \$13,210.88
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: \$13,210.88
Annual Interest Rate (when case was filed) 18 %
 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)?

- No
 Yes. Check 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.

- Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____
- Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____
- Wages, salaries, or commissions (up to \$15,150*) 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). \$ _____
- Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____
- Contributions 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 4/01/25 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 10/05/2022
MM / DD / YYYY

/s/Pablo Gauna
 Signature

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

Name Pablo Gauna
First name Middle name Last name

Title Supervising Account Clerk

Company County of Santa Clara Department of Tax and Collections
 Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____

Contact phone _____ Email _____



KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 201-2205 | International (310) 751-1839

Debtor: 22-10615 - Pareteum Corporation District: Southern District of New York, New York Division		
Creditor: County of Santa Clara Department of Tax and Collections 852 North First Street San Jose, CA, 95112 Phone: 4088087962 Phone 2: Fax: Email: dtac-collections-unsecured-unit@fin.sccgov.org	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party: Authorized agent	
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: Business Personal Property Tax	Last 4 Digits: No	Uniform Claim Identifier:
Total Amount of Claim: 13,210.88	Includes Interest or Charges: Yes	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: Yes: 13,210.88 Amount of 503(b)(9): No Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: 18%, Fixed Arrearage Amount: 13,210.88 Basis for Perfection: Certificate of Tax Lien Amount Unsecured:	
Submitted By: Pablo Gauna on 05-Oct-2022 5:13:23 p.m. Eastern Time Title: Supervising Account Clerk Company: County of Santa Clara Department of Tax and Collections		

Fill in this information to identify the case:

Debtor 1 _____
Debtor 2 _____
(Spouse, if filing)
United States Bankruptcy Court for the: _____ District of _____
Case number _____

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 of 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?	
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?	<input type="checkbox"/> No <input type="checkbox"/> 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)
Name _____	Name _____
Number _____ Street _____	Number _____ Street _____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____
Contact phone _____	Contact phone _____
Contact email <u>dtac-collections-unsecured-unit@fin.sccgov.org</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (if you use one): -----	
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input type="checkbox"/> 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?	<input type="checkbox"/> No <input type="checkbox"/> 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: ____ _

7. **How much is the claim?** \$_____. **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.

9. **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: \$_____

Amount of the claim that is unsecured: \$_____ (The sum of the secured and unsecured amounts 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)?

No

Yes. Check one:

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Up to \$3,025* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

Wages, salaries, or commissions (up to \$13,650*) 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).

Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

Other. Specify subsection of 11 U.S.C. § 507(a)() that applies.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/22 and every 3 years after that for cases begun on or after the date of adjustment.

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 acknowledgment 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 a 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 _____
MM / DD / YYYY

Pablo Jauna
Signature

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

Name _____
First name Middle name Last name

Title _____

Company _____
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____
Number Street

City State ZIP Code

Contact phone _____ Email dtac-collections-unsecured-unit@fin.sccgov.org

**COUNTY OF SANTA CLARA
DEPARTMENT OF TAX AND COLLECTIONS**

24324154

Regina Alcomendras
Santa Clara County - Clerk-Recorder
11/07/2019 08:00 AM

COUNTY GOVERNMENT CENTER
EAST WING 6TH FLOOR
70 WEST HEDDING STREET
SAN JOSE, CALIFORNIA 95110-1767
PHONE: (408) 808-7900

Titles: 1 Pages: 1
Fees: \$0.00
Tax: \$0
Total: \$0.00

WHEN RECORDED MAIL TO:

**IPASS INC
C/O ATTN TAX DEPT
3800 BRIDGE PY
REDWOOD SHORES CA 94065**

THIS IS TO NOTIFY YOU THAT A TAX LIEN HAS BEEN FILED WITH RESPECT TO UNSECURED PROPERTY.

