Claim #235 Date Filed: 8/25/2026

Fill in this information to identify the case:	
Debtor 1	INITIAL THERAPEUTICS INC
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	District of DELAWARE
Case number	25-12177

RE[illegible]D
2026 AUG 25 P 2:06
[illegible] COURT

Official Form 410

Proof of Claim

12/15

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?

CDW
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?

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

Where should notices to the creditor be sent?

CDW / Attn: Manny Velazquez
Name

200 N. Milwaukee Ave
Number Street

Vernon Hills IL 60061
City State ZIP Code

Contact phone 847-968-0084

Contact email manny.velazquez@cdw.com

Where should payments to the creditor be sent? (if different)

Name

Number Street

City State ZIP Code

Contact phone

Contact email

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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?

25122022608250000000000001

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: ____ ____ ____ ____

   Account#1322051-01

7. **How much is the claim?** $ 7,041.02 . **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.

   Goods Sold

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.)

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   SEP 03 2026
   VERITA GLOBAL

   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
☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	$
☐ Up to $2,775* 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 $12,475*) 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 4/01/16 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 ~~06/03/2026~~ 8/19/2026
MM / DD / YYYY

Manny Velazquez
Signature

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

Name: Manny (First name) Velazquez (Last name)

Title: AR- Recovery Consultants

Company: CDW, LLC
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address: 200 N Milwaukee Ave
Number Street
Vernon Hills, IL 60061
City State ZIP Code

Contact phone: 847-968-0084 Email: manny.velazquez@cdw.com

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SEP 03 2026
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PEOPLE WHO GET IT

Tax Identification
36-4530079

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INVOICE NO.	ACCOUNT NO.	INVOICE DATE
AE4K76L	13220581	6-03-25

SOLD TO
INITIAL THERAPEUTICS
285 E GRAND AVE STE 2200
ACCOUNTS PAYABL
SOUTH SAN FRANCISCO, CA 94080-4804
6172946790

SHIP TO
INITIAL THERAPEUTICS
285 E GRAND AVE STE 2200
ACCOUNTS PAYABL
SOUTH SAN FRANCISCO, CA 94080-4804

YOUR P.O. # 4996

	ACCOUNT MANAGER	DATE ORDERED	DATE SHIPPED		WEIGHT	SHIPPED VIA	TERMS
	XAVIER COOK	6-02-25	6-03-25			ELECTRONIC DISTRI	NET 30 Days

ORDER	SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION
1	1	3344139	CISCO DIRECT LIC-MX100-SEC-1YR MFG#: LIC-MX100-SEC-1YR Electronic distribution - NO MEDIA	3225.59	3225.59
2	2	4406729	CISCO DIRECT LIC-MS250-48FP-1YR MFG#: LIC-MS250-48FP-1YR Electronic distribution - NO MEDIA	498.51	997.02
8	8	3343315	CISCO DIRECT LIC-ENT-1YR MFG#: LIC-ENT-1YR Electronic distribution - NO MEDIA	129.16	1033.28
				Subtotal:	5255.89
				Freight:	.00
				Sales Tax:	.00

PLEASE REMIT TO:
CDW DIRECT, LLC, PO BOX 75723, CHICAGO, IL 60675-5723

INVOICE TOTAL US Currency 5255.89

EXPLANATION OF OUR RETURN AND FREIGHT POLICIES ARE ON BACK OF THIS INVOICE. IF YOU HAVE ANY QUESTIONS ABOUT THE ORDER OR INVOICE, PLEASE WRITE OR CALL.

WE GET YOUR CHALLENGES.

At CDW, we get what it takes to turn complex problems into solutions that fit our customers' needs and budgets.
Dedicated CDW account managers get to know your needs and provide ongoing support for the long haul.

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- Extensive range of products and solutions
- CDW Amplified™ Services across the lifecycle

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Tax Identification
36-4530079

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INVOICE NO.	ACCOUNT NO.	INVOICE DATE
QL32443	13220581	3-28-24

SOLD TO
INITIAL THERAPEUTICS
285 E GRAND AVE STE 2200
ACCOUNTS PAYABL
SOUTH SAN FRANCISCO, CA 94080-4804
6172946790

SHIP TO
INITIAL TX
285 E GRAND AVE
ATTN:TYLER DUNCAN
SOUTH SAN FRANCISCO, CA 94080-4804

YOUR P.O. # PO 3731

	ACCOUNT MANAGER	DATE ORDERED	DATE SHIPPED		WEIGHT	SHIPPED VIA	TERMS
	XAVIER COOK	3-28-24	3-28-24			UPS Ground (2-3 d	NET 30 Days

ORDER	SHIPPED	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION
1	1	7667608	APPLE MBP 14 M3 8C10C 16GB 512G MFG#: Z1C8-2002231914 SERIAL#: KHX99QY2P2	1599.00	1599.00
1	1	654809	RECYCLING FEE 4" TO LESS THAN 1 MFG#: CAL RECYCLE FEE 1	4.00	4.00
				Subtotal:	1603.00
				Freight:	24.24
				Sales Tax:	157.90

PLEASE REMIT TO:
CDW DIRECT, LLC, PO BOX 75723, CHICAGO, IL 60675-5723

INVOICE TOTAL US Currency 1785.14

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