Fill in this information to identify the case:

Debtor Achaogen, Inc.

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

Case number 19-10844

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?**
   ATT CORP
   Name of the current creditor (the person or entity to be paid for this claim)
   Other names the creditor used with the debtor ATT

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	
Contact phone 9085321957	Contact phone _____
Contact email KM1426@ATT.COM	Contact email _____

   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? _____

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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: 1960

7. **How much is the claim?** $ 11283.10 . **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: _____

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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
☐ 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.	$

* 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 07/15/2019
MM / DD / YYYY

/s/Brian Hudgins
Signature

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

Name: Brian Hudgins
First name Middle name Last name

Title: BANKRUPTCY REPRESENATIVE

Company: ATT CORP
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 4331 COMMUNICATIONS DRIVE, FLOOR 4, DALLAS, TX, 75211

Contact phone: 888 827-3238 Email: B.D.HUDGINS@ATT.COM

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KCC ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 249-2747 | International (310) 751-2606

Debtor:
19-10844 - Achaogen, Inc.

District:
District of Delaware

Creditor:
ATT CORP
ATT SERVICES INC, KAREN A CAVAGNARO- LEAD PARALEGAL
ONE ATT WAY, ROOM 3A104
BEDMINSTER, NJ, 07921
Phone:
9085321957
Phone 2:
Fax:
Email:
KM1426@ATT.COM

Has Supporting Documentation:
Yes, supporting documentation successfully uploaded
Related Document Statement:

Has Related Claim:
No
Related Claim Filed By:

Filing Party:
Creditor

Other Names Used with Debtor:
ATT

Amends Claim:
No
Acquired Claim:
No

Basis of Claim:
SERVICES PERFORMED

Last 4 Digits:
Yes - 1960

Uniform Claim Identifier:

Total Amount of Claim:
11283.10

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:
Brian Hudgins on 15-Jul-2019 11:55:15 a.m. Eastern Time
Title:
BANKRUPTCY REPRESENATIVE
Company:
ATT CORP

Optional Signature Address:
Brian Hudgins
4331 COMMUNICATIONS DRIVE
FLOOR 4
DALLAS, TX, 75211
Telephone Number:
888 827-3238
Email:
B.D.HUDGINS@ATT.COM

VN: D6C82CC4171D048FB74ADCABB75D4C75

AT&T

Achaogen Inc
1 TOWER PL
SOUTH SAN FRANCISCO CA 94080

Account Number [redacted]1 960
Billing Date May 1, 2019
Questions? 1 800 235-7524
Web Site att.com

Invoice [redacted]
AT&T Tax ID 13-4924710

Invoice

Bill-At-A-Glance

Previous Bill	3,843.86
Payment	.00
Adjustments	.00
Past Due - Please Pay Immediately	3,843.86
Current Charges	1,921.93
Total Amount Due	**$5,765.79**
Current Charges Due in Full by	**May 31, 2019**

Billing Summary

Questions?
Call: 1 800 235-7524
Online: www.businessdirect.att.com

AT&T Business Services

Group #000001
Sub-Account #[redacted] 1,921.93
Total Group #[redacted] 1,921.93

Total Current Charges 1,921.93

Current Charges

Group #000001

Sub-Account #[redacted]
Charges for Subscriber/Router ID[redacted]
7000 SHORELINE CT
SSF, CA 94080
IP Optional Components
Recurring Charges:
May 1, 2019 thru May 31, 2019
1. ADI Access Charge 820.00
100Mbps - US
Port ID:[redacted]
Works With Circuit: IUEC.907211..ATI
Qty: 1.00 Items at 820.00
Total IP Optional Components 820.00

Group #000001 - Continued

AT&T Dedicated Internet
Recurring Charges:
Apr 1, 2019 thru Apr 30, 2019
2. 100 Mbps Hi Cap Flex Bandwidth 1,082.25
100Mbps - US
Commitment
Port ID:[redacted]
Works With Circuit: IUEC.907211..ATI
Qty: 1.00 Items at 12,025.00
Gross: 12,025.00
Discount 10,942.75CR
Total AT&T Dedicated Internet 1,082.25

Surcharges and Other Fees
3. Federal Access Recovery Fee 19.68
Total Surcharges and Other Fees 19.68
Total Subscriber/Router ID[redacted] 1,921.93
Total Sub-Account #[redacted] 1,921.93
Total Group #[redacted] 1,921.93

Total Current Charges 1,921.93

News You Can Use

News You Can Use

ACCOUNT STATUS
Where allowed by law, AT&T may implement late payment interest of no more than 18% annually. Rates will vary based on state regulations. Interest will be calculated based upon daily balances and will be applicable for each day that a delinquent balance is outstanding. This charge will apply to all balances that are delinquent through such time that payment in full is received at AT&T. The late payment interest will be billed on a monthly basis. Accounts billed outside the US will not be charged LPI.