CERTIFICATE OF TAX LIEN

THE DEPARTMENT OF TAX AND COLLECTIONS OF THE COUNTY OF SANTA CLARA, STATE OF CALIFORNIA, IN COMPLIANCE WITH THE PROVISIONS OF SECTION 2191.3 OR 2191.4 OF THE REVENUE AND TAXATION CODE, DOES HEREBY CERTIFY THAT THERE ARE ON RECORD IN THE OFFICE DELINQUENT UNSECURED PROPERTY TAXES WHICH WERE DULY ASSESSED, COMPUTED AND LEVIED TOGETHER WITH PENALTIES PRESCRIBED BY LAW FOR THE YEARS AND IN THE AMOUNTS SET FORTH BELOW. IN ADDITION, FURTHER PENALTIES WILL ACCRUE ON SAID TAXES AS PRESCRIBED BY LAW.

ASSESSEE AND ADDRESS	YEAR/ASSESSMENT NO.	AMOUNT*
IPASS INC	19-020972-6	\$3,084.64
3800 BRIDGE PY REDWOOD SHORES CA 94065	360289-0004-5	08/19

FROM THE TIME OF RECORDATION OF THIS CERTIFICATE, FOR A PERIOD OF TEN (10) YEARS OR ANY EXTENSION THEREOF, THE AMOUNT REQUIRED TO BE PAID AS SHOWN HEREIN TOGETHER WITH ALL ACCRUED INTEREST, PENALTIES AND COSTS THEREON WILL CONSTITUTE A LIEN UPON ALL REAL AND PERSONAL PROPERTY NOW OWNED OR HEREAFTER ACQUIRED BY THE ABOVE NAMED ASSESSEE WITHIN THE COUNTY OF SANTA CLARA.

A LIEN IN THE AMOUNT SHOWN ABOVE HAS BEEN RECORDED IN THE OFFICE OF THE SANTA CLARA COUNTY RECORDER. THIS COPY OF THE RECORDED LIEN IS PROVIDED TO YOU PURSUANT TO GOVERNMENT CODE SECTION 27297.5. TAXES, PENALTIES AND ANY COSTS MUST BE PAID IN FULL TO THE DEPARTMENT OF TAX AND COLLECTIONS TO RELEASE THIS LIEN. UPON FULL PAYMENT A RELEASE OF LIEN FORM WILL BE SENT TO YOU WHICH MUST BE RECORDED WITH THE COUNTY RECORDER TO CLEAR THIS LIEN FROM THE RECORDER'S RECORDS.

*** THIS AMOUNT MAY HAVE INCREASED DUE TO THE ADDITION OF PENALTIES. PLEASE CALL (408) 808 - 7900 FOR TOTAL AMOUNT DUE.**

**COUNTY OF SANTA CLARA
DEPARTMENT OF TAX AND COLLECTIONS**

24711164

Regina Alcomendras
Santa Clara County - Clerk-Recorder
11/18/2020 04:00 PM

COUNTY GOVERNMENT CENTER
EAST WING 6TH FLOOR
70 WEST HEDDING STREET
SAN JOSE, CALIFORNIA 95110-1767
PHONE: (408) 808-7900

Titles: 1 Pages: 1
Fees: \$0.00
Tax: \$0
Total: \$0.00

WHEN RECORDED MAIL TO:

**IPASS INC
C/O ATTN TAX DEPT
3800 BRIDGE PY
REDWOOD SHORES CA 94065**

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ASSESSEE AND ADDRESS	YEAR/ASSESSMENT NO.	AMOUNT*
IPASS INC	20-020459-2	\$3,794.78
3800 BRIDGE PY REDWOOD SHORES CA 94065	360289-0004-5	08/20

FROM THE TIME OF RECORDATION OF THIS CERTIFICATE, FOR A PERIOD OF TEN (10) YEARS OR ANY EXTENSION THEREOF, THE AMOUNT REQUIRED TO BE PAID AS SHOWN HEREIN TOGETHER WITH ALL ACCRUED INTEREST, PENALTIES AND COSTS THEREON WILL CONSTITUTE A LIEN UPON ALL REAL AND PERSONAL PROPERTY NOW OWNED OR HEREAFTER ACQUIRED BY THE ABOVE NAMED ASSESSEE WITHIN THE COUNTY OF SANTA CLARA.

