Fill in this information to identify the case:					
Debtor 1 Imperial Pacific International (CNMI), LLC					
Debtor 2(Spouse, if filing)					
United States Bankruptcy Court for the: District of					
Case number 1:24-bk-00002					

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.

F	Part 1: Identify the Claim							
1.	Who is the current creditor?	GT Building Systems International Ptd., Inc. 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)		MP State 0777	96950 ZIP Code	Name Number Street City Contact phone Contact email	State	ZIP Code	
4.	Does this claim amend one already filed?	Uniform claim identifier for el — — — — — —				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?					

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?	\$\$ 907,215.41. Does this amount include interest or other charges?						
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).						
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.						
		paid Judgment issued by CNMI Superior Court.						
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 Attachment (Official Form 410-A) with this Proof of Claim. Motor vehicle Other. Describe:								
		Basis for perfection: Order Granting Plaintiff's Application for Writ of Execution 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) 9.00 % Fixed ☐ Variable						
		Variable						
10	. Is this claim based on a	✓ No						
10	. Is this claim based on a lease?							
		☑ No						

40 le ell en neut ef the eleine								
12. Is all or part of the claim entitled to priority under	☑ No ☐ Yes. Check	k one:			Amount entitled to priorit			
11 U.S.C. § 507(a)? A claim may be partly priority and partly	☐ Domes	tic support obligations (including .C. § 507(a)(1)(A) or (a)(1)(B).	alimony and child suppo	ort) under	\$			
nonpriority. For example, in some categories, the law limits the amount entitled to priority.	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).							
endued to phonty.	☐ 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	\$						
	☐ 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	i.	\$			
	* Amounts	are subject to adjustment on 4/01/16	and every 3 years after that	for cases b	egun on or after the date of adjustment.			
Part 3: Sign Below								
The person completing	Check the appr	onriate hov						
this proof of claim must sign and date it.	_							
FRBP 9011(b).	☐ I am the creditor.☐ I am the creditor's attorney or authorized agent.							
If 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	I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.							
to establish local rules								
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the							
A person who files a	amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.							
fraudulent claim could be fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.							
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.							
3571.	Executed on date 11/22/2024 MM / DD / YYYY							
	Colin M. Signature	Thompson						
	Print the name	of the person who is completi	ng and signing this cla	im:				
	Name	Colin Murphy Thompso						
		First name Attorney	Middle name		Last name			
	Title	Attorney						
	Company	Identify the corporate servicer as	the company if the authorize	ed agent is	a servicer.			
	Address	Paradiso Resort & Spa, Figan Ln. 301						
	, addiess	Number Street	· · · · · · · · · · · · · · · · · · ·					
		Saipan	N	1P	96950			
		City	S	tate	ZIP Code			
	Contact phone	6702330777	E	mail	cmtlaw@live.com			