Fill in this information to identify the case:					
Debtor	Eiger BioPharmaceuticals, Inc				
United States Ba	ankruptcy Court for the: Northern	District of Texas			
Case number	24-80040	_			

## 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.

P	art 1: Identify the Clair	n	
1.	Who is the current creditor?	Donnelley Financial Solutions  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	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
	payments to the creditor be sent?	See summary page	
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)		
		Contact phone  Contact email jamie.toombs@dfinsolutions.com	Contact phone Contact email
		Uniform claim identifier for electronic payments in chapter 13 (if you use o	ne): 
4.	Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known)	Filed on
5.	Do you know if anyone else has filed a proof of claim for this claim?	No Yes. Who made the earlier filing?	

Official Form 410 Proof of Claim

Part 2:	Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number		☑ No
	you use to identify the debtor?	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
7.	How much is the claim?	\$ 15270.75 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.  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:
10.	Is this claim based on a lease?	<ul> <li>✓ No</li> <li>✓ Yes. Amount necessary to cure any default as of the date of the petition.</li> <li>\$</li></ul>
11.	Is this claim subject to a right of setoff?	✓ No  ☐ Yes. Identify the property:

Official Form 410 **Proof of Claim** 

12. Is all or part of the claim	<b>№</b> No		
entitled to priority under 11 U.S.C. § 507(a)?	Yes. Check	k all that apply:	Amount entitled to priority
A claim may be partly priority and partly		stic support obligations (including alimony and child support) under S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
nonpriority. For example, in some categories, the law limits the amount		\$3,350* of deposits toward purchase, lease, or rental of property vices for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$
entitled to priority.	days b	s, salaries, or commissions (up to \$15,150*) earned within 180 pefore the bankruptcy petition is filed or the debtor's business ends, ever is earlier. 11 U.S.C. § 507(a)(4).	\$
	☐ Taxes	or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$
	☐ Contri	butions 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 a	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 entitled to administrative priority pursuant to 11 U.S.C. 503(b)(9)?	days befor the ordinar	ate the amount of your claim arising from the value of any goods rec e the date of commencement of the above case, in which the goods y course of such Debtor's business. Attach documentation supportin	have been sold to the Debtor in
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.	I am the trust I am a guarar I understand that a the amount of the o I have examined the I declare under per Executed on date  /s/Jamie Took Signature	itor.  itor's attorney or authorized agent.  ee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  Intor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.  In authorized signature on this <i>Proof of Claim</i> serves as an acknowled claim, the creditor gave the debtor credit for any payments received to the information in this <i>Proof of Claim</i> and have reasonable belief that the nalty of perjury that the foregoing is true and correct.    O7/05/2024  MM / DD / YYYYY	ward the debt.
	Name	Jamie Toombs First name Middle name Last	name
	Tille		TIGHTO
	Title	Accounts Receivable Manager  Dennalloy Financial Solutions	
	Company	<u>Donnelley Financial Solutions</u> Identify the corporate servicer as the company if the authorized agent is a servicer	r.
	Address		
	Contact phone	Fmail	



Official Form 410 Proof of Claim

# Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (888) 733-1544 | International (310) 751-2638

Debtor:			
24-80040 - Eiger BioPharmaceuticals, Inc			
District:			
Northern District of Texas, Dallas Division	_		
Creditor:	Has Supporting Doc	umentation:	
Donnelley Financial Solutions	Yes, supporting	g documentation successfully uploaded	
35 W. Wacker Dr	Related Document Statement:		
Chicago, IL 60601, IL, 60601	Has Related Claim:		
United States	No		
Phone:	Related Claim Filed I	Зу:	
Phone 2:	Filing Party:		
Fax:	Creditor		
Email:			
jamie.toombs@dfinsolutions.com			
Other Names Used with Debtor:	Amends Claim:		
	No		
	Acquired Claim:		
	No		
Basis of Claim:	Last 4 Digits:	Uniform Claim Identifier:	
Services Performed	No		
Total Amount of Claim:	Includes Interest or 0	Charges:	
15270.75	No		
Has Priority Claim:	Priority Under:		
No			
Has Secured Claim:	Nature of Secured A	mount:	
No	Value of Property:		
Amount of 503(b)(9):	Annual Interest Rate	:	
No			
Based on Lease:	Arrearage Amount:		
No	Basis for Perfection:		
Subject to Right of Setoff:	Amount Unsecured:		
No			
Submitted By:			
Jamie Toombs on 05-Jul-2024 2:23:51 p.m. Eastern Time			
Title:			
Accounts Receivable Manager			
Company:			
Donnelley Financial Solutions			



Sold to: EIGER BIOPHARMACEUTICALS -POST PETITION

Attn: Matthew Bys

350 CAMBRIDGE AVE STE 350 PALO ALTO CA 94306

Please make checks payable to Donnelley Financial, LLC and include the invoice number on your check.

