


Fill in this information to identify the case:

Debtor 1 Multi-Color Montreal Canada Corporation

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: District of New Jersey 

Case number 26-10910 (MBK)

Official Form 410

Proof of Claim

04/25

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? Alert Fire Protection
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor Alert Sprinklers

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)
<u>Alert Fire Protection</u>	
Name	Name
<u>1250 des Cascades</u>	
Number Street	Number Street
<u>Chateauguay Qc J6J4Z2</u>	
City State ZIP Code	City State ZIP Code
<u>Canada</u>	
Contact phone <u>450-692-9098 ext: 206</u>	Contact phone _____
Contact email <u>lisa.bolduc@alertepi.com</u>	Contact email _____

Uniform claim identifier (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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261095226030300000000001

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: M E O C

7. How much is the claim? \$ 2,481.42 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.
 Sprinkler and fire alarm inspection. Replacement of material.

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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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 one:

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Up to \$3,800* 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 \$17,150*) 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).

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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/28 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)(3) 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 02/20/2026
MM / DD / YYYY



Signature

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

Name Lisa Bolduc
First name Middle name Last name

Title CFO

Company Alert Fire Protection
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1250 des Cascades
Number Street

Chateauguy, Qc. J6J 4Z2, Canada
City State ZIP Code

Contact phone 450-692-9098 ext: 206 Email lisa.bolduc@alertepi.com

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ALERTE

PROTECTION INCENDIE

(450) 692-9098 | Fax: (450) 692-7773
 1250, rue des Cascades, Châteauguay, QC J6J 4Z2
 R.B.Q. # 2432-6894-04

www.alertepi.com

Code Client: CAMEOC

Corporation d'Etiquette Multi-
 Color Canada
 1925, 32E Avenue
 Lachine QC H8T 3J1

Facture: 063126
 28-nov-2025

Bon de commande: PO 3005768

Contrat: C-01838 No. appel : 23057
 2850 rue Botham Saint-Laurent Qc.

Quantité Prix Unitaire Total

Lieux des travaux: 2850 rue Botham, St-Laurent
 PO 3005768

NOVEMBRE 2025 INSPECTION ANNUELLE - RÉSEAU ALARME - CAN/ULC S/536-04

Selon le contrat
 - 1x PAI Mircom

EXTRA
 -15 min à taux horaire 1 tech alarme pour changement de batterie dans le booster
 -2x batterie 12V12ah

2025-11-12 Date de service

Montant forfaitaire

29001 BATTERIE 12 VOLT 12.0AH
 TAUX HORAIRE ALARME - 1 TECH

			684.00
	2.00	80.04	160.08
	0.25	123.00	30.75

Montant		874.83
TPS/GST	102087509RT0001	43.74
TVQ/PST	1002777408TQ0001	87.26
Total		1 005.83
		Net 30 jours

Alerte Protection Incendie

Nom commercial pour la recherche au registre de la TPS/TVH: Gicleurs Alerte Inc Alert Sprinklers Inc (NEQ: 1145429677)



ALERTE

PROTECTION INCENDIE

(450) 692-9098 | Fax: (450) 692-7773
 1250, rue des Cascades, Châteauguay, QC J6J 4Z2
 R.B.Q. # 2432-6894-04

www.alertepi.com

Code Client: CAMEOC

Corporation d'Etiquette Multi-
 Color Canada
 1925, 32E Avenue
 Lachine QC H8T 3J1

Facture: 063163
 28-nov-2025

Bon de commande: PO 3005768

Contrat: C-01838 No. appel : 23058
 2850 rue Botham Saint-Laurent Qc.

Quantité Prix Unitaire Total

Lieux des travaux: 2850 rue Botham, St-Laurent
 PO 3005768

NOVEMBRE 2025 INSPECTION ANNUELLE - GICLEURS

- Selon le contrat
- 3x Système sous eau
 - 1x Vanne d'isolement
 - 1x Vanne de section
 - 1x Borne murale
 - 1x DAr potable
 - Visuelle (1.5)

PRIX UNITAIRE
 - 9x Boyaux

Montant forfaitaire			1 224.00
INSPECTION PAR BOYAU INCENDIE	9.00	6.60	59.40

Montant		1 283.40
TPS/GST	102087509RT0001	64.17
TVQ/PST	1002777408TQ0001	128.02
Total		1 475.59
		Net 30 jours

Alerte Protection Incendie

Nom commercial pour la recherche au registre de la TPS/TVH: Gicleurs Alerte Inc Alert Sprinklers Inc (NEQ: 1145429677)