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*** THIS AMOUNT MAY HAVE INCREASED DUE TO THE ADDITION OF PENALTIES. PLEASE CALL (408) 808 - 7900 FOR TOTAL AMOUNT DUE.**

**COUNTY OF SANTA CLARA
DEPARTMENT OF TAX AND COLLECTIONS**

25166645

Regina Alcomendras
Santa Clara County - Clerk-Recorder
11/15/2021 04:00 PM

COUNTY GOVERNMENT CENTER
EAST WING 6TH FLOOR
70 WEST HEDDING STREET
SAN JOSE, CALIFORNIA 95110-1767
PHONE: (408) 808-7900

Titles: 1 Pages: 1
Fees: \$0.00
Tax: \$0
Total: \$0.00

WHEN RECORDED MAIL TO:

**IPASS INC
C/O ATTN TAX DEPT
3800 BRIDGE PY
REDWOOD SHORES CA 94065**

THIS IS TO NOTIFY YOU THAT A TAX LIEN HAS BEEN FILED WITH RESPECT TO UNSECURED PROPERTY.

CERTIFICATE OF TAX LIEN

THE DEPARTMENT OF TAX AND COLLECTIONS OF THE COUNTY OF SANTA CLARA, STATE OF CALIFORNIA, IN COMPLIANCE WITH THE PROVISIONS OF SECTION 2191.3 OR 2191.4 OF THE REVENUE AND TAXATION CODE, DOES HEREBY CERTIFY THAT THERE ARE ON RECORD IN THE OFFICE DELINQUENT UNSECURED PROPERTY TAXES WHICH WERE DULY ASSESSED, COMPUTED AND LEVIED TOGETHER WITH PENALTIES PRESCRIBED BY LAW FOR THE YEARS AND IN THE AMOUNTS SET FORTH BELOW. IN ADDITION, FURTHER PENALTIES WILL ACCRUE ON SAID TAXES AS PRESCRIBED BY LAW.

ASSESSEE AND ADDRESS	YEAR/ASSESSMENT NO.	AMOUNT*
IPASS INC	21-019884-2	\$3,727.46
3800 BRIDGE PY REDWOOD SHORES CA 94065	360289-0004-5	08/21

FROM THE TIME OF RECORDATION OF THIS CERTIFICATE, FOR A PERIOD OF TEN (10) YEARS OR ANY EXTENSION THEREOF, THE AMOUNT REQUIRED TO BE PAID AS SHOWN HEREIN TOGETHER WITH ALL ACCRUED INTEREST, PENALTIES AND COSTS THEREON WILL CONSTITUTE A LIEN UPON ALL REAL AND PERSONAL PROPERTY NOW OWNED OR HEREAFTER ACQUIRED BY THE ABOVE NAMED ASSESSEE WITHIN THE COUNTY OF SANTA CLARA.

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*** THIS AMOUNT MAY HAVE INCREASED DUE TO THE ADDITION OF PENALTIES. PLEASE CALL (408) 808 - 7900 FOR TOTAL AMOUNT DUE.**

Assessment Number	Base Tax	10% Penalty	Collection Fee	Monthly Interest	Total Interest Accrued	Total Claim
19-020972-6	\$2,758.77	\$275.87	\$50.00	\$41.38	\$1,282.78	\$4,367.42
20-020459-2	\$3,404.35	\$340.43	\$50.00	\$51.06	\$970.14	\$4,764.92
21-019884-2	\$3,343.15	\$334.31	\$50.00	\$50.04	\$351.08	\$4,078.54
Total	\$9,506.27	\$950.61	\$150.00	\$142.48	\$2,604.00	\$13,210.88

[Tax Bill](#) | [Payment Details](#)
 Bill ID: 5723595 Charge Roll Type: Unsecured Bill Status: Tax Bill Defaulted

