

CSD 1001A [07/01/18]

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UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA
325 West F Street, San Diego, California 92101-6991

In Re THE ROMAN CATHOLIC BISHOP OF SAN DIEGO

Debtor.

Order Entered on
November 14, 2024
by Clerk U.S. Bankruptcy Court
Southern District of California

BANKRUPTCY NO. 24-02202

Date of Hearing: November 7, 2024

Time of Hearing: 11:00 a.m.

Name of Judge: Christopher B. Latham

ORDER ON

**DEBTOR'S MOTION FOR ORDER (1) FIXING TIME FOR FILING PROOFS OF CLAIMS; (2) APPROVING
PROOF OF CLAIM FORMS; (3) PROVIDING CONFIDENTIAL PROTOCOLS; AND (4) APPROVING FORM
AND MANNER OF NOTICE**

The court orders as set forth on the continuation pages attached and numbered 2 through 53 with exhibits,
if any, for a total of 53 pages. Motion/Application Docket Entry No. 217.

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November 14, 2024

DATED:


Judge, United States Bankruptcy Court

ORDER ON MOTION FOR ORDER (1) FIXING TIME FOR FILING PROOFS OF CLAIM;
DEBTOR: THE ROMAN CATHOLIC BISHOP OF SAN DIEGO

CASE NO: 24-02202

The Court, having considered The Roman Catholic Bishop of San Diego's ("Debtor") Motion for Order: (1) Fixing Time for Filing Proofs of Claim; (2) Approving Proof of Claim Forms; (3) Providing Confidential Protocols; and (4) Approving Form and Manner of Notice (the "Motion"), the Catholic Relief Insurance Company's Partial Opposition to Debtor's Motion Re Proofs of Claim (the "Partial Opposition"), the Reply of the Official Committee of Unsecured Creditors in Support of Debtor's Motion for Order: (1) Fixing Time for Filing Proofs of Claim; (2) Approving Proof of Claim Forms; (3) Providing Confidentiality Protocols; and (4) Approving Form and Manner of Notice (the "Committee Reply"), and Debtor's Reply to Partial Opposition to Debtor's Motion for Order: (1) Fixing Time for Filing Proofs of Claim; (2) Approving Proof of Claim Forms; (3) Providing Confidentiality Protocols; and (4) Approving Form and Manner of Notice (the "Debtor Reply"), and the Court having found that it has jurisdiction to consider the Motion and the relief requested therein, and after argument and for the reasons stated on the record in open court on November 7, 2024, the Court, finding good cause therefore,

HEREBY ORDERS:

1. The Motion is granted and the Partial Opposition is overruled.
2. The General Proof of Claim Form, the Confidential Survivor Proof of Claim Form, including Confidential Survivor Supplement, the Confidentiality Agreement, the General Bar Date Notice, the Survivor Claim Bar Date Notice, the Publication Notice, and the Committee Support Letter, substantially in the forms attached hereto as Exhibits A, B, C, D, E, F, and G, respectively, and the manner of providing notice of the Bar Date proposed in the Motion and set forth herein, are approved in all respects under Fed. R. Bankr. P. 2002, 3003, and 9008 and L. Bankr. R. 3003-1. The form and manner of notice of the Bar date approved by this Order (the "Bar Date Order") are deemed to fulfill the notice requirements of the Federal Rules of Bankruptcy Procedure and the Local Rules of Bankruptcy Procedure, and notice of the Bar Date in the form and manner proposed by Debtor is fair and reasonable and will provide good, sufficient, and due notice to all creditors and interest holders of their rights and obligations in connection with claims they may assert against Debtor's estate in this chapter 11 case. Accordingly, Debtor is authorized to publish the Bar Date Notices in the manner described in this Order.
3. Except as provided in paragraph 6 of this Bar Date Order, any person or entity, other than government units (as defined in 11 U.S.C. 101(27)), holding a prepetition claim against Debtor must file a proof of claim in accordance with the procedures described herein on or before February 3, 2025 (the "Bar Date"). The Bar Date applies to all persons and entities, other than government units, holding claims, including section 503(b)(9) claims, against the Debtor (whether secured, unsecured priority, or unsecured nonpriority) that arose prior to or on the Petition Date.
4. Except as provided in paragraph 6 of this Bar Date Order, in accordance with section 502(b)(9) of the Bankruptcy Code, any governmental unit holding a prepetition claim against the Debtor must file a proof of claim in accordance with the procedures described herein on or before February 3, 2025 (the "Government Bar Date"), including governmental units holding claims against the Debtor for unpaid taxes, whether such claims arise from prepetition tax years or periods or prepetition transactions to which the Debtor was a party.
5. Except as provided in paragraph 6 of this Bar Date Order, any person or entity holding a prepetition claim arising from Abuse (defined below) for which the individual believes the Debtor may be liable, must file a Confidential Survivor Claim Proof of Claim and may also file a voluntary Confidential Survivor Supplement, in accordance with the procedures described in this Bar Date Order on or before February 3, 2025. For purposes of this Bar Date Order:

(a) "Abuse" means conduct giving rise to a Survivor Claim.

(b) A "Survivor Claim" is defined as any Claim (as defined in section 101(5) of the Bankruptcy Code) against Debtor resulting or arising or related to in whole or in part, directly or indirectly from any action or alleged sexual conduct or misconduct, grooming, sexual abuse or molestation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually-related physical, psychological, or emotional harm, or contacts, or interactions of a sexual nature between a child and an adult, or a nonconsenting adult and other adult, sexual assault, sexual battery, sexual psychological or emotional abuse, humiliation, intimidation, any other conduct constituting a sexual offense, or any other sexual misconduct, and seeking monetary damages or any other relief based upon the conduct described above, under any theory of liability, including, but not limited to, vicarious liability, any negligence-based theory, conspiracy, fraudulent concealment, intentional tort, continuing tort, public nuisance, invasion of privacy, breach of alleged duties imposed by

The Charter for the Protection of Children and Young People, Canon Law or other Catholic Church documents or principles, contribution, indemnity, or any other theory based on any acts or failures to act by the Debtor or any other person or entity for whose acts or failures to act the Debtor is or may be responsible, including, but not limited to, claims against clergy, deacons, seminarians, employees, teachers, or volunteers. Survivor Claim includes all claims for Childhood Sexual Assaults, as that term is defined by California Code of Civil Procedure section 340.1(d).

(c) A "Survivor Claimant" is a person who asserts a Survivor Claim.

6. The following entities whose claims otherwise would be subject to the Bar Date shall not be required to file proofs of claim in this chapter 11 case:

(a) Any person or entity that has already properly filed a proof of claim against Debtor with the clerk of the Court for the United States Bankruptcy Court for the Southern District of California or with Donlin Recano.

(b) Any person or entity: (i) whose claim is listed in the Schedules or any amendments thereto, and (ii) whose claim is not described therein as "disputed," "contingent," or "unliquidated," and (iii) which does not dispute the amount or classification of its claim as set forth in the Schedules;

(c) Professionals retained pursuant to orders of this Court who assert administrative claims for payment of fees and expenses subject to the Court's approval under Sections 330, 3319a) and 503(b) of the Bankruptcy Code;

(d) Any person or entity that asserts an administrative expense claim against Debtor under Sections 503(b)(1) through (8) of the Bankruptcy Code.

(e) Any person or entity whose claim has been paid in full; and

(f) The United States Trustee regarding a claim for quarterly fees under 28 U.S.C. 1930(a)(6).

7. Debtor shall retain the right to: (i) dispute, or assert offsets or defenses against, any filed claim or any claim listed or reflected in the Schedules as to nature, amount, liability, classification or otherwise; and (ii) subsequently designate any claim as disputed, contingent or unliquidated.

8. Subject to the provisions of paragraph 6 of this Bar Date Order, the following entities must file a proof of claim on or before the applicable Bar Date:

(a) Any entity or person whose prepetition claim against Debtor is not listed in the Debtor's Schedules or whose prepetition claim is listed in the Schedules but is listed as disputed, contingent or unliquidated and that desires to participate in this chapter 11 case or share in any distribution in this chapter 11 case;

(b) Any entity or person that believes that its prepetition claim is improperly classified in the Schedules or is listed in an incorrect amount and that desires to have its claim allowed in a classification or amount other than that identified in the Schedules; and

(c) Any person who believes that he or she has or may have a Survivor Claim for which the person believes Debtor may be liable.

9. Pursuant to Fed. R. Bankr. P. 3003(c)(2), any ENTITY THAT IS REQUIRED TO FILE A PROOF OF CLAIM IN THIS CHAPTER 11 CASE PURSUANT TO THE BANKRUPTCY CODE, THE FEDERAL RULES OF BANKRUPTCY PROCEDURE OR THIS BAR DATE ORDER WITH RESPECT TO A PARTICULAR CLAIM AGAINST DEBTOR, BUT THAT FAILS TO DO SO BY THE APPLICABLE BAR DATE, MAY NOT BE TREATED AS A CREDITOR WITH RESPECT TO SUCH CLAIM FOR THE PURPOSES OF VOTING ON AND DISTRIBUTION UNDER ANY CHAPTER 11 PLAN PROPOSED AND/OR CONFIRMED IN THIS CASE.