Where allowed by law, AT&T may implement a $25 service fee for restoration of service where delinquency has caused an interruption. This fee will be applicable to each account that is being restored and will be included on your monthly billing statement.

Some products require electronic billing as their official bill media. When electronic billing is the official bill media, an informational statement may be sent containing some of the same information as the electronic bill. The informational statement is not your bill. However, if you choose to mail your payment instead of paying electronically, the informational statement has a tear-off that can be used to submit your payment.

REGULATORY NEWS
Attention Customers:
Having trouble using the telephone? Phone your family, friends or vital services even if you have a hearing, speech or physical disability.
Telecommunications Relay Service (TRS) provides free and full telephone accessibility to anyone who is hard of hearing, deaf or speech disabled. To make a relay call, dial 711 and request to be connected through TCA.

Return bottom portion with your check in the enclosed envelope.

DUE BY: May 31, 2019 $5,765.79

AT&T

Billing Date May 1, 2019

Account Number [redacted]1 960
Please include your account number on your check

Achaogen Inc
1 TOWER PL
SOUTH SAN FRANCISCO CA 94080

Set up electronic payments:
www.att.com/attsmartpayments

Make checks payable to:
AT&T
P.O. Box 5019
Carol Stream, IL 60197-5019

[redacted]

AT&T

ACHAOGEN, INC
1 TOWER PL
SOUTH SAN FRANCISCO CA 94080

Page	1 of 2
Account Number	[redacted] 1 244
Billing Date	May 19, 2019
Questions?	1 800 235-7524
Web Site	**att.com**
Invoice	[redacted]
AT&T Tax ID	13-4924710

Invoice

Bill-At-A-Glance

Previous Bill	6,291.60
Payment	.00
Adjustments	3.15
Past Due - Please Pay Immediately	6,294.75
Current Charges	3,145.80
Total Amount Due	**$9,440.55**
Current Charges Due in Full by	**Jun 18, 2019**

Billing Summary

Questions?
Call: 1 800 235-7524
Online: www.businessdirect.att.com

AT&T Business Services

Group #000001
Sub-Account # [redacted] 3,145.80
Total Group #000001 3,145.80

Total Current Charges **3,145.80**

Detail of Payments and Adjustments

Adjustments

Item No.	Date	Description	
1.	05-20	310001910028 LATE PAYMENT INTEREST	3.15
Total Adjustments			**3.15**

Current Charges

Group #000001
Sub-Account # [redacted]
Charges for Subscriber/Router ID [redacted]
1 TOWER PL
SSF, CA 94080
IP Optional Components
Recurring Charges:
May 19, 2019 thru Jun 18, 2019
2. ADI Access Charge 1,700.00
1Gbps - US
Port ID: [redacted]
Works With Circuit: .IZEC.523097..ATI.
Qty: 1.00 Items at 1,700.00
Total IP Optional Components 1,700.00

ADI with Managed Router
Recurring Charges:
Apr 19, 2019 thru May 18, 2019
3. 1000 Mbps Hi Cap Flex Bandwidth 1,405.00
1Gbps - US
Commitment
Port ID [redacted]
Works With Circuit: .IZEC.523097..ATI.
Qty: 1.00 Items at 5,620.00
Gross: 5,620.00
HiCap Flex Ethernet Monthly Fee Disc 4,215.00CR
Total ADI with Managed Router 1,405.00

Surcharges and Other Fees
4. Federal Access Recovery Fee 40.80
Total Surcharges and Other Fees 40.80
Total Subscriber/Router ID [redacted] 3,145.80
Total Sub-Account # [redacted] **3,145.80**
Total Group # [redacted] **3,145.80**

Total Current Charges **3,145.80**

News You Can Use

News You Can Use

ACCOUNT STATUS
STILL GETTING PAPER?
Email us at GoPaperless@att.com to sign-up for paperless billing today!

Where allowed by law, AT&T may implement late payment interest of no more than 18% annually. Rates will vary based on state regulations. Interest will be calculated based upon daily balances and will be applicable for each day that a delinquent balance is outstanding. This charge will apply to all balances that are delinquent through such time that payment in full is received at AT&T. The late payment interest will be billed on a monthly basis. Accounts billed outside the US will not be charged LPI.

Where allowed by law, AT&T may implement a $25 service fee for restoration of service where delinquency has caused an interruption. This fee will be applicable to each account that is being restored and will be included on your monthly billing statement.

Return bottom portion with your check in the enclosed envelope.

DUE BY: Jun 18, 2019 **$9,440.55**

AT&T

Billing Date May 19, 2019

Account Number [redacted] 1 244
Please include your account number on your check

ACHAOGEN, INC
1 TOWER PL
SOUTH SAN FRANCISCO CA 94080

Set up electronic payments:
www.att.com/attsmartpayments

Make checks payable to:
AT&T
P.O. Box 5019
Carol Stream, IL 60197-5019

[redacted]