[Collapse All](#) | [Expand All](#)

General Info		Assessed Value Information					
Assessment #:	19-020972-6	Assessed Value Type	Assessed Value	Homeowners Exemption	Other Exemptions	Net Value	Pro Rated Net Value
Account #:	36028900045	Land	0	0	0	0	0
APN:	216-46-014	Improvement - Fixture	0	0	0	0	0
TRA:	007-014	Improvement - Structure	0	0	0	0	0
Bill Type:	Annual Tax Bill	Total L&I	0	0	0	0	0
Pro-Ration %:	100.000000%	Personal Property	240,519	0	0	240,519	240,519
Lien Date:	01/01/2019	Total LIP	240,519	0	0	240,519	240,519
Lien Recording Date:	11/07/2019	Exemption Late Filing Penalty (\$250 Limit)	0	0	0	0	0
Lien Recorder Doc #:	24324154						
Billing Start Date:	07/01/2019						
Billing End Date:	06/30/2020						
Use Rates for Roll Correction Tax Year:	No						
Business Class Code:	794						
Business Description:							
Registration Number:							
Tax Year:	2019-20						
Enrolled Year:	2019-20						
Assessee Info		Charge Information					
Owner Name:	IPASS INC	Collapse All Expand All		Pro Rated Net Value	Tax Rate per \$100	Tax Charge	
Doing Business As:		Charge Type					
Street Address:	ATTN TAX DEPT	+ Tax Land, Improvement, Personal Property		240,519	1.147000%	2,758.77	
City, State, Nation:	3800 BRIDGE PY	+ Tax Land and Improvement		0	.004200%	0.00	
Postal Code:	REDWOOD SHORES CA	Tax Total		240,519	1.151200%	2,758.77	
	94065	Total		240,519	1.151200%	2,758.77	
Property Address		Monthly 2922 (1.5%) on Balance Due					
Street Address:	2820 NORTHWESTERN PY			Installment 1	Installment 2		
City:	SANTA CLARA			Monthly 2922 (1.5%) on Balance Due			
Messages		Installments					
Print Date	Message			Installment 1		Installment 2	
09/09/2019	To avoid additional penalties delinquent tax must be postmarked on or before the last day of the month. If the tax is not paid then collection enforcement may occur by one or more of the following actions: 1. Filing a Certificate of Tax Lien and/or Summary Judgment which may damage your credit rating. 2. Seizure of property and/or bank accounts. 3. Execution against wages and/or state tax refunds. 4. DMV withhold of water craft registration. 5. FAA Notice of Lien	Installment Amount				\$2,758.77	
		Installment Penalties				\$1,650.03	
		Penalties					
		Delinquent Ten Percent Penalty				\$275.87	
		Unsecured Delinquent Penalty				\$1,324.16	
		Unsecured Collection Fee				\$50.00	
		Total Amount				\$4,408.80	
		Printed Delinquency Date				08/31/2019	
		Actual Delinquency Date				09/03/2019	
		Payment Status				Installment Unpaid	
		Installment Amount Paid				\$0.00	
		Installment Payment Date					
		Payment Effective Date					
		Credit Applied				\$0.00	
		Installment Balance				\$4,408.80	
		Credit Issued				\$0.00	
		Prior Overpayment Credit Issued				\$0.00	

Assessment Number	Base Tax	10% Penalty	Collection Fee	Monthly Interest	Total Interest Accrued	Total Claim
19-020972-6	\$2,758.77	\$275.87	\$50.00	\$41.38	\$1,282.78	\$4,367.42
20-020459-2	\$3,404.35	\$340.43	\$50.00	\$51.06	\$970.14	\$4,764.92
21-019884-2	\$3,343.15	\$334.31	\$50.00	\$50.04	\$351.08	\$4,078.54
Total	\$9,506.27	\$950.61	\$150.00	\$142.48	\$2,604.00	\$13,210.88

