

Fill in this information to identify the case:

Debtor Pareteum Europe B.V.

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

Case number 22-10620

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?** CliftonLarsonAllen LLP
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)
CliftonLarsonAllen LLP c/o Sarah E. Doerr Moss and Barnett 150 South Fifth Street, Suite 1200 Minneapolis, MN 55402, United States Contact phone <u>612-877-5297</u> Contact email <u>Sarah.Doerr@lawmoss.com</u>	 Contact phone _____ Contact email _____

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)
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: 0973 _____

7. How much is the claim? \$ 624.75. 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.
Administrative Expense Claim

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 \$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).	\$ _____
<input type="checkbox"/> 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).	\$ _____
<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 4/01/25 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 11/23/2022
MM / DD / YYYY

/s/Sarah E. Doerr
Signature

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

Name Sarah E. Doerr
First name Middle name Last name

Title Attorney for Claimant CliftonLarsonAllen

Company Moss and Barnett
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: 22-10620 - Pareteum Europe B.V.		
District: Southern District of New York, New York Division		
Creditor: CliftonLarsonAllen LLP c/o Sarah E. Doerr Moss and Barnett 150 South Fifth Street, Suite 1200 Minneapolis, MN, 55402 United States Phone: 612-877-5297 Phone 2: Fax: Email: Sarah.Doerr@lawmoss.com	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: Administrative Expense Claim	Last 4 Digits: Yes - 0973	Uniform Claim Identifier:
Total Amount of Claim: 624.75	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No 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: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Sarah E. Doerr on 23-Nov-2022 4:34:04 p.m. Eastern Time Title: Attorney for Claimant CliftonLarsonAllen Company: Moss and Barnett		



Moss & Barnett

November 22, 2022

VIA FEDEX

Pareteum Claims Processing Center
c/o Kurtzman Carson Consultants LLC
222 N. Pacific Coast Highway, Suite 300
El Segundo, CA 90245

Re: In re Pareteum Corporation, et al.
Case No. 22-10615 (Bankr. S.D.N.Y.)
Our File No. 52767.9013

Dear Sir or Madam:

Enclosed for filing, please find the Request for Payment of Administrative Expense Claim submitted by claimant CliftonLarsonAllen in the above-referenced matter.

Also enclosed is a photocopy of the claim. Please acknowledge receipt and filing of the claim on the photocopy and return it to me in the enclosed pre-addressed, postage paid envelope.

Very truly yours,

Sarah E. Doerr
Attorney At Law
P: (612) 877-5297
DoerrSarah@moss-barnett.com

SED/mam
Enclosures
8163562v1

TOGUT, SEGAL & SEGAL LLP

One Penn Plaza, Suite 3335
New York, New York 10119
(212) 594-5000
Frank A. Oswald
Brian F. Moore
Amy M. Oden

*Counsel to the Debtors
and Debtors in Possession*

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK**

In re:

PARETEUM CORPORATION, *et al.*,

Debtors.¹

Chapter 11

Case No.: 22-10615 (LGB)

(Jointly Administered)

REQUEST FOR PAYMENT OF ADMINISTRATIVE EXPENSE CLAIM

1. Name of claimant: CliftonLarsonAllen LLP

2. Debtor that the claim is asserted against (check one):

- | | | |
|---|--|--|
| <input type="checkbox"/> Pareteum Corporation (Case No. 22-10615) | <input type="checkbox"/> iPass, Inc. (Case No. 22-10618) | <input type="checkbox"/> Artium Group Ltd. (Case No. 22-10621) |
| <input type="checkbox"/> Pareteum North America Corp. (Case No. 22-10616) | <input type="checkbox"/> iPass IP LLC (Case No. 22-10619) | <input type="checkbox"/> Pareteum Asia Pte. Ltd. (Case No. 22-10622) |
| <input type="checkbox"/> Devicescape Holdings, Inc. (Case No. 22-10617) | <input checked="" type="checkbox"/> Pareteum Europe B.V. (Case No. 22-10620) | <input type="checkbox"/> Pareteum N.V. (Case No. 22-10623) |

3. Nature and description of the claim (you may attach a separate summary): see

attached invoice.

4. Date(s) claim arose: October 1, 2022

5. Amount of claim: \$624.75

¹ The Debtors in the Chapter 11 Cases, along with the last four digits of each Debtor's federal tax identification number, if applicable, are: Pareteum Corporation (7538); Pareteum North America Corp. (f/k/a Elephant Talk North America Corp.) (9623); Devicescape Holdings, Inc. (2909); iPass, Inc. (4598); iPass IP LLC (2550); Pareteum Europe B.V.; Artium Group Ltd. (f/k/a Artium PLC); Pareteum Asia Pte. Ltd.; and Pareteum N.V. (f/k/a Artium N.V.).

6. Documentation supporting the claim must be attached hereto. Documentation should include both evidence of the nature of the Administrative Expense Claim asserted as well as evidence of the date or dates on which the Administrative Expense Claim arose.

Signature: SARAH E DOERR Date: NOV 22, 2022

Name: Sarah E Doerr, outside counsel for claimant

Address: Moss & Barnett

150 5th St S, Suite 1200

Minneapolis, MN 55402

Phone Number: 612-877-5297 Email: sarah.doerr@lawmoss.com



Direct Billing Inquiries to:

CliftonLarsonAllen LLP
(844) 325-1836

Payment is due upon receipt

Account Name Pareteum Europe B.V.
Account Number [REDACTED]0973
Authorization Number [REDACTED]2078

Invoice Total \$624.75
Invoice # 3473907
Invoice Date 11/01/2022

To pay your bill electronically please visit claconnect.com/billpay

Quantity	Description	Rate	Amount
1.0000	Federal and State Compliance - up to 1 state	200.00	200.00
1.0000	Tax Compliance	200.00	200.00
1.0000	Service Ticket #152141 - Pareteum Open Items Review - Tax & Regulatory Compliance - Review open tiems and update MS DOR	195.00	195.00

Technology and Client Support Fee 29.75

Invoice Total \$624.75

Payment is due upon receipt.
To pay your bill electronically please visit claconnect.com/billpay
Please detach and remit payment to the address below.

We Appreciate Your Business and Referrals

Remit to:
CliftonLarsonAllen LLP
P.O. Box 740863
Atlanta, GA 30374-0863

074086323560097300000624750000034739078

Pareteum Europe B.V.
1185 Avenue of the Americas, Second Floor

New York, NY 10036

Amount Remitted \$ _____
Account Number 235-600973
Invoice Number 3473907