

PROOF OF CLAIM

All notices or correspondence regarding this claim must be forwarded to the following address:

(Street, City, Province/State, Country, & Postal/Zip Code)

Business/Home/Cell phone _____ Fax: _____

IN THE MATTER OF THE RECEIVERSHIP OF THE SYMPHONY DEVELOPMENT CORPORATION

and the claim of _____, creditor

I, _____ of _____ do hereby certify:
(Name of creditor or representative of creditor) (City & Province/State)

1. That I am a creditor of the above named debtors ☐, or I am the (state position or title) _____ of the creditor ☐
2. That I have knowledge of all the circumstances connected with the claim referred to below.
3. That the debtors were, at the date of the receivership, namely the **12TH of January, 2010**, were and still are indebted to the creditor in the sum of \$ _____, as specified in the statement of account (or affidavit) attached and marked as Schedule "A", after deducting any counterclaims to which the debtor is entitled. Claims must be submitted in CDN dollars only. For ease of reference, the US exchange rate as at the date of filing is **1.1278**.
4. **Check and complete appropriate category:**
 - A ☐ **Unsecured claim** of \$ _____
That in respect of this debt, I do not hold any assets of the debtor as security
 - C ☐ **Secured claim** of \$ _____
That in respect of this debt, I hold assets of the debtor valued at \$ _____ as security, particulars of which are as attached.
5. That, to the best of my knowledge, ☐ I am related **OR** ☐ I am not related to the debtor within the meaning of Section 4 of the Bankruptcy and Insolvency Act ("Act" or "BIA"), and ☐ have **OR** ☐ have not dealt with the debtor in a non-arm's length manner.
6. That the following are the payments I have received from, and/or the credits that I have allowed to, and the transfers at undervalue within the meaning of subsection 2(1) of the Act that I have been privy to or a party to with the debtor, within the three months (or, if the creditor and debtor are related within the meaning of section 4 of the Act or were not dealing with each other at arm's length, within the 12 months) immediately before the date of the receivership:

(list on separate paper if necessary)

Dated at _____, this _____ day of _____, 20_____
(City/Town, etc.) (Day) (Month)

(Signature of witness)

(Creditor)

Notes: If an affidavit is attached, it must have been made before a person qualified to take an affidavit.

INSTRUCTIONS FOR COMPLETION OF PROOF OF CLAIM

Every creditor who does not prove his claim is not entitled to share in any distribution. Claims not completed correctly in every respect will be returned. In completing the Proof of Claim, your attention is directed to the following requirements:

Proof of Claim:

1. Individuals who are the creditor should tick the appropriate box. If you are acting for a corporation or another person, you must state the capacity in which you are acting, such as, "Credit Manager", "Counsel", "Authorized Agent", etc.
2. The person signing the form must have knowledge of the circumstances connected with the claim.
3. The creditor must submit the total amount owing by the debtor, in CDN funds. Further, a Statement of Account containing details and support of the claim must be attached and marked "A".
4. The nature of your claim must be indicated by ticking the type of claim which applies.

ALL TYPES OF CLAIMS MUST BE SUPPORTED WITH DOCUMENTATION SHOWING HOW YOU ARRIVED AT YOUR TOTAL CLAIM.

5. The BIA defines persons related to a debtor. If the creditor is related by blood or marriage to the debtor, the creditor should consider him/herself to be a related person. If the debtor is a corporation, a creditor would be related if he/she was a shareholder or if he/she was controlled by the same shareholders as the debtor.
6. The person signing the form must provide full details of any and all payments and/or credits received from or allowed to the debtor during the period indicated. A blank answer will indicate there were no such payments or credits.

PLEASE FORWARD ALL DOCUMENTS TO:

PricewaterhouseCoopers Inc.
Receiver and Manager of The Symphony Development Corporation
Attention: Brad Ristivojevic
700 - 250 Howe Street
Vancouver
BC V6C 3S7

Phone: (604) 806-7050 ext. 4929

Fax: (604) 806-7806 (Please include a cover page directed to the person's name above)