Tax Bill | **Payment Details**

Bill ID: 6343246 Charge Roll Type: Unsecured Bill Status: Tax Bill Defaulted

[Collapse All](#) | [Expand All](#)

- General Info		- Assessed Value Information					
Assessment #:	20-020459-2	Assessed Value Type	Assessed Value	Homeowners Exemption	Other Exemptions	Net Value	Pro Rated Net Value
Account #:	36028900045	Land	0	0	0	0	0
APN:	216-46-014	Improvement - Fixture	0	0	0	0	0
TRA:	007-014	Improvement - Structure	0	0	0	0	0
Bill Type:	Annual Tax Bill	Total L&I	0	0	0	0	0
Pro-Ration %:	100.000000%	Personal Property	283,011	0	0	283,011	283,011
Lien Date:	01/01/2020	Total LIP	283,011	0	0	283,011	283,011
Lien Recording Date:	11/18/2020	Exemption Late Filing Penalty (\$250 Limit)	0	0	0	0	0
Lien Recorder Doc #:	24711164	- Charge Information					
Billing Start Date:	07/01/2020	Collapse All Expand All		Pro Rated Net Value	Tax Rate per \$100	Tax Charge	
Billing End Date:	06/30/2021	Charge Type					
Use Rates for Roll Correction Tax Year:	No	+ Tax Land, Improvement, Personal Property		283,011	1.202900%	3,404.35	
Business Class Code:	794	+ Tax Land and Improvement		0	.004100%	0.00	
Business Description:		Tax Total		283,011	1.207000%	3,404.35	
Registration Number:		Total		283,011	1.207000%	3,404.35	
Tax Year:	2020-21	- Monthly 2922 (1.5%) on Balance Due					
Enrolled Year:	2020-21				Installment 1	Installment 2	
- Assessee Info		Monthly 2922 (1.5%) on Balance Due					
Owner Name:	IPASS INC	- Installments					
Doing Business As:					Installment 1	Installment 2	
Street Address:	ATTN TAX DEPT	Installment Amount			\$3,404.35		
City, State, Nation:	3800 BRIDGE PY	Installment Penalties			\$1,411.63		
Postal Code:	REDWOOD SHORES CA	- Penalties					
- Property Address		Delinquent Ten Percent Penalty			\$340.43		
Street Address:	2820 NORTHWESTERN PY	Unsecured Delinquent Penalty			\$1,021.20		
City:	SANTA CLARA	Unsecured Collection Fee			\$50.00		
- Messages		Total Amount			\$4,815.98		
Print Date	Message	Printed Delinquency Date			08/31/2020		
09/14/2020	To avoid additional penalties delinquent tax must be postmarked on or before the last day of the month. If the tax is not paid then collection enforcement may occur by one or more of the following actions: 1. Filing a Certificate of Tax Lien and/or Summary Judgment which may damage your credit rating. 2. Seizure of property and/or bank accounts. 3. Execution against wages and/or state tax refunds. 4. DMV withhold of water craft registration. 5. FAA Notice of Lien	Actual Delinquency Date			08/31/2020		
07/08/2020	Your 2020/21 Unsecured Property Tax Bill has a new format! For a summary of the key changes, please visit www.sccdac.org or call our Unsecured Collections Unit at (408) 808-7962. Note: Please consult your tax preparer for details regarding deductions.	Payment Status			Installment Unpaid		
		Installment Amount Paid			\$0.00		
		Installment Payment Date					
		Payment Effective Date					
		Credit Applied			\$0.00		
		Installment Balance			\$4,815.98		
		Credit Issued			\$0.00		
		Prior Overpayment Credit Issued			\$0.00		