Remit with a copy of the invoice to:

Donnelley Financial, LLC P.O.Box 830181

Philadelphia PA 19182-0181

INVOICE

Batch No. 1207 TT-COC-005939 TT-SFI/COC-000021 F.E.I.N. 13-2618477

INVOICE DATE	INVOICE NUMBER	PAYABLE DATE	TERMS	BY	PAGE
05/07/24	1275840500	05/17/24	Net 10 days from DOI	EB/ka	1 of 2

## EIGER BIOPHARMACEUTICALS

XBRL Translation and Filing - On-boarding Amendment No. 1 to Form 10-K EDGAR Filing Annual Report For Fiscal Year Ended December 31, 2023 P.O. No. 2623-2

## **EDGAR Preparation and Transmission**

30	Page(s) converted from word processing to EDGAR format	\$26.30	\$789.00
30	Page(s) converted from word processing to EDGAR format on a rush basis	\$17.10	\$513.00
12	EDGAR alteration page(s)	\$47.25	\$567.00
12	EDGAR alteration page(s) on a rush basis	\$26.30	\$315.60
12	EDGAR page(s) current blacklined	\$4.20	\$50.40
58	Exhibit Index Hyperlink(s)	\$10.50	\$609.00
	Cloning XBRL files for 10-Q/10-K Amendments		\$2,500.00
2	Additional XBRL detailed footnote retranslation(s)	\$500.00	\$1,000.00
2	XBRL retranslation(s) same day of EDGAR filing	\$250.00	\$500.00
30	Page transmission to the SEC, Form 10-K/A, includes set-up, testing of codes, assembling of file, submission, confirmation and acceptance		\$184.00
. Diatuil	aution Commisses		

### **Electronic Distribution Services**

04/29/24

9	File(s) converted to PDF	\$95.00	\$855.00
9	E-mail(s), per address		Included
35	Additional e-mail(s), per address	\$10.00	\$350.00

## Weekend/Holiday Overtime

04/29/24	0.50 Shift(s) Composition	\$8,500.00	\$4,250.00
	0.50 Shift(s) Staff Support	\$3,500.00	\$1,750.00

TOTAL THIS INVOICE

\$14,233.00



Sold to: EIGER BIOPHARMACEUTICALS -POST PETITION

Attn: Matthew Bys

350 CAMBRIDGE AVE STE 350

PALO ALTO CA 94306

Please make checks payable to Donnelley Financial, LLC and include the invoice number on your check.

Remit with a copy of the invoice to:

Donnelley Financial, LLC P.O.Box 830181

Philadelphia PA 19182-0181



Batch No. 1207 TT-COC-005939 TT-SFI/COC-000021 F.E.I.N. 13-2618477

INVOICE DATE INVOICE NUMBER	PAYABLE DATE	TERMS	BY	PAGE
05/07/24 <b>1275840500</b>	05/17/24	Net 10 days from DOI	EB/ka	2 of 2

BMT-PEFC-COC-1517

For information about ACH, Wire payment or W9 information please contact us at Accounts-Receivable@dfinsolutions.com

### **PAYMENT BY CHECK**

Please record the invoice number on your check: 1275840500

#### ACH/EFTS

Account #: 4645223816
Routing # 071921891
PNC Bank, N.A.
249 Fifth Avenue
Pittsburgh, PA 15222
Name on account : Donnelley Financial, LLC
Transmit in CTX format. If CTX is not possible, please send
remittance information by e-mail to cashapplications@dfinsolutions.com

#### **OVERNIGHT DELIVERY**

PNC Bank c/o Donnelley Financial, LLC Lockbox 830181 525 Fellowship Raod, Suite 330 Mt. Laurel, NJ 08054-3415 Please send remittance information with payment

#### **WIRE TRANSFER INFO**

DONNELLEY FINANCIAL, LLC
PNC Bank, N.A.
249 Fifth Avenue
Pittsburgh, PA 15222
Account #: 4645223816
Route #: 041000124
Swift Code: PNCCUS33
Please send remittance information
by e-mail to cashapplications@dfinsolutions.com

ATTENTION: Please note the remittance address on this invoice has changed. Please ensure your A/P system is updated accordingly.

