

**Fill in this information to identify the case:**

Debtor Gaiam Americas, Inc.

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

Case number 21-11207

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.

**Part 1: Identify the Claim**

1. **Who is the current creditor?** CSC Corporate Domains  
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)
CSC Corporate Domains Joanne Smith 251 Little Falls Drive Wilmington, DE 19808, United States	
Contact phone <u>3026365401</u>	Contact phone _____
Contact email <u>Joanne.Smith@cscglobal.com</u>	Contact email _____
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

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: \_\_\_\_ \_

7. How much is the claim? \$ 95.00. 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.  
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)?

- No
- Yes. Check all that apply:

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). Amount entitled to priority  
\$ \_\_\_\_\_
- 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. \$ \_\_\_\_\_

\* 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.

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 11/11/2021  
MM / DD / YYYY

/s/Joanne Smith  
Signature

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

Name Joanne Smith  
First name Middle name Last name

Title Workflow Coordinator

Company Corporation Service Company  
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 (866) 556-7696 | International 001-310-823-9000

<b>Debtor:</b> 21-11207 - Gaiam Americas, Inc.		
<b>District:</b> District of Delaware		
<b>Creditor:</b> CSC Corporate Domains Joanne Smith 251 Little Falls Drive  Wilmington, DE, 19808 United States <b>Phone:</b> 3026365401 <b>Phone 2:</b>  <b>Fax:</b> 3026365454 <b>Email:</b> Joanne.Smith@cscglobal.com	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded <b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> No <b>Related Claim Filed By:</b>	
	<b>Filing Party:</b> Authorized agent	
<b>Other Names Used with Debtor:</b>	<b>Amends Claim:</b> No <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> Services Performed	<b>Last 4 Digits:</b> No	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 95.00	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> No <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> <b>Value of Property:</b>  <b>Annual Interest Rate:</b>  <b>Arrearage Amount:</b>  <b>Basis for Perfection:</b>  <b>Amount Unsecured:</b>	
<b>Submitted By:</b> Joanne Smith on 11-Nov-2021 3:52:28 p.m. Eastern Time <b>Title:</b> Workflow Coordinator <b>Company:</b> Corporation Service Company		



CSC  
 251 Little Falls Drive  
 Wilmington, DE 19808-1674  
 USA  
 EIN: 510009810

ACCOUNT NO.	INVOICE NO.	INVOICE DATE	AMOUNT DUE
8010564	81111524833	17-SEP-2021	\$ 95.00

**Billing Address:**

Jacqueline Klein  
 Sequential Brands Group Inc  
 1407 Broadway  
 FI 38  
 New York, NY 10018-5100

**Shipping Address:**

Jacqueline Klein  
 Sequential Brands Group Inc  
 1407 Broadway  
 FI 38  
 New York, NY 10018-5100

<b>Order Date:</b> 13-JUN-2021	<b>Order No:</b> 857099
<b>Ordered By:</b> Jacqueline Klein	
8010564	
Sequential Brands Group Inc	
1407 Broadway	
FI 38	
New York, NY 10018-5100	

Description of Services	Quantity	Unit Cost	Amount
<b>Matter No:2021 SEPTEMBER RENEWALS</b>			
<b>RE:GAIAM AMERICAS, INC. / Company ID:2135562</b>			
<b>Line:001</b>			
COQU00	FOREIGN FILING IN COLORADO	0	0.00
CO4ARM	DISBURSEMENT/COST - ANNUAL REPORT/TAX RETURN	1	10.00
CO410S	SERVICE FEE - PREPARE & FILE ANNUAL REPORT/TAX RETURN - ANNUAL REPORT MONITORING SERVICE	1	180.00
COARDT	SPECIAL ARRANGEMENT DISCOUNT	-1	95.00
			-95.00
		Subtotal	\$ 95.00
		<b>Total [USD]</b>	<b>\$ 95.00</b>



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**THANK YOU FOR USING CSC - Kartina Anderson - 800-927-9800**

Disclaimer: CSC makes no express or implied warranties, guarantees or representations related to an order's accuracy or completeness or regarding the public record data provided by its suppliers or governmental jurisdiction. CSC disclaims all liability for indirect, consequential, incidental or special damages related to this order. The customer's sole remedy for any errors or omission is limited to a refund of the service fee associated with such order.

**TERMS: NET 30 DAYS - Invoices not paid within 30 days are subject to a 1.5% per month finance charge. CSC extends credit to the party requesting service whom it holds responsible for payment in full for all monies expended and services rendered.**

.....  
Please return this portion with your payment.  
.....

Account No:	Invoice No	Invoice Date	Amount Due
8010564	81111524833	17-SEP-2021	\$ 95.00

Amount Remitted: \$ \_\_\_\_\_

***Thank you for choosing CSC.***

*We are the business behind business.  
Please use this remittance to mail in your payment or email  
invoiceinquiry@cscglobal.com for additional payment options.*

**Mail Payment To:**  
CSC  
P.O. Box 7410023  
Chicago, IL 60674-5023  
USA

1 000081111524833 0000009500