Assessment Number	Base Tax	10% Penalty	Collection Fee	Monthly Interest	Total Interest Accrued	Total Claim
19-020972-6	\$2,758.77	\$275.87	\$50.00	\$41.38	\$1,282.78	\$4,367.42
20-020459-2	\$3,404.35	\$340.43	\$50.00	\$51.06	\$970.14	\$4,764.92
21-019884-2	\$3,343.15	\$334.31	\$50.00	\$50.04	\$351.08	\$4,078.54
Total	\$9,506.27	\$950.61	\$150.00	\$142.48	\$2,604.00	\$13,210.88

[Tax Bill](#) | [Payment Details](#)

Bill ID: 6951064 Charge Roll Type: Unsecured Bill Status: Tax Bill Defaulted

[Collapse All](#) | [Expand All](#)

General Info		Assessed Value Information					
Assessment #:	21-019884-2	Assessed Value Type	Assessed Value	Homeowners Exemption	Other Exemptions	Net Value	Pro Rated Net Value
Account #:	36028900045	Land	0	0	0	0	0
APN:	216-46-014	Improvement - Fixture	0	0	0	0	0
TRA:	007-014	Improvement - Structure	0	0	0	0	0
Bill Type:	Annual Tax Bill	Total L&I	0	0	0	0	0
Pro-Ration %:	100.000000%	Personal Property	283,010	0	0	283,010	283,010
Lien Date:	01/01/2021	Total LIP	283,010	0	0	283,010	283,010
Lien Recording Date:	11/15/2021	Exemption Late Filing Penalty (\$250 Limit)	0	0	0	0	0
Lien Recorder Doc #:	25166645	Charge Information					
Billing Start Date:	07/01/2021	Collapse All Expand All		Pro Rated Net Value	Tax Rate per \$100	Tax Charge	
Billing End Date:	06/30/2022	Charge Type					
Use Rates for Roll Correction Tax Year:	No	+ Tax Land, Improvement, Personal Property		283,010	1.181300%	3,343.15	
Business Class Code:	794	+ Tax Land and Improvement		0	.003700%	0.00	
Business Description:		Tax Total		283,010	1.185000%	3,343.15	
Registration Number:		Total		283,010	1.185000%	3,343.15	
Tax Year:	2021-22	Monthly 2922 (1.5%) on Balance Due					
Enrolled Year:	2021-22			Installment 1	Installment 2		
Assessee Info		Monthly 2922 (1.5%) on Balance Due					
Owner Name:	IPASS INC	Installments					
Doing Business As:				Installment 1	Installment 2		
Street Address:	ATTN TAX DEPT	Installment Amount		\$3,343.15			
City, State, Nation:	3800 BRIDGE PY	Installment Penalties		\$785.43			
Postal Code:	REDWOOD SHORES CA	Penalties					
Property Address		Delinquent Ten Percent Penalty		\$334.31			
Street Address:	2820 NORTHWESTERN PY	Unsecured Delinquent Penalty		\$401.12			
City:	SANTA CLARA	Unsecured Collection Fee		\$50.00			
Messages		Total Amount		\$4,128.58			
Print Date	Message	Printed Delinquency Date		08/31/2021			
09/13/2021	To avoid additional penalties delinquent tax must be postmarked on or before the last day of the month. If the tax is not paid then collection enforcement may occur by one or more of the following actions: 1. Filing a Certificate of Tax Lien and/or Summary Judgment which may damage your credit rating. 2. Seizure of property and/or bank accounts. 3. Execution against wages and/or state tax refunds. 4. DMV withhold of water craft registration. 5. FAA Notice of Lien	Actual Delinquency Date		08/31/2021			
07/06/2021	Your 2021/22 Unsecured Property Tax Bill has a new format! For a summary of the key changes, please visit www.sccdta.org or call our Unsecured Collections Unit at (408) 808-7962. Note: Please consult your tax preparer for details regarding deductions.	Payment Status		Installation Unpaid			
		Installation Amount Paid		\$0.00			
		Installation Payment Date					
		Payment Effective Date					
		Credit Applied		\$0.00			
		Installation Balance		\$4,128.58			
		Credit Issued		\$0.00			
		Prior Overpayment Credit Issued		\$0.00			