

STATE OF WISCONSIN CIRCUIT COURT MILWAUKEE COUNTY

In re:

FOLLY ADIEUX, INC.,  
d/b/a SHORETRIPS,

Case No.: 20-CV-6868

Assignor.

**PROOF OF CLAIM**

\_\_\_\_\_, of \_\_\_\_\_  
(Print Your Name) (Company Name)

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Street Address) (City) (State & Zip)

deposes and says:

1. Amount of Claim \$\_\_\_\_\_.
2. Basis for Claim: \_\_\_\_\_
3. Date Debt Was Incurred: \_\_\_\_\_
4. If Court Judgment, Dated Obtained: \_\_\_\_\_
5. Credits and Setoffs: The amount of all payments on this claim has been credited and deducted for the purpose of making this claim. In filing this claim, creditor has deducted all amounts that creditor owes to debtor.
6. Security: Creditor or anyone on creditor's behalf, does not hold any security, collateral or lien for the debt except: \_\_\_\_\_
7. Supporting Documents: Attach copies of supporting documents such as promissory notes, purchase orders, invoices, itemized statements, contracts, judgments or evidence of security interest or liens. If the documents are not available, explain. If they are voluminous, attach a summary.
8. Attorney: Creditor appoints the undersigned as creditor's attorney to receive future notices.

\_\_\_\_\_  
Creditor Signature

\_\_\_\_\_  
Creditor's Attorney (if any)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number

**[DUE DATE AND VERIFICATION ON PAGE 2]**

**Required Verification:**

Subscribed and sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_, \_\_\_\_.

\_\_\_\_\_  
Notary Public: \_\_\_\_\_ County  
State of \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

**Creditors: Claims Must Be Filed By:**  
**March 1, 2021**

Honorable Timothy M. Witkowiak  
Milwaukee County Courthouse  
901 N. 9th Street, Room 415  
Milwaukee, WI 53233