## **Donnelley Financial Solutions**

Please make checks payable to Donnelley Financial Solutions and include the invoice number on your check. Remit with a copy of the invoice to:

Donnelley Financial, LLC P.O.Box 830181

Philadelphia PA 19182-0181

INVOICE

TT-COC-005939 TT-SFI/COC-000021 F.E.I.N. 13-2618477

INVOICE DATE	INVOICE NUMBER	PAYABLE DATE	TERMS	BY	PAGE
01/30/24	1274528300	02/09/24	Net 10 days from DOI	EB/st	1 of 3

Sold to: EIGER BIOPHARMACEUTICALS INC

Attn: Matthew Bys

350 CAMBRIDGE AVE STE 350 PALO ALTO CA 94306

## EIGER BIOPHARMACEUTICALS

Form 8-K Current Report Dated January 18, 2024 P.O. No. 2623-2

### **EDGAR Preparation and Transmission**

	3	Page(s) converted from word processing to EDGAR format	\$26.30	\$78.90
	3	Page(s) converted from word processing to EDGAR format on a rush basis	\$17.10	\$51.30
	1	EDGAR alteration page(s)	\$47.25	\$47.25
1 EDGAR alteration page(s) on a rush basis		EDGAR alteration page(s) on a rush basis	\$26.30	\$26.30
	1	Fast Act cover tagging - 8-K		\$150.00
	3	Page transmission to the SEC, Form 8-K, includes set-up, testing of codes,		\$184.00
		assembling of file, submission, confirmation and acceptance		

### **Electronic Distribution Services**

01/24/24

4	File(s) converted to PDF	\$95.00	\$380.00
4	4 E-mail(s), per address		Included

## **Donnelley Financial Solutions**

Sold to: EIGER BIOPHARMACEUTICALS INC

Attn: Matthew Bys

350 CAMBRIDGE AVE STE 350

PALO ALTO CA 94306

Please make checks payable to Donnelley Financial Solutions and include the invoice number on your check.

Remit with a copy of the invoice to:

Donnelley Financial, LLC P.O.Box 830181 Philadelphia PA 19182-0181 INVOICE

TT-COC-005939 TT-SFI/COC-000021 F.E.I.N. 13-2618477

INVOICE DATE	INVOICE NUMBER	PAYABLE DATE	TERMS	BY	PAGE
01/30/24	1274528300	02/09/24	Net 10 days from DOI	EB/st	2 of 3

12 E-mail(s), per address

\$10.00

\$120.00

TOTAL THIS INVOICE

\$1,037.75

## **Donnelley Financial Solutions**

Sold to: EIGER BIOPHARMACEUTICALS INC

Attn: Matthew Bys

350 CAMBRIDGE AVE STE 350

PALO ALTO CA 94306

Please make checks payable to Donnelley Financial Solutions and include the invoice number on your check.

Remit with a copy of the invoice to:

Donnelley Financial, LLC P.O.Box 830181

Philadelphia PA 19182-0181

INVOICE

TT-COC-005939 TT-SFI/COC-000021 F.E.I.N. 13-2618477

INVOICE DATE	INVOICE NUMBER	PAYABLE DATE	TERMS	BY	PAGE
01/30/24	1274528300	02/09/24	Net 10 days from DOI	EB/st	3 of 3

### If you need assistance, please call Errol Buxton at 650-845-6631

BMT-PEFC-1517

For information about ACH, Wire payment or W9 information please contact us at DFSEFTandW9Requests@dfsco.com

### **PAYMENT BY CHECK**

Please record the invoice number on your check: 1274528300

#### **ACH/EFTS**

Account #: 4645223816
Routing # 071921891
PNC Bank, N.A.
249 Fifth Avenue
Pittsburgh, PA 15222
Name on account : Donnelley Financial, LLC
Transmit in CTX format. If CTX is not possible, please send

remittance information by e-mail to cashapplications@dfsco.com

#### **OVERNIGHT DELIVERY**

PNC Bank c/o Donnelley Financial, LLC Lockbox # 531832 Phoenix Business Park 1669 Phoenix Pkwy Ste 210 College Park, GA 30349 Please send remittance information with payment

**WIRE TRANSFER INFO** 

DONNELLEY FINANCIAL, LLC PNC Bank, N.A. 249 Fifth Avenue Pittsburgh, PA 15222 Account #: 4645223816 Route #: 041000124 Swift Code: PNCCUS33

Please send remittance information by e-mail to cashapplications@dfsco.com

ATTENTION: Please note the remittance address on this invoice has changed. Please ensure your A/P system is updated accordingly.