Fill in this in	oformation to identify the case:	10.2
Debtor 1	lpass Inc.	
Debtor 2 (Spouse, if filing)		
United States 6	Bankruptcy Court for the: Southern District of New York	
Case number	22-10618	

270

Date Stamped Co	py Returned
No self addressed	stamped envelope
No copy to return	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

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 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.

Who is the current creditor?	City of Philadelphia/School Di Name of the current creditor (the person of Other names the creditor used with the de	or entity to be paid for this cl			
Has this claim been acquired from someone else?	No Yes. From whom?				
Where should notices and payments to the creditor be sent?	Where should notices to the credi		Where should pay different)	ments to the creditor	be sent? (if
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name 1401 JFK Blvd, 5th Floor	a revenue ont	Name		
	Number Street Philadelphia PA	19102	Number Street		
RECEIVED	Philadelphia PA City State	ZIP Code	City	State	ZIP Code
JUL 1 5 2022	Contact phone 215-686-0503 Contact email Megan.Harper@p	phila.gov	Contact phone Contact email		
ZMAN CARSON CONSULTANTS	Uniform claim identifier for electronic payn	nents in chapter 13 (if you u	use one):		
Does this claim amend one already filed?	☑ No ☐ Yes. Claim number on court clai	ims registry (if known) _		Filed on MM / DO	7 / / / / /
5. Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing				

6.	Do you have any number you use to identify the debtor?	No Ves. Last 4 digits of the debtor's account or any number you use to identify the debtor: 4 5 9 8
7.	How much is the claim?	\$0.00 PlusUnliquidated Claims. Does this amount include interest or other charge
3.	What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
	ciaim?	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.
		Municipal Claim
).	Is all or part of the claim secured?	No Quantum 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: \$
	RECEIVED	Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amounts should match the amount in line?
	JUL 1 5 2022	Amount necessary to cure any default as of the date of the petition: \$
K	KURTZMAN CARSON CONSULTA	Annual Interest Rate [Real Estate] (when case was filed)% Annual Interest Rate [Judgments] (when case was filed)%
		☐ Fixed
		☐ Variable .
0	. Is this claim based on a	₩ No
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.

Official Form 410 Proof of Claim page 2

11. Is this claim subject to a No right of setoff?

☐ Yes. Identify the property: _

12. Is all or part of the claim entitled to priority under	☑ No ☐ Yes. Chec	t			Amount entitled to priority
11 U.S.C. § 507(a)?					Amount endued to priorit
A claim may be partly priority and partly		tic support obligations (including .C. § 507(a)(1)(A) or (a)(1)(B).	alimony and child support) ur	nder	\$
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	Up to \$ person	2,850* of deposits toward purcha al, family, or household use. 11 U	ise, lease, or rental of propert J.S.C. § 507(a)(7).	y or services for	\$
Grando to promy.	bankru	s, salaries, or commissions (up to ptcy petition is filed or the debtor .C. § 507(a)(4).	\$12,850*) earned within 180 's business ends, whichever i	days before the s earlier.	\$
		or penalties owed to government	al units. 11 U.S.C. § 507(a)(8).	\$
	☐ Contrib	outions to an employee benefit pla	an. 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 4/01/19	and every 3 years after that for ca	ises begun on or afi	ter the date of adjustment.
Pan Si Sign Below					
The person completing	Check the appr	opriate box:			
this proof of claim must sign and date it.	☐ I am the cr	editor.			
FRBP 9011(b).		editor's attorney or authorized ag	ent.		
If you file this claim		ustee, or the debtor, or their author		e 3004.	
electronically, FRBP 5005(a)(2) authorizes courts to establish local rules		rantor, surety, endorser, or other			
specifying what a signature is.		at an authorized signature on this			
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examine and correct.	d the information in this <i>Proof of</i>	Claim and have a reasonable	belief that the info	ormation is true
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under	penalty of perjury that the forego	ing is true and correct.		
3571.	Executed on da	06/29/2022 MM / DD / YYYY			
-			-		
	Sygnature	M///			
RECEIVED		of the person who is completi	ng and signing this claim:		
BILOTI AFF					
4 5 0000	Name	Megan N. Harper			
JUL 1 5 2022		First name	Middle name	Last name	
	Title	Senior Attorney			
ZMAN CARSON CONSULTANTS	Company	City of Philadelphia Lav			
		identify the corporate servicer as	the company if the authorized age	ent is a servicer.	
	Address	1401 JFK Blvd, 5th Floo	or		
		Number Street			
		Philadelphia	PA	19102	
		City	State	ZIP Code	
	Contact phone	215-686-0503	Email	Megan b	larner@Phila gov

Bankruptcy #:22-10618 File Date: 05/15/2022

City of Philadelphia Pre-Petition Itemized Statement

Debtor: Ipass Inc. Joint Debtor: Interest and Penalties as of 05/15/2022

TOTALS COMMENTS
IAX IYPE PRINCIPAL INIERESI
YEAR
NUMBER



PAMELA ELCHERT THURMOND DEPUTY CITY SOLICITOR

LAW REVENUE BÜREAU

PHONE: 215-686-0508 MUNICIPAL SERVICES BUILDING

1401 JOHN F. KENNEDY BLVD, RM580 FAX: 215-686-0588 PHILADELPHIA, PA 19102 PAMELA.THURMOND@PHILA.GOV