SCHEDULE

FORM C

PROOF OF CLAIM BY FINANCIAL CREDITORS

[Under Regulation 8 of the Insolvency and Bankruptcy Board of India (Insolvency Resolution Process for CorporatePersons) Regulations, 2016]

[Date]

То

The Interim Resolution Professional / Resolution Professional, [Name of the Insolvency Resolution Professional / Resolution Professional] [Address as set out in public announcement]

From

[Name and address of the registered office and principal office of the financial creditor]

Subject: Submission of proof of claim.

Madam/Sir,

[Name of the financial creditor], hereby submits this proof of claim in respect of the corporate insolvency resolution process in the case of [name of corporate debtor]. The details for the same are set out below:

PARTICULARS		
1.	NAME OF FINANCIAL CREDITOR	
2.	IDENTIFICATION NUMBER OF FINANCIAL CREDITOR	
	(IF AN INCORPORATED BODY PROVIDE	
	IDENTIFICATIONNUMBER AND PROOF OF	
	INCORPORATION. IF A PARTNERSHIP OR INDIVIDUAL	
	PROVIDE IDENTIFICATION RECORDS* OF ALL THE	
_	PARTNERS OR THE INDIVIDUAL)	
3.	ADDRESS AND EMAIL ADDRESS OF FINANCIAL CREDITOR	
	FOR CORRESPONDENCE.	
4.	TOTAL AMOUNT OF CLAIM	
	(INCLUDING ANY INTEREST AS AT THE	
	INSOLVENCYCOMMENCEMENT DATE)	
5.	DETAILS OF DOCUMENTS BY REFERENCE TO WHICH	
	THEDEBT CAN BE SUBSTANTIATED	
6.	DETAILS OF HOW AND WHEN DEBT INCURRED	
7.	DETAILS OF ANY MUTUAL CREDIT, MUTUAL DEBTS,	
	OROTHER MUTUAL DEALINGS BETWEEN THE CORPORATE	
	DEBTOR AND THE CREDITOR WHICH MAY BE SET-OFF	
	AGAINST THE CLAIM	
8.	DETAILS OF ANY SECURITY HELD, THE VALUE OF	
	THESECURITY, AND THE DATE IT WAS GIVEN	
9.	DETAILS OF THE BANK ACCOUNT TO WHICH	
	THEAMOUNT OF THE CLAIM OR ANY PART THEREOF CAN	
	BE TRANSFERRED PURSUANT TO A RESOLUTION PLAN	

10.	LIST OF DOCUMENTS ATTACHED TO THIS PROOF OFCLAIM			
	IN ORDER TO PROVE THE EXISTENCE AND NON-PAYMENT			
	OF CLAIM DUE TO THE FINANCIAL CREDITOR ⁱ			
Signature of financial creditor or person authorised to act on his behalf				
[Please enclose the authority if this is being submitted on behalf of an financial creditor]				
Name in BLOCK LETTERS				
Position with or in relation to creditor				
Address of person signing *PAN number, passport, AADHAAR Card or the identity card issued by the Election Commission of India.				
*PAN number, passport, AADHAAR Card of the identity card issued by the Election Commission of India.				
	AFFIDAVIT			
I, [name of deponent], currently residing at [insert address], do solemnly affirm and state as follows:-				
1.	[Name of corporate debtor], the corporate debtor was, at the insolvency commencement date, being theday of 20, justly and truly indebted to me in the sum of Rs. [insert amount of claim].			
2. In respect of my claim of the said sum or any part thereof, I have relied on the documents specified below: [Please list the documents relied on as evidence of claim]				
3.	3. The said documents are true, valid and genuine to the best of my knowledge, information and belief.			
4.	. In respect of the said sum or any part thereof, I have not nor has any person, by my order, to my knowledge or belief, for my use, had or received any manner of satisfaction or security whatsoever, save and except the following:			
	[Please state details of any mutual credit, mutual debts, or other mutual dealings between the corporate debtorand the creditor which may be set-off against the claim.]			
Sole	emnly, affirmed at [insert place] on day, the day of 20			
Before me,				
Notary/Oath Commissioner				
	Deponent's signature			
	VERIFICATION			
I, the Deponent hereinabove, do hereby verify and affirm that the contents of paragraph toof this affidavit are true and correct to my knowledge and belief and no material facts have been concealed therefrom.				
Verified at on this day of 201				
	Deponent's signature			