10. Within ten (10) business days of the entry of this Bar Date order, and except as provided in paragraph 11 below concerning Survivor Claims, Debtor shall serve by United States Mail, first-class postage prepaid: (a) all known entities holding potential prepetition claims against the Debtor, and their counsel (if known); (b) all parties that have requested special notice in this case; and (c) the United States Trustee, the following documents: (i) the General Bar Date Notice substantially in the form attached as Exhibit D to this Bar Date Order; and (ii) a copy of the Proof of Claim Form substantially in the form attached as Exhibit A to this Bar Date Order.

11. Within ten (10) business days of the entry of this Bar Date Order, Debtor shall serve by United States mail, first-class postage prepaid: (i) the Survivor Claim Bar Date Notice substantially in the form attached as Exhibit E to the Bar Date Order, (ii) a copy of the Confidential Survivor Proof of Claim upon all known Survivor Claimants and their counsel, if known (if a Survivor Claimant's counsel has appeared in the bankruptcy case on behalf of a Survivor Claimant or provided written consent to Debtor's counsel, Debtor is authorized to serve the Survivor Claimant's counsel with the Survivor Claim Bar Date Notice), substantially in the form attached as Exhibit B to this Bar Date Order, and (iii) a letter from counsel to the Committee in the form attached hereto as Exhibit G.

12. Debtor shall also make the Bar Date Notices available to the public in the following manner:

(a) Debtor shall post on the home page of the Diocese's website a copy of the General Bar Date Notice and General Proof of Claim as well as a copy of the Survivor Claim Bar Date Notice and the Confidential Survivor Claim Form. Debtor shall promptly request Survivors Network of those Abused by Priests, a survivor advocacy group, and BishopAccountability.org, Inc., to post the Survivor Claim Bar Date Notice on their respective websites.

(b) To the extent possible, in the same or similar publications, Debtor shall cause a copy of the notice substantially in the form attached as Exhibit F to this Bar Date Order (the "Publication Notice"), no smaller than a 1/8 page advertisement in each newspaper listed in (i) through (iv) below, to be published as follows:

(i) Once, in English in the Western edition of The Wall Street Journal, and twice, in English, in the San Diego region edition of USA Today, on the first available, reasonably practical date after entry of the Bar Date Order;

(ii) Twice each, in English, in the following daily (or near daily) newspapers, first on the first available, reasonably practical date after entry of the Bar Date Order and second, approximately one month prior to the expiration of the Survivor Claim Bar Date: San Diego Union Tribune, Times of San Diego, Los Angeles Times, Southern Cross, North County Daily Star, The Community Paper, Holtville Tribune, Calexico Chronicle and Imperial Valley Press;

(iii) Twice each, in Spanish in El Latino, La Prensa, San Diego Red, Southern Cross, and Adelante Valley, first on the first available, reasonably practical date after entry of the Bar Date Order and second, approximately one month prior to the expiration of the Survivor Claim Bar Date.

13. Additionally, Debtor shall provide further notice of the Bar Date by taking the following measures:

(a) Debtor will request that each Parish include in the bulletins produced by the Parishes located within the geographic territory of the Diocese, bi-weekly from the first available date after entry of the Bar Date Order until the Survivor Claim Bar Date, an announcement that will be placed in the language in which such Parish conducts Mass (English or Spanish).

(b) Debtor will request each Parish in the Diocese to post a flyer announcing the Survivor Claim Bar Date in a prominent location for at least six weeks prior to the Survivor Claim Bar Date.

(c) Debtor will post the Survivor Claim Bar Date and information on how to submit a Survivor Claim Form at least once a week for the six weeks prior to the Bar Date on the following social media accounts:

(i) <https://instagram.com/dioceseofsandiego>

(ii) <https://www.facebook.com/DioceseofSanDiego>

14. Debtor is authorized, under Section 503(b) of the Bankruptcy Code, to pay the costs of mailing and publication as described herein.

15. All Survivor Proof of Claim and Confidential Survivor Supplements shall be treated as confidential in accordance with the following confidentiality protocols:

(a) Potential Survivor Claimants are directed not to file a Survivor Claim Form with the Court. Instead, all Survivor Claim Forms are directed to be sent to the Claims Agent in accordance with the procedures set forth in the Survivor Claim Bar Date Notice. Any claim that appears to be a Survivor Claim that is filed without a Confidential Survivor Supplement or as a General Claim shall be treated by the Claims Agent as a confidential claim pending resolution of the claimant's intent regarding confidential treatment of such claim.

(b) Survivor Claim Forms submitted by Survivor Claimants will not be available to the general public. The Confidentiality Protocol is for the benefit of all Survivor Claimants. Accordingly, Survivor Claimants may elect to make any of the information contained in their own Survivor Claim Form public; provided, however, notwithstanding that a Survivor Claimant may disclose information on such claimant's Survivor Claim, such disclosure shall not constitute a waiver of confidentiality or privilege and no other party may disclose any information for such Survivor Claim, except as allowed by Permitted Parties, as defined below.

(c) Survivor Claim Forms submitted by a Survivor Claimant shall be held and treated as confidential by Debtor and Debtor's counsel and copies thereof shall be provided by Debtor or Debtor's counsel to the parties listed below (the "Permitted Parties") and to such other persons that may be granted access to the Survivor Claim by order of the Court. No party (including a Permitted Party) may obtain copies of Survivor Claims unless such party first executes a confidentiality agreement substantially in the form attached hereto as Exhibit C (the "Confidentiality Agreement"). Notwithstanding anything herein to the contrary, the U.S. Trustee shall have full access to the Survivor Claims without executing a Confidentiality Agreement. Executed Confidentiality Agreements shall be provided to Debtor's counsel, insurers, reinsurers of Debtor, Committee and any other third-party administrator of Debtor's insurance program; provided, however, that executed Confidentiality Agreements for Insurer Permitted Parties (as defined below) shall be maintained by counsel to such insurers and need not be provided to the Committee or Debtor absent Court approval upon a showing of good cause. Counsel of record in the above captioned case to any Permitted parties shall keep confidential and not disclose the contents of any Confidential Survivor Claim Form, including the Confidential Supplement except as otherwise provided by the confidentiality provision herein or order of the court. Each Permitted Party (as defined below) together with their respective successors, regulators, reinsurers, administrators and counsel, shall only be required to execute a single Confidentiality Agreement on behalf of those entities and their respective clients, which shall be deemed binding on their entire firm and their respective clients, and the employees, partners, officers and directors of the foregoing. Permitted Parties shall keep confidential and not disclose the contents of any Survivor Claim Form except to other Permitted Parties that have complied with this Order or as otherwise provided by the confidentiality provision herein or order of the court.

(d) Permitted Parties may use the Confidential Survivor Claim Forms and any Confidential Information from such Confidential Survivor Claim Forms contained therein, only in connection with the evaluation, prosecution or defense of the claims asserted in such Confidential Survivor Claim Form in Debtor's Chapter 11 Case; any related adversary proceedings or contested matters in the Chapter 11 Case; any related insurance or reinsurance coverage demands, claims, disputes, or litigation; and settlement negotiations or mediations regarding all of the foregoing, and as otherwise required by applicable federal or state laws or regulations; provided however that the Committee does not concede that a Permitted Party is a party in interest in the Chapter 11 Case for purposes of, among other things, having standing to object to Survivor Claims. Survivor Claimants and the Committee reserve their rights to oppose any Permitted Party's assertion it is a party in interest in the Chapter 11 Case.

(e) The Permitted Parties (the "Permitted Party List") include:

(1) Counsel and other professionals for the Debtor retained pursuant to an order of the Bankruptcy Court, including partners, counsel, associates, and employees of such professionals, who are necessary to assist the Debtor in reviewing and analyzing the Survivor Claims;

(2) The Bishop (Cardinal) of the Debtor and employees of the Debtor who are necessary to assist the Bishop (Cardinal) in reviewing and analyzing the Survivor Claims;

(3) Counsel and other professionals (including consultants and experts) for the Committee, including partners, counsel, associates, and employees of such professionals who are necessary to assist the Committee in reviewing and analyzing the Survivor Claims;

(4) Any insurer for the Debtor, together with its successors, administrators, retrocessionaires, reinsurers, reinsurance intermediaries, and their counsel and other professionals, including partners, counsel, associates, consultants, experts, regulators, auditors, and employees of such professionals, who are necessary to assist the foregoing in reviewing and analyzing Survivor Claims (collectively, the "Insurer Permitted Parties");

(5) Any unknown claims representative appointed pursuant to an order of the Court in this case;

(6) Any mediator appointed pursuant to an order of this Court to mediate the terms of a settlement or Plan of reorganization in this case;

(7) Any special arbitrator/claims reviewer appointed pursuant to an order of this Court to review and resolve the claims of Survivor Claimants;

(8) Any trustee or functional equivalent thereof appointed to administer payments to Survivor Claimants including pursuant to a plan of reorganization or a proposed plan of reorganization;

(9) Members of the Committee and their counsel (after the Survivor Claim Form has been redacted to remove the Survivor Claimant's name, address, and any other information identified in Part 2(a) of the Survivor Claim Form and the signature block);

(10) Persons who, in addition to those identified above, are permitted access upon stipulation of the party that produced or disclosed the Survivor Claim, after notice to counsel for the Debtor, Committee and Insurer has been given and a reasonable opportunity to object;

(11) Such other persons as the Court determines should have the information in order to evaluate Survivor Claims; provided, however, that any such determination shall be made on no less than seven days' notice to Survivor Claimants.

16. For any proof of claim, including Confidential Survivor Claim Forms, to be validly and properly filed, a signed original and a copy of the completed proof of claim, together with any accompanying documentation required by Fed. R. Bankr. P. 3001(c) and 3001(d), must be delivered to Donlin Recano, Debtor's claims agent (the "Claims Agent"), at the address identified on the applicable Bar Date Notice or electronically filed with the Claims Agent so as to be received by the date as stated on the applicable Bar Date Notice. Proofs of claim may be submitted in person or by courier service, hand delivery or U.S. Mail, or electronically. Proofs of claim submitted by facsimile or e-mail shall not be accepted. Proofs of claim shall be deemed filed when actually received by the Claims Processing Agent by the applicable Bar Date. If a creditor desires to receive acknowledgement of receipt of a proof of claim, the creditor must submit to the Claims Agent by the applicable Bar Date and concurrently with submitting its original proof of claim: (i) an additional copy of the original proof of claim; and (ii) a self-addressed, stamped return envelope.

17. Debtor is authorized and empowered to take all actions necessary to implement the relief granted in this Bar Date Order.

18. Nothing contained herein shall constitute a waiver by Debtor of (a) any defenses in connection with any General Claims or Survivor Claims that are asserted against Debtor or (b) the right to assert that any General Claims or Survivor Claims are barred by applicable statutes of limitations.

19. This Bar Date Order is without prejudice to any request by Debtor, Committee or Unknown Claims Representative to modify the Survivor Claim Bar Date.

21. Under Fed. R. Bankr. P. 3002(c)(4), any claim arising from the rejection of an executory contract or unexpired lease of Debtor shall be filed within thirty (30) days after such rejection.

22. This Court shall retain jurisdiction over any and all matters arising from or relating to the implementation, interpretation or modification of this Bar Date Order.

END OF ORDER

APPROVED AS TO FORM:

Arent Fox Schiff LLP

By: /s/ Everett J. Cygal
Aram Ordbegian
Christopher K.S. Wong
Everett J. Cygal
J. Mark Fisher
Daniel J. Schufreider
Counsel for The Catholic Mutual Relief Society of America and
Catholic Relief Insurance Company

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KTBS Law LLP

By: /s/ Sasha M. Gurvitz
Thomas E. Patterson
Daniel J. Bussel
Sasha M. Gurvitz
Counsel to the Official Committee of Unsecured Creditors

CSD 1001A

EXHIBIT A

Fill in this information to identify the case:

Debtor 1 _____

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: _____ District of _____

Case number _____

Official Form 410**Proof of Claim**

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.

Part 1: Identify the Claim**1. Who is the current creditor?**

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?**Where should notices to the creditor be sent?****Where should payments to the creditor be sent? (if different)**

Federal Rule of
Bankruptcy Procedure
(FRBP) 2002(g)

Name

Name

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Contact phone

Contact phone

Contact email

Contact email

Uniform claim identifier for electronic payments in chapter 13 (if you use one):

4. Does this claim amend one already filed?
☐ No

☐ Yes. Claim number on court claims registry (if known) _____

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? _____

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ____ ____ ____ ____
7. How much is the claim? \$ _____	Does this amount include interest or other charges? <input type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. 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. _____
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> 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) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☐ No

☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ 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).

☐ Wages, salaries, or commissions (up to \$15,150*) 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 or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

☐ 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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

Check the appropriate box:

☐ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date _____
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name

First name

Middle name

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Number

Street

City

State

ZIP Code

Contact phone

Email

Official Form 410

Instructions for Proof of Claim

United States Bankruptcy Court

12/15

These instructions and definitions generally explain the law. In certain circumstances, such as bankruptcy cases that debtors do not file voluntarily, exceptions to these general rules may apply. You should consider obtaining the advice of an attorney, especially if you are unfamiliar with the bankruptcy process and privacy regulations.

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.

How to fill out this form

- Fill in all of the information about the claim as of the date the case was filed.
- Fill in the caption at the top of the form.
- If the claim has been acquired from someone else, then state the identity of the last party who owned the claim or was the holder of the claim and who transferred it to you before the initial claim was filed.
- Attach any supporting documents to this form.
Attach redacted copies of any documents that show that the debt exists, a lien secures the debt, or both. (See the definition of *redaction* on the next page.)
Also attach redacted copies of any documents that show perfection of any security interest or any assignments or transfers of the debt. In addition to the documents, a summary may be added. Federal Rule of Bankruptcy Procedure (called “Bankruptcy Rule”) 3001(c) and (d).
- Do not attach original documents because attachments may be destroyed after scanning.
- If the claim is based on delivering health care goods or services, do not disclose confidential health care information. Leave out or redact confidential information both in the claim and in the attached documents.

- A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, individual’s tax identification number, or financial account number, and only the year of any person’s date of birth. See Bankruptcy Rule 9037.
- For a minor child, fill in only the child’s initials and the full name and address of the child’s parent or guardian. For example, write *A.B., a minor child (John Doe, parent, 123 Main St., City, State)*. See Bankruptcy Rule 9037.

Confirmation that the claim has been filed

To receive confirmation that the claim has been filed, either enclose a stamped self-addressed envelope and a copy of this form or go to the court’s PACER system (www.pacer.psc.uscourts.gov) to view the filed form.

Understand the terms used in this form

Administrative expense: Generally, an expense that arises after a bankruptcy case is filed in connection with operating, liquidating, or distributing the bankruptcy estate.
11 U.S.C. § 503.

Claim: A creditor’s right to receive payment for a debt that the debtor owed on the date the debtor filed for bankruptcy. 11 U.S.C. §101 (5). A claim may be secured or unsecured.

Creditor: A person, corporation, or other entity to whom a debtor owes a debt that was incurred on or before the date the debtor filed for bankruptcy. 11 U.S.C. §101 (10).

Debtor: A person, corporation, or other entity who is in bankruptcy. Use the debtor's name and case number as shown in the bankruptcy notice you received. 11 U.S.C. § 101 (13).

Evidence of perfection: Evidence of perfection of a security interest may include documents showing that a security interest has been filed or recorded, such as a mortgage, lien, certificate of title, or financing statement.

Information that is entitled to privacy: A *Proof of Claim* form and any attached documents must show only the last 4 digits of any social security number, an individual's tax identification number, or a financial account number, only the initials of a minor's name, and only the year of any person's date of birth. If a claim is based on delivering health care goods or services, limit the disclosure of the goods or services to avoid embarrassment or disclosure of confidential health care information. You may later be required to give more information if the trustee or someone else in interest objects to the claim.

Priority claim: A claim within a category of unsecured claims that is entitled to priority under 11 U.S.C. §507(a). These claims are paid from the available money or property in a bankruptcy case before other unsecured claims are paid. Common priority unsecured claims include alimony, child support, taxes, and certain unpaid wages.

Proof of claim: A form that shows the amount of debt the debtor owed to a creditor on the date of the bankruptcy filing. The form must be filed in the district where the case is pending.

Redaction of information: Masking, editing out, or deleting certain information to protect privacy. Filers must redact or leave out information entitled to **privacy** on the *Proof of Claim* form and any attached documents.

Secured claim under 11 U.S.C. §506(a): A claim backed by a lien on particular property of the debtor. A claim is secured to the extent that a creditor has the right to be paid from the property before other creditors are paid. The amount of a secured claim usually cannot be more than the value of the particular property on which the creditor has a lien. Any amount owed to a creditor that is more than the value of the property normally may be an unsecured claim. But exceptions exist; for example, see 11 U.S.C. § 1322(b) and the final sentence of 1325(a).

Examples of liens on property include a mortgage on real estate or a security interest in a car. A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment may be a lien.

Setoff: Occurs when a creditor pays itself with money belonging to the debtor that it is holding, or by canceling a debt it owes to the debtor.

Uniform claim identifier: An optional 24-character identifier that some creditors use to facilitate electronic payment.

Unsecured claim: A claim that does not meet the requirements of a secured claim. A claim may be unsecured in part to the extent that the amount of the claim is more than the value of the property on which a creditor has a lien.

Offers to purchase a claim

Certain entities purchase claims for an amount that is less than the face value of the claims. These entities may contact creditors offering to purchase their claims. Some written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court, the bankruptcy trustee, or the debtor. A creditor has no obligation to sell its claim. However, if a creditor decides to sell its claim, any transfer of that claim is subject to Bankruptcy Rule 3001(e), any provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.) that apply, and any orders of the bankruptcy court that apply.

Do not file these instructions with your form.

EXHIBIT B

Gordon Rees Scully Mansukhani, LLP
101 W. Broadway, Suite 2000
San Diego, CA 92101

JEFFREY D. CAWDREY (SBN: 120488)
MEGAN M. ADEYEMO TX BN: 24099595) (*PRO HAC VICE*)
KATHRYN M.S. CATHERWOOD (SBN: 149170)
KATHLEEN M. PATRICK (NY BN: 5638572)(*PRO HAC VICE*)
ANNIE CARTER MATTHEWS (TX BN: 24115058) (*PRO HAC VICE*)
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kcatherwood@grsm.com
kpatrick@grsm.com
amatthews@grsm.com

Attorneys for Debtor
The Roman Catholic Bishop of San Diego

UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF CALIFORNIA

In re:

THE ROMAN CATHOLIC BISHOP OF SAN
DIEGO, a California Corporation Sole,

Debtor.

Case No. 24-02202

Chapter 11

**CONFIDENTIAL SURVIVOR
CLAIM FORM**

Dept.: 1

Courtroom: 218

Judge: Hon. Christopher B. Latham

IMPORTANT:

PLEASE COMPLETE THIS FORM SO THAT IT IS RECEIVED NO LATER THAN

FEBRUARY 3, 2025 (“BAR DATE”)

PLEASE DO NOT FILE THIS DOCUMENT WITH OR SUBMIT IT TO THE
BANKRUPTCY COURT

Important Instructions

This Survivor Claim Form is for Survivor Claimants only. The Survivor Claim Form has two separate components: (1) a mandatory three-page “Official Form 410 attached hereto (“Survivor Proof of Claim”) and (2) a voluntary Confidential Survivor Supplement, also attached hereto (“Survivor Supplement” and together, with the Survivor Proof of Claim, the “Survivor Claim Form”). If you fail to complete and submit the Survivor Supplement by the Survivor Bar Date, your claim may be subject to objection and disallowance unless you thereafter furnish additional

information in support of your Survivor Claim.

Please carefully read the Notice and Instructions that are included with this Survivor Claim Form and respond to all applicable questions. As stated in the Supplement, you may attach and incorporate your prior answers to claim questionnaires that you may have provided for most of the requested information. If you have an attorney, you should complete this form with the assistance of counsel.

Send a signed original of both parts of the completed Survivor Claim Form (the Survivor Proof of Claim and the Survivor Supplement) and one copy as follows:

If by mail, to:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of San Diego
P.O. Box 2053
New York, NY 10272- 2042

If by hand-delivery or overnight carrier, to:

Donlin, Recano & Company, Inc.
C/O Equiniti
Re: The Roman Catholic Bishop of San Diego
48 Wall Street, 22nd Floor
New York, NY 10005

You may submit a claim **electronically** at:

<https://www.donlinrecano.com/Clients/rcbsd/FileSurvivorClaim>.

The Survivor Proof of Claim form must be mailed, delivered or electronically submitted to Donlin Recano (“Donlin”) so that it is received no later than February 3, 2025.

Please note that a Survivor Proof of Claim form submitted by facsimile, telecopy or electronic mail transmission will not be accepted and will not be deemed filed.

FAILURE TO COMPLETE AND RETURN BOTH PARTS OF THE SURVIVOR CLAIM FORM MAY BE A BASIS FOR AN OBJECTION TO SUCH CLAIM AND, UNLESS YOU THEREAFTER FURNISH ADDITIONAL INFORMATION IN SUPPORT OF THE SURVIVOR CLAIM, MAY RESULT IN YOUR INABILITY TO VOTE ON A PLAN OF REORGANIZATION AND RECEIVE A DISTRIBUTION FROM THE ROMAN CATHOLIC BISHOP OF SAN DIEGO SOMETIMES REFERRED TO AS THE DIOCESE OF SAN DIEGO, REFERRED TO HERE AS “RCBSD” OR “DEBTOR.”

YOUR IDENTITY WILL BE KEPT STRICTLY CONFIDENTIAL, AND OUTSIDE THE PUBLIC RECORD OF THE BANKRUPTCY COURT. HOWEVER, THE SURVIVOR PROOF OF CLAIM AND THE INFORMATION IN THE SURVIVOR SUPPLEMENT WILL BE PROVIDED TO DEBTOR, THE OFFICIAL COMMITTEE OF UNSECURED CREDITORS, RCBSD’S INSURER(S) AND TO SUCH OTHER PERSONS AS THE BANKRUPTCY COURT DETERMINES NEED THE INFORMATION IN ORDER TO EVALUATE THE CLAIM, ONLY UNDER STRICT, COURT-APPROVED CONFIDENTIALITY GUIDELINES.

Gordon Rees Scully Mansukhani, LLP
101 W. Broadway, Suite 2000
San Diego, CA 92101

For purposes of this Survivor Proof of Claim, a Survivor Claim is defined as any Claim (as defined in section 101(5) of the Bankruptcy Code) against RCBSD resulting or arising or related to in whole or in part, directly or indirectly from any actual or alleged sexual conduct or misconduct, grooming, sexual abuse or molestation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually-related physical, psychological, or emotional harm, or contacts, or interactions of a sexual nature between a child and an adult, or a non-consenting adult and another adult, sexual assault, sexual battery, sexual psychological or emotional abuse, humiliation, intimidation, any other conduct constituting a sexual offense, or any other sexual misconduct, and seeking monetary damages or any other relief based upon the conduct described above, under any theory of liability, including, but not limited to, vicarious liability, any negligence-based theory, conspiracy, fraudulent concealment, intentional tort, continuing tort, public nuisance, invasion of privacy, Canon Law or other Catholic Church documents or principles, contribution, indemnity, or any other theory based on any acts or failures to act by the RCBSD or any other person or entity for whose acts or failures to act the RCBSD is or was allegedly responsible, including but not limited to, claims against clergy, deacons, seminaries, employees, teachers, or volunteers.

As part of a chapter 11 plan, the RCBSD may seek Court approval to release claims held by Survivor Claimants against other entities that may be related to the RCBSD but that are not debtors in this case, such as parishes and high schools.

For purposes of this Survivor Proof of Claim, a Survivor Claimant is defined as the person asserting a Survivor Claim against the RCBSD, or, if a minor, then his/her parent or legal guardian.

To be valid, the Survivor Claim must be signed by you or your attorney (if represented by one). If the Survivor Claimant is deceased or incapacitated, the Survivor Claim may be signed by the Survivor Claimant's representative or the executor or attorney for the Survivor Claimant's estate. If the Survivor Claimant is a minor, the Survivor Claim may be signed by the Survivor Claimant's parent or legal guardian, or the Survivor Claimant's attorney.

If you need more space to answer any of the below questions, please attach additional sheets of paper and indicate to which question your answer applies.

Gordon Rees Scully Mansukhani, LLP
101 W. Broadway, Suite 2000
San Diego, CA 92101

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[INSERT PROOF OF CLAIM FORM]

****CONFIDENTIAL SURVIVOR PROOF OF CLAIM****

Fill in this information to identify the case:

Debtor name: The Roman Catholic Bishop of San Diego

United States Bankruptcy Court for the: Southern District of California

Case number: 24-02202

Official Form 410**Proof of Claim**

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.

Part 1: Identify the Claim**1. Who is the current creditor?**

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?****Where should notices to the creditor be sent?**

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

Name _____

Address _____

City _____

State _____

Zip Code _____

Contact Phone _____

Contact Email _____

Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____

Where should payments to the creditor be sent? (if different)

Name _____

Address _____

City _____

State _____

Zip Code _____

Contact Phone _____

Contact Email _____

4. Does this claim amend one already filed?☐ No☐ Yes. Claim number on court claims registry (if known) _____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? _____

CONFIDENTIAL SURVIVOR PROOF OF CLAIM

Part 2: Give Information About the Claim as of the Date the Case was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any identification number used to identify the debtor: ____ _
7. How much is the claim? \$ _____	Does this amount include interest or other charges? <input type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. 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. _____
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> 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): _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____

****CONFIDENTIAL SURVIVOR PROOF OF CLAIM******12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

☐ No☐ Yes. Check one:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

☐ 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).

☐ Wages, salaries, or commissions (up to \$15,150*) 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 or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

☐ 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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

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.

Check the appropriate box:

☐ I am the creditor.☐ I am the creditor's attorney or authorized agent.☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date _____
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name

First name

Middle name

Last name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Number

Street

City

State

Zip Code

Contact Phone

Email

IN RE THE ROMAN CATHOLIC BISHOP OF SAN DIEGO
CASE NO. 24-02202

CONFIDENTIAL SURVIVOR SUPPLEMENT

PART 1: CONFIDENTIALITY

The information you share will be kept strictly confidential. This form and the information in it may be provided, pursuant to confidentiality procedures approved by the Bankruptcy Court, to the RCBSD, RCBSD's insurer(s), the Official Committee of Unsecured Creditors and its members, the United States Trustee, any unknown claims representative appointed under a plan of reorganization, any settlement trustee appointed to administer payments to Survivor claimants, and to such other persons as the Bankruptcy Court may authorize. Please be assured that these parties have agreed and are required to keep your information strictly confidential and your disclosure of information herein is not a waiver of your right to confidentiality or privilege.

**PART 2: OPTION TO INCORPORATE RESPONSES IN
PLAINTIFF SETTLEMENT QUESTIONNAIRE**

If you submitted a Confidential Plaintiff Questionnaire for Settlement Purposes (a "Questionnaire") in the action entitled *In re Diocese of San Diego Cases*, JCCP No 5105 in the Superior Court of the State of California, County of San Diego you may attach the Questionnaire and respond to any question in Parts 4 through 7 of this Confidential Supplement by stating "See Questionnaire" and reference the section/portion of the Questionnaire containing your response to the Supplement. You also may supplement your prior responses to the Questionnaire in the space provided below, but the answers from the Questionnaire that you reference will be incorporated into your sworn Supplement to your Proof of Claim unless you expressly state your intention to modify those answers in the Confidential Survivor Supplement.

You are strongly encouraged to answer all the questions in the Supplement, including by referencing portions of an attached Questionnaire, and sign and return the Supplement as stated in the instructions and the order of the Bankruptcy Court. If you fail to complete and submit the Survivor Supplement, your claim may be subject to objection and disallowance unless you thereafter furnish additional information in support of your Survivor Claim.

PART 3: IDENTIFYING INFORMATION

A. Survivor Claimant

First Name	Middle Initial	Last Name	Suffix
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Address (If party is incapacitated, is a minor or is deceased, please provide the address of the individual submitting the claim. If you are in jail or prison, your current address).

City	State/Prov.	Zip Code (Postal Code)	Country (if not USA)
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Telephone No(s):

Home: _____ Work: _____ Cell: _____

Email address: _____

Last 4 digits of Social Security Number of Claimant: _____

If you are in jail or prison, your identification number: _____

May we leave voicemails for you regarding your claim? ☐ Yes ☐ No

May we send confidential information to your email? ☐ Yes ☐ No

Birth Date: _____ ☐ Male ☐ Female
Month Day Year

Any other name, or names, by which the Claimant has been known: _____

Survivor Claimant's Attorney (if any):

Law Firm Name

Attorney's First Name	Middle Initial	Last Name
-----------------------	----------------	-----------

Street Address

City	State/Prov.	Zip Code (Postal Code)	Country (If other than U.S.A.)
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Telephone	Fax Number	Email Address
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PART 4: BACKGROUND INFORMATION

- a. Please describe your present and past marital and family status, including the names and date of marriages of spouses or partners and ages of any children.

- b. Please describe your educational history, including years of attendance and degrees received.

- c. Please describe your attendances at churches or schools within the Diocese, including years of attendance and priests, deacons or other employees with whom you interacted.

- d. Please describe your military service and your employment history, including date(s), rank(s) or job title(s), reason for leaving an employer (including retirement) and type of discharge from the military.

PART 5: NATURE OF COMPLAINT

(Attach additional sheets if necessary)

Note: If you have previously filed a lawsuit against The Roman Catholic Bishop of San Diego, also known as the Diocese of San Diego (“RCBSD”) in state or federal court, attach the complaint.

For each of the questions listed below, please complete your answers to the best of your recollection.

a. Were you sexually abused by more than one person?

☐ Yes ☐ No

If you answered “yes” to the question above because you were abused by more than one person, each of the questions in this Part 5 must be answered separately as to any claimant alleging abuse by one or more RCBSD affiliated perpetrators. Part 6 must also be answered separately for each complaint related to separate RCBSD affiliated perpetrators.

b. Who committed the acts of abuse or other wrongful conduct? Please identify each abuser by complete name(s) or other description to the best of your recollection. Please identify the title, position, or role of each abuser to the best of your recollection and the abuser’s relationship to the Diocese of San Diego. If you do not know the name(s) of each abuser, please identify them by title, position or other description (for example, approximate age, height, weight, hair color, clothing worn, identifying marks, etc.).

c. What was the abuser’s position, title or relationship (professional or other) to you (if known)?

d. Where did the Abuse or other wrongful conduct take place? Please be specific and provide all relevant information that you know, including the City and State, name of the church, school or parish (if applicable) and/or the name of any other location(s) such as the abuser’s home or car, etc. If the Abuse or other wrongful conduct took place in more than one location, please describe each location to the best of your recollection.

- e. When did the Abuse or other wrongful conduct take place? (Please be as specific as possible here for each instance of Abuse, providing exact dates, your age, grade levels, and/or season of the year (spring, summer, fall, winter), if you remember).

1. If the Abuse or wrongful conduct took place over a period of time (months or years), please state when it first started and when it stopped. (Please be as specific as possible. If you can, please indicate the month and year. If you cannot recall the month, please try to recall the year and/or season (fall, winter, spring, summer, grade and/or your age), if you remember.)

2. If the Abuse or wrongful conduct took place more than once, please state how many times it occurred, if you remember.

3. Please also state your age(s) and your grade(s) in school (if applicable) at the time the abuse or other wrongful conduct first took place. (Please be as specific as possible and include what season of the school year (if applicable) was it (fall, winter, spring, summer), if you remember.).

- f. Please describe in as much detail as you can the nature of the Abuse and what happened (for example, the circumstances, approximate number of occurrences, frequency, duration, and types of wrongful acts/abuse). If the abuse or other wrongful conduct took place on more than one occasion, please provide the requested information for each occasion. (Please use additional pages and attach them to this Proof of Claim, if necessary):

- g. Are there any other individuals whom you believe witnessed the abuse or otherwise knew about the abuse and/or would be able to corroborate the abuse, including persons at the RCBSD? If so, what are their names and contact information, if known?

- h. Did you tell anyone about the Abuse or other wrongful conduct (either at the time or any time since the Abuse took place), even if not in its entirety? If so, who did you tell, when and what did you tell that person (this would include parents, relatives, friends, the RCBSD, priests, deacons, counselors, teachers, and law enforcement authorities)? You should not disclose the substance of any communications you had with your attorney.

- i. If subsequent conduct by RCBSD or its employees or officials caused you further trauma or damage directly or indirectly related to the abuse state:

1. When the conduct occurred:

2. What happened (describe what happened).

3. If known, identify by name, title position, and/or relationship to you any individual involved in the conduct.

- j. Do you know if anyone told the Diocese or a church, school, parish, or Diocesan organization about your abuse? This would include any employee or official of the Diocese or of a church, school, parish, or Diocesan organization (such as a clergy member, teacher, administrator, or other associated person). If so, identify who told, who was told and when.

PART 6: IMPACT OF ABUSE

(Attach additional sheets if necessary)

Where more than one perpetrator is alleged, please answer the questions separately as to each perpetrator.

- a. Please describe in detail, being as specific as you can, what injuries (including physical, mental and/or emotional) have occurred to you because of the acts or acts of Abuse or other wrongful conduct that resulted in the claim (for example, the effect on your education, employment, personal relationships, mental and physical health, and any physical injuries)? You may elect to provide either a narrative description in this part or reference an attached Questionnaire (or both).

- b. Have you sought counseling or other treatment for your injuries? If so, with whom and when?

PART 7: ADDITIONAL INFORMATION

- a. **Prior Bankruptcy Claims:** Have you, or has anyone on your behalf, filed any claim in any other bankruptcy case relating to the abuse described in this claim?

☐ Yes ☐ No (if “Yes,” attach a copy of any completed claim form).

If “Yes,” which case(s): _____

- b. **Prior Non-Bankruptcy Claims:** have you, or has anyone on your behalf, asserted or filed any claim or lawsuit seeking damages for the abuse described in this claim?

☐ Yes ☐ No (if “Yes,” attach a copy of any completed claim form, and, if a lawsuit was filed, a copy of the complaint).

Please also describe the resolution of such claim (including whether such claim was settled, released, dismissed, or otherwise adjudicated or resolved).

If you previously filed a lawsuit, did you file a certificate of merit as required by California Code of Civil Procedure § 340.1?

☐ Yes ☐ No

- c. **Settlements:** Regardless of whether a complaint was ever filed against any party because of any abuse as described in this claim, have you settled any claim relating to abuse described in this claim?

☐ Yes ☐ No

If “Yes,” please describe, including parties to the settlement and any payments received.

If “Yes,” which case(s): _____

- d. Regardless of whether you entered into any settlement, did you ever receive any payment from the RCBSD or any other person or entity because of the abuse described in this claim.

☐ Yes ☐ No

If “Yes,” please describe who paid you, when they paid you, and how much they paid you.

- e. **Bankruptcy:** Have you ever filed bankruptcy?

☐ Yes ☐ No (if “Yes,” please provide the following information:

Name of Case: _____ Court: _____

Date Filed: _____ Case No. _____

Chapter: _____

Sign and print your name. If you are signing the claim on behalf of a minor or an estate of a Survivor Claimant who is deceased or incapacitated, print your title.

Under penalty of perjury, I declare the foregoing statements and those reference in any attached Questionnaire to be true and correct.

Date: _____

Signature: _____

Print Name: _____

Title: _____

(Relationship of signer to Survivor Claimant, e.g., parent, family member, guardian, attorney, executor of estate)

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to five years or both. 18 U.S.C. §§ 152 and 3571.

DOCID: DOCPROPERTY DOCXDOCID DMS=FileSystem Format=<<NAME>> DATE

EXHIBIT C

Gordon Rees Scully Mansukhani, LLP
101 W. Broadway, Suite 2000
San Diego, CA 92101

JEFFREY D. CAWDREY (SBN: 120488)
MEGAN M. ADEYEMO TX BN: 24099595) (*PRO HAC VICE*)
KATHRYN M.S. CATHERWOOD (SBN: 149170)
KATHLEEN M. PATRICK (NY BN: 5638572)(*PRO HAC VICE*)
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kpatrick@grsm.com
amatthews@grsm.com

Attorneys for Debtor
The Roman Catholic Bishop of San Diego

UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF CALIFORNIA

In re:

THE ROMAN CATHOLIC BISHOP OF
SAN DIEGO, a California Corporation Sole,

Debtor.

Case No. 24-02202

Chapter 11

**CLAIMS CONFIDENTIALITY
AGREEMENT**

Dept.: 1

Courtroom: 218

Judge: Hon. Christopher B. Latham

This Agreement (“Agreement”) is entered into as of _____.

The undersigned (the “Recipient”) is a Permitted Party pursuant to the *Order Fixing Time for Filing Proofs of Claim; Approving Proof of Claim Forms; Providing Confidentiality Protocols; and Approving Form and Manner of Notice* [Docket No. ____] (the “Bar Date Order”)¹ on _____, 2024, in Case No. 24-02202, *In re The Roman Catholic Bishop of San Diego* (the “Case”).

WHEREAS, the Recipient requests access to confidential Survivor Claim Forms

¹ Capitalized terms used but not defined herein shall have the meaning and definition ascribed to them in the Order.

(comprised of Official Proof of Claim Form B410 and the Confidential Survivor Supplement and any and all attachments thereto) filed in the Case after execution of this Agreement pursuant to and in accordance with the terms of the Bar Date Order;

WHEREAS, Recipient agrees to keep the information provided in any and all Survivor Claim Forms confidential pursuant to and in accordance with the terms of the Bar Date Order and this Agreement; and

WHEREAS, except as stated in the Bar Date Order, access to the Survivor Claim Forms extends only to the natural person who executes this Agreement, and a separate confidentiality agreement must be signed by each natural person who seeks access to the Survivor Claim Forms on behalf of a Permitted Party.

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

1. Recipient agrees to keep the information provided in the Survivor Claim Forms confidential pursuant to and in accordance with the terms of the Order;

2. Recipient agrees to not distribute any Survivor Claim Forms or information provided in or submitted with such Survivor Claim Forms in violation of the Confidentiality Protocols in the Order.

3. Recipient agrees that only the natural person who is a Permitted Party as defined in the Order and who executes this Agreement will have access to the Survivor Claim Forms, except except that the Bar Date Order shall govern the means of execution of a single binding Agreement with respect to certain Permitted Parties and their respective successors, regulators, reinsurers, administrators and counsel and their respective employees, partners, officers and directors as permitted Recipients.

4. Recipient will only communicate information from the confidential Survivor Proof of Claim Forms with other Permitted Parties who have executed a confidentiality agreement pursuant to the Order.

5. Recipient consents to the jurisdiction of the Court to adjudicate any violation of this Agreement or the Order.

6. Recipient shall promptly report any disclosure of information from a confidential

Gordon Rees Scully Mansukhani, LLP
101 W. Broadway, Suite 2000
San Diego, CA 92101

1 Survivor Claim to the Debtor and any appointed Committee, and shall cooperate with efforts to
2 recover the information and/or mitigate the effects of the disclosure.

3 Dated: _____, 2024

4 Signature: _____

5 Print Name: _____

6 Name of Party Represented (if any): _____

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EXHIBIT D

Gordon Rees Scully Mansukhani, LLP
101 W. Broadway, Suite 2000
San Diego, CA 92101

JEFFREY D. CAWDREY (SBN: 120488)
MEGAN M. ADEYEMO TX BN: 24099595) (*PRO HAC VICE*)
KATHRYN M.S. CATHERWOOD (SBN: 149170)
KATHLEEN M. PATRICK (NY BN: 5638572)(*PRO HAC VICE*)
ANNIE CARTER MATTHEWS (TX BN: 24115058) (*PRO HAC VICE*)
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jcawdrey@grsm.com
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kcatherwood@grsm.com
kpatrick@grsm.com
amatthews@grsm.com

Attorneys for Debtor
The Roman Catholic Bishop of San Diego

UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF CALIFORNIA

In re:

THE ROMAN CATHOLIC BISHOP OF SAN
DIEGO, a California Corporation Sole,

Debtor.

Case No. 24-02202

Chapter 11

**NOTICE OF BAR DATE FOR FILING
GENERAL PROOFS OF CLAIM**

Dept.: 1
Courtroom: 218
Judge: Hon. Christopher B. Latham

TO ALL PERSONS AND ENTITIES WITH CLAIMS AGAINST THE ROMAN CATHOLIC
BISHOP OF SAN DIEGO:

PLEASE TAKE NOTICE on June 17, 2024 (the “Petition Date”), The Roman Catholic Bishop of San Diego, sometimes referred to as the Diocese of San Diego (“Debtor”) filed a voluntary petition for relief under chapter 11 of title 11 of the United States Code in the United States Bankruptcy Court for the Southern District of California (the “Court”). Debtor, its address, case number, proof of claim forms and other relevant information related to this Bankruptcy Case may be obtained at: <https://www.donlinrecano.com/rcbsd>.

PLEASE TAKE FURTHER NOTICE THAT ON [ENTER DATE], 2024, THE COURT ENTERED AN ORDER (THE “BAR DATE ORDER”) ESTABLISHING FEBRUARY 3, 2025 AS THE GENERAL CREDITOR CLAIMS BAR DATE (“BAR DATE”). IN SECTION III OF THIS NOTICE (THE “GENERAL CREDITOR BAR DATE NOTICE”), YOU WILL FIND DIRECTIONS FOR FILING, BY MAIL AND

ELECTRONICALLY, A PROOF OF CLAIM AGAINST DEBTOR.

PLEASE TAKE FURTHER NOTICE that for your convenience, Debtor has enclosed with this General Creditor Bar Date Notice, a proof of claim form (the “General Creditor Proof of Claim Form”). If this General Creditor Bar Date Notice does not include a General Creditor Proof of Claim Form, you may obtain a copy of the General Creditor Proof of Claim Form by visiting <https://www.donlinrecano.com/Clients/rcbsd/Static/POC> or by contacting Donlin Recano at the email address or telephone number listed at the end of this General Creditor Bar Date Notice.

KEY DEFINITIONS

- As used in this General Creditor Bar Date Notice, the term “Entity” has the meaning given to it in section 101(15) of the Bankruptcy Code, and includes all persons (individuals, partnerships and corporations), estates, trusts, Governmental Units and the United States Trustee.
- As used in this General Creditor Bar Date Notice, the term “Governmental Unit” has the meaning given to it in section 101(27) of the Bankruptcy Code and includes the United States, states, commonwealths, districts, territories, municipalities, foreign states, or departments, agencies or instrumentalities of the foregoing.
- As used in this General Creditor Bar Date Notice, the term “Claim” shall mean, as to or against the Debtor and in accordance with section 101(5) of the Bankruptcy Code: (i) any right to payment, whether or not such right is reduced to judgment, liquidated, unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal, equitable, secured or unsecured; or (ii) any right to an equitable remedy for breach of performance if such breach gives rise to a right to payment, whether or not such right to an equitable remedy is reduced to judgment, fixed, contingent, matured, unmatured, disputed, undisputed, secured or unsecured.

PRELIMINARY INSTRUCTIONS

Claims based on acts or omissions of Debtor that occurred before June 17, 2024, must be filed on or prior to the applicable Bar Date, even if such claims are not now fixed, liquidated, or certain or did not mature or become fixed, liquidated, or certain before June 17, 2024.

Please note that individuals asserting Claims arising from abuse for which such individuals believe the Roman Catholic Bishop of San Diego may be liable are instructed to file a Confidential Survivor Claim Form, consistent with the Bar Date Order and the Survivor Bar Date Notice. CLAIMANTS MAY OBTAIN COPIES of this Form from Debtor’s Claims, Noticing and Solicitation Agent, Donlin Recano, at <https://www.donlinrecano.com/Clients/rcbsd/Static/SurvivorClaims>.

A Claimant should consult an attorney if the Claimant has any questions, including whether such Claimant must file a Claim by submitting a General Creditor Proof of Claim Form.

I. WHO MUST FILE A GENERAL CREDITOR PROOF OF CLAIM FORM AND THE APPLICABLE BAR DATES

1 A. ***The Bar Date:*** The Bar Date Order establishes **February 3, 2025**, as the deadline
2 for filing proofs of claim by submitting a General Creditor Proof of Claim Form in this
3 Bankruptcy Case:

4 1. ***The General Bar Date.*** Except as set forth below, pursuant to the Bar Date
5 Order, all Entities, excluding Governmental Units, holding Claims against Debtor
6 (whether secured, unsecured priority, or unsecured nonpriority) that arose or are deemed
7 to have arisen prior to June 17, 2024, are required to file Claims by submitting a General
8 Creditor Proof of Claim Form on or before the General Bar Date, **February 3, 2025**.

9 ***Entities that MUST file Claims by submitting a General Creditor Proof of Claim Form***
10 ***by the General Bar Date:*** Except as set forth in paragraph 3 below, the following Entities must
11 file a Claim on or before the General Bar Date:

- 12 a. Any person or entity whose prepetition Claim against Debtor that is
13 not listed in the Debtor's Schedules or whose prepetition Claim is
14 listed in the Schedules but is listed as disputed, contingent or
15 unliquidated and that desires to participate in this case or share in any
16 distribution in this case, including Claims based on 11 U.S.C. §
17 503(b)(9); and
- 18 b. Any person or entity that believes that its prepetition Claim is
19 improperly classified in the Schedules or is listed in an incorrect
20 amount and that desires to have its claim allowed in a classification or
21 amount other than that identified in the Schedules, including Claims
22 based on 11 U.S.C. § 503(b)(9).

23 2. ***The Government Unit Bar Date.*** Except as set forth below, pursuant to the
24 Bar Date Order, all Governmental Units (as defined by section 101(27) of the Bankruptcy
25 Code) holding Claims against the Debtor that arose or are deemed to have arisen prior to
26 June 17, 2024, are required to file a Claim by submitting a General Creditor Proof of
27 Claim Form by **February 3, 2025**.

28 ***Entities that MUST File Claims by submitting a General Creditor Proof of Claim Form***
by the Government Unit Bar Date: Except as set forth in paragraph "3" below, the following
Entities must file a Claim on or before the Governmental Unit Bar Date:

- a. Any person or entity whose prepetition claim against Debtor that is not
listed in Debtor's Schedules or whose prepetition claim is listed in the
Schedules but is listed as disputed, contingent or unliquidated and that
desires to participate in this case or share in any distribution in this
case; and
- b. Any person or entity that believes that its prepetition claim is
improperly classified in the Schedules or is listed in an incorrect
amount and that desires to have its claim allowed in a classification or
amount other than that identified in the Schedules.

3. **Entities NOT Required to File Claims by the General Bar Date or Government Unit Bar Date:** The Bar Date Order further provides that the following Entities need not file a Claim by submitting a General Creditor Proof of Claim Form by the General Bar Date:

- a. Any person or entity that has already properly filed a Claim against Debtor by filing a General Creditor Proof of Claim Form with the Clerk of the Court for the United States Bankruptcy Court for the Southern District of California or with Debtor's Claims, Noticing and Solicitation Agent, Donlin Recano;
- b. Any person or entity: (i) whose claim is listed in the Schedules or any amendments thereto, and (ii) whose claim is not described therein as "disputed," "contingent," or "unliquidated," and (iii) who does not dispute the amount or classification of its claim as set forth in the Schedules;
- c. Professionals retained by Debtor or the Committee pursuant to orders of this Court, who assert administrative claims for payment of fees and expenses subject to the Court's approval pursuant to sections 330, 331, and 503(b) of the Bankruptcy Code;
- d. Any person or entity that asserts an administrative expense claim against the Debtor pursuant to sections 503(b)(1) through (8) of the Bankruptcy Code;
- e. Any person or entity whose Claim against Debtor has been allowed by an order of the Court entered on or before the applicable Bar Date;
- f. Any person or entity whose Claim has been paid in full;
- g. Any holder of a Claim for which a separate deadline is (or has been) fixed by the Court; and
- h. The United States Trustee regarding a claim for quarterly fees under 28 U.S.C. § 1930(a)(6).

II. CONSEQUENCES OF FAILURE TO FILE PROOF OF CLAIM

Any Entity that is required to file a Claim by submitting a General Creditor Proof of Claim Form, but fails to do so by the applicable Bar Date described in this General Bar Date Notice: (i) may NOT be treated as a creditor with respect to such Claim for the purposes of voting on and distribution under any chapter 11 plan proposed and/or confirmed in this Bankruptcy Case; and (ii) may be forever barred, estopped, and enjoined from asserting such Claim against Debtor (or filing a proof of claim with respect thereto), and Debtor and its property may be forever discharged from any and all indebtedness or liability with respect to such Claim.

RESERVATION OF RIGHTS

Debtor reserves the right to: (i) dispute, or to assert offsets or defenses against, any filed Claim or any Claim listed or reflected in the Schedules as to nature, amount, liability, classification or otherwise; and (ii) subsequently designate any Claim as disputed, contingent or unliquidated. Nothing contained in this General Creditor Bar Date Notice shall preclude Debtor from objecting to any Claim, whether scheduled or filed, on any grounds.

III. PROCEDURE FOR FILING PROOFS OF CLAIM

Unless one of the exceptions described in **Section I, Paragraph 3** above applies, you **MUST** assert your Claim by submitting an original General Creditor Proof of Claim Form by mail, overnight delivery, courier or hand delivery, or electronically, so that it is received by the General Bar Date or the Government Unit Bar Date, as applicable, as follows:

If General Creditor Proof of Claim Form is sent by mail, to:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of San Diego
P.O. Box 2053
New York, NY 10272- 2042

If General Creditor Proof of Claim Form is sent by hand-delivery or overnight carrier, to:

Donlin, Recano & Company, Inc.
c/o Equiniti
Re: The Roman Catholic Bishop of San Diego
48 Wall Street, 22nd Floor
New York, NY 10005

If General Creditor Proof of Claim Form is submitted electronically:

<https://www.donlinrecano.com/Clients/rcbsd/FileClaim>.

Any General Creditor Proof of Claim Form submitted by facsimile or email will not be accepted and will not be deemed filed until the Claim is submitted by the method described in the foregoing sentences.

All General Creditor Proof of Claim Forms must be signed by the creditor or, if the creditor is not an individual, by an authorized agent of the creditor. The General Creditor Proof of Claim Form must be written in English and be denominated in United States currency. In addition, all General Creditor Proof of Claim Forms must include all documentation required by Bankruptcy Rules 3001(c) and 3001(d), including an original or a copy of any written document that forms the basis of the Claim or, for secured Claims, evidence that the alleged security interest has been perfected. If you wish to receive acknowledgement of receipt of your General Creditor Proof of Claim Form, you must also submit by the General Bar Date or the Government Unit Bar Date, as applicable, and concurrently with submission of your original

General Creditor Proof of Claim Form: (i) one additional copy of your original General Creditor Proof of Claim Form; and (ii) a self-addressed, stamped return envelope

ADDITIONAL INFORMATION

1. You may be listed as the holder of a Claim against Debtor in the Schedules. If you choose to rely on the Schedules, it is your responsibility to determine that the claim is accurately listed in the Schedules. If you hold or assert a Claim that is not listed in the Schedules or if you disagree with the amount or priority of your Claim as listed in the Schedules, or your Claim is listed in the Schedules as either contingent, unliquidated, or disputed, you must file a proof of claim. Copies of the Schedules and the Bar Date Order are available at <https://www.donlinrecano.com/rcbsd>.

2. Questions concerning the contents of this Notice and requests for General Creditor Proof of Claim Forms should be directed to Donlin Recano via email to rcbsdinfo@drc.equiniti.com or by phone at 1-866-521-4424 (U.S. and Canada toll free) or 1-212-771-1128 (International), between the hours of 9:00 a.m. and 5:00 p.m. (prevailing Eastern Time), Monday through Friday. Please note that Donlin Recano is not permitted to give legal advice. You should consult your own attorney for assistance regarding any other inquiries, such as questions concerning the completion or filing of a proof of claim.

Dated: November 12, 2024

GORDON REES SCULLY MANSUKHANI,
LLP

By: _____
Jeffrey D. Cawdrey
Megan M. Adeyemo
Kathryn M.S. Catherwood
Kathleen M. Patrick
Annie Carter Matthews
Attorneys for Debtor,
The Roman Catholic Bishop of San Diego

EXHIBIT E

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KATHRYN M.S. CATHERWOOD (SBN: 149170)
KATHLEEN M. PATRICK (NY BN: 5638572)(*PRO HAC VICE*)
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madeyemo@grsm.com
kcatherwood@grsm.com
kpatrick@grsm.com
amatthews@grsm.com

Attorneys for Debtor
The Roman Catholic Bishop of San Diego

UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF CALIFORNIA

In re:

THE ROMAN CATHOLIC BISHOP OF
SAN DIEGO, a California Corporation Sole,

Debtor.

Case No. 24-02202

Chapter 11

**NOTICE OF DEADLINE FOR FILING
CLAIMS RELATING TO OR ARISING
FROM ABUSE**

Dept.: 1
Courtroom: 218
Judge: Hon. Christopher B. Latham

**TO ALL PERSONS AND ENTITIES WITH CLAIMS ARISING FROM ABUSE FOR
WHICH THE ROMAN CATHOLIC BISHOP OF SAN DIEGO MAY BE LIABLE:**

FEBRUARY 3, 2025 IS THE LAST DATE TO FILE PROOFS OF CLAIM FOR ABUSE.

On June 17, 2024, The Roman Catholic Bishop of San Diego sometimes referred to as The Diocese of San Diego (“Debtor” or “RCBSD”) filed a voluntary petition for relief under chapter 11 of Title 11 of the United States Code (the “Bankruptcy Code”) in the United States Bankruptcy Court for the Southern District of California (the “Court”). Debtor, its address, case number, proof of claim forms and other relevant information related to this Bankruptcy Case may be obtained at: <https://www.donlinrecano.com/rcbsd>. Any person who believes that he or she has, or may have, a claim arising from abuse (described below) for which the person believes the Debtor may be liable (each a “Survivor Claim” and collectively “Survivor Claims”) should carefully read this notice.

For the purposes of this proof of claim, a Survivor Claim is defined as: any Claim (as defined in section 101(5) of the Bankruptcy Code) against RCBSD resulting or arising or related to in whole or in part, directly or indirectly from any actual or alleged sexual conduct or misconduct, grooming, sexual abuse or molestation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually-related physical, psychological, or emotional harm, or contacts, or interactions of a sexual nature between a child and an adult, or a nonconsenting adult and another adult, sexual assault, sexual battery, sexual psychological or emotional abuse, humiliation, intimidation, any other conduct constituting a sexual offense, or any other sexual misconduct, and seeking monetary damages or any other relief based upon the conduct described above, under any theory of liability, including, but not limited to, vicarious liability, any negligence-based theory, conspiracy, fraudulent concealment, intentional tort, continuing tort, public nuisance, invasion of privacy, breach of alleged duties imposed by Canon Law or other Catholic Church documents or principles, contribution, indemnity, or any other theory based on any acts or failures to act by the RCBSD or any other person or entity for whose acts or failures to act the RCBSD is or was allegedly responsible, including but not limited to, claims against clergy, deacons, seminarians, employees, teachers, or volunteers.

As part of a chapter 11 plan, the RCBSD may seek Court approval to release claims held by Survivor Claimants against other entities that may be related to the RCBSD but that are not debtors in this case, such as parishes and high schools.

A list of credibly accused priests in the Diocese is available on Debtor's website (www.safeinourdiocese.org/accused-priests/). The fact that this list may not include the name of the priest who sexually abused you does not mean that you should not file a Survivor Claim Form. This is a list of priests in the Diocese against whom Debtor has vetted reports of Sexual Abuse through the internal processes of Debtor.

FILING DEADLINE

THE COURT ENTERED AN ORDER (THE "BAR DATE ORDER") ESTABLISHING **FEBRUARY 3, 2025**, AS THE LAST DATE (THE "SURVIVOR BAR DATE") FOR EACH SURVIVOR CLAIMANT TO FILE A PROOF OF CLAIM FORM (THE "SURVIVOR PROOF OF CLAIM"). THE SURVIVOR BAR DATE AND THE PROCEDURES SET FORTH BELOW FOR FILING PROOFS OF CLAIM APPLY TO ALL SURVIVOR CLAIMS ASSERTED AGAINST DEBTOR.

WHO MUST FILE

If you believe that you have a Survivor Claim, you must file a Survivor Proof of Claim by the Survivor Bar Date to maintain and/or preserve any claims that you have against RCBSD. Even if you have already filed a lawsuit against RCBSD alleging abuse, you must still file a Survivor Proof of Claim to maintain and/or preserve your rights in RCBSD's chapter 11 case. You are also strongly encouraged to complete and submit a Confidential Survivor Supplement (the "Survivor Supplement" and together with the Survivor Proof of Claim, the "Survivor Claim Form") together with the Survivor Proof of Claim. If you fail to complete and submit the Survivor Supplement by the Survivor Bar Date, your claim may be subject to objection and disallowance unless you thereafter furnish additional information in support of your Survivor Claim.

WHAT TO FILE

FILE A CONFIDENTIAL SURVIVOR PROOF OF CLAIM AND A VOLUNTARY CONFIDENTIAL SURVIVOR SUPPLEMENT, COPIES OF WHICH ARE ENCLOSED, AND ANY ADDITIONAL INFORMATION YOU WISH TO ATTACH TO THE SUPPLEMENT. YOU MAY ALSO OBTAIN A COPY OF THE SURVIVOR PROOF OF CLAIM AND THE CONFIDENTIAL SURVIVOR SUPPLEMENT BY FOLLOWING THE INSTRUCTIONS BELOW.

PROCEDURES FOR FILING A SURVIVOR CLAIM FORM

To file a Survivor Claim Form:

- Fill out the confidential Survivor Proof of Claim, and the Confidential Survivor Supplement, together with any additional information you wish to submit. A copy of the Survivor Proof of Claim and the Confidential Survivor Supplement is provided with this Survivor Claims Bar Date Notice, and can also be obtained here: <https://www.donlinrecano.com/Clients/rcbsd/Static/SurvivorClaims>.
- If you submitted a Confidential Plaintiff Questionnaire for Settlement Purposes (a “Questionnaire”) in the action entitled *In re Diocese of San Diego Cases*, JCCP No 5105 in the Superior Court of the State of California, County of San Diego you may attach the Questionnaire and reference the Questionnaire in response to any question in Parts 4 through 7 of the Confidential Survivor Supplement, rather than answering those questions again in the Survivor Supplement. You also may supplement your prior responses to the Questionnaire in the space provided in the Confidential Survivor Supplement, but the answers from the Questionnaire that you reference will be incorporated into your sworn Confidential Survivor Supplement unless you expressly state your intention to modify those answers in your responses to the Survivor Supplement.
- For additional copies of the confidential Survivor Claim Form: (a) photocopy the confidential Survivor Claim Form; (b) contact the Debtor’s claims agent Donlin Recano via email at rcbsdinfo@drc.equiniti.com or by phone at 1-866-521-4424 (U.S. and Canada toll free) or 1-212-771-1128 (International), between the hours of 9:00 a.m. and 5:00 p.m. (prevailing Eastern Time), Monday through Friday, or (c) visit the website at: <https://www.donlinrecano.com/rcbsd>.
- **Please note that Debtor’s staff is not permitted to give legal advice. You should consult your own attorney for assistance regarding any other inquiries, such as questions concerning the completion or filing of a proof of claim.**
- Return the original completed Survivor Proof of Claim **so as to be received by February 3, 2025**, as follows:

If Survivor Claim Form is sent by mail:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of San Diego

P.O. Box 2053
New York, NY 10272- 2042

If Survivor Claim Form is sent via hand delivery or overnight courier

Donlin, Recano & Company, Inc.
C/O Equiniti
Re: The Roman Catholic Bishop of San Diego
48 Wall Street, 22nd Floor
New York, NY 10005

Or electronically at:

<https://www.donlinrecano.com/Clients/rcbsd/FileSurvivorClaim>.

- **Do not file the Survivor Proof of Claim or the Confidential Survivor Supplement with the Bankruptcy Court.**
- Survivor Claim Form will be deemed timely filed only if received by Donlin Recano by **February 3, 2025**.
- Please note that a Survivor Claim Form submitted by facsimile, telecopy or electronic mail transmission will not be accepted and will not be deemed filed.

CONSEQUENCES OF FAILURE TO FILE A PROOF OF CLAIM

THE DEADLINE FOR FILING A SURVIVOR CLAIM FORM IS FEBRUARY 3, 2025. ANY PERSON WHO HAS A SURVIVOR CLAIM AND DOES NOT FILE A SURVIVOR PROOF OF CLAIM BY THAT DATE MAY NOT BE TREATED AS A CREDITOR FOR VOTING OR DISTRIBUTION PURPOSES UNDER ANY PLAN OF REORGANIZATION AND SUCH CLAIM WILL BE SUBJECT TO DISCHARGE. FAILURE TO FILE A SURVIVOR PROOF OF CLAIM MAY PREVENT SUCH PERSON FROM VOTING ON ANY PLAN OF REORGANIZATION IN THIS CASE. FURTHER, IF SUCH SURVIVOR CLAIM IS DISCHARGED, THE SURVIVOR CLAIMANT MAY BE FOREVER BARRED AND PREVENTED FROM ASSERTING HIS OR HER SURVIVOR CLAIM AGAINST RCBSD OR ITS PROPERTY, AND MAY NOT RECEIVE ANY PAYMENT OR DISTRIBUTION IN CONNECTION WITH SUCH SURVIVOR CLAIM. ANY PERSON SUBMITTING A SURVIVOR PROOF OF CLAIM IS STRONGLY ENCOURAGED TO ATTACH A SURVIVