FIII IN THIS IN	formation to identify the case:
Debtor 1	IMPERIAL PACIFIC INTERNATIONAL (CNMI), LLC
Debtor 2 (Spouse, if filing)	
United States	Bankruptcy Court for the: District of Northern Mariana Islands
Case number	1:24-bk-00002

FILED Clerk District Court

MAY 1 5 2024

for the Northern Mariana Islands
By\_\_\_\_\_\_(Caputy Clark)

## Official Form 410

## **Proof of Claim**

Identification Object

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 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.

1.	Who is the current creditor?	BALLEN CORPORATION DBA PACIFIC HARDWARE  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	n?		11.00				
	Where should notices and payments to the creditor be sent?	Where should notice		r be sent?	Where should payments to the creditor be sent? (if different)				
	Federal Rule of	PACIFIC HARDWARE  Name  Name							
	Bankruptcy Procedure (FRBP) 2002(g)	P.O. BOX 50325	57		Name				
		Number Street Number Street							
		SAIPAN	MP	96950					
		City	State	ZIP Code	City	State	ZIP Code		
		Contact phone 670-2	85-8718		Contact phone		_		
		Contact email Pacific	chardware.spn	@gmail.com	Contact email		_		
		Uniform claim identifier for electronic payments in chapter 13 (if you use one):							
	Does this claim amend one already filed?	☑ No ☐ Yes. Claim num	ber on court claims	s registry (if known)		Filed on MM / DI	O / YYYY		
	Do you know if anyone else has filed a proof of claim for this claim?	☑ No ☐ Yes. Who made	the earlier filing?						

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?	\$					
3.	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					
Э.	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					
		Amount necessary to cure any default as of the date of the petition:  Annual Interest Rate (when case was filed)%  Fixed  Variable					
0.	Is this claim based on a lease?	☑ No ☐ Yes. Amount necessary to cure any default as of the date of the petition. \$					
1.	Is this claim subject to a right of setoff?	☑ No □ Yes. Identify the property:					

Official Form 410 Proof of Claim page 2

2. Is all or part of the claim entitled to priority under	☑ No						
11 U.S.C. § 507(a)?	☐ Yes. Check						Amount entitled to priori
A claim may be partly priority and partly nonpriority. For example,	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).					\$	
in some categories, the law limits the amount entitled to priority.	☐ Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).					\$	
	bankru			o \$15,150°) earned with r's business ends, which			\$
	☐ Taxes	or penalties owe	ed to governmen	tal units. 11 U.S.C. § 5	07(a)(8).		\$
	☐ Contrib	utions to an em	ployee benefit pl	lan. 11 U.S.C. § 507(a	(5).		\$
	Other.	Specify subsect	ion of 11 U.S.C.	§ 507(a)() that appl	es.		\$
	* Amounts	are subject to adju	ustment on 4/01/25	and every 3 years after t	nat for case	es begun on or aft	er the date of adjustment.
Part 3: Sign Below							
The person completing	Check the appr	opriate box:					
this proof of claim must sign and date it.	☑ I am the creditor.						
RBP 9011(b).	I am the creditor's attorney or authorized agent.						
f you file this claim	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.						
electronically, FRBP 5005(a)(2) authorizes courts o establish local rules	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.						
specifying what a signature s.	e I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledge amount of the claim, the creditor gave the debtor credit for any payments received toward.						
A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	ulent claim could be up to \$500,000, I have examined the information in this <i>Proof of Claim</i> and and correct.				onable be	elief that the info	ormation is true
years, or both. 18 U.S.C. §§ 152, 157, and	both.						
3571.	Executed on da	te 05/13/202					
	_	f					
	Signature	#		-		_	
	Signature						
	Print the name	of the person	who is complet	ing and signing this	olaim:		
	Name	ZIQIANG				SONG	
		First name		Middle name		Last name	
	Title	VICE PRE	SIDENT/CO	RPORATE SECR	ETARY		
	Company BALLEN CORPORATION DBA PACIFIC HARDWARE						
		Identity the co	rporate servicer as	the company if the autho	ized agent	is a servicer.	
	Address	P.O. BOX	503257				
	==	Number	Street				
		SAIPAN			MP	96950	
		City			State	ZIP Code	
	Contact phone	670-285-8	3718		Email DA	cifichardwar	e.spn@gmail.com

Official Form 410 Proof of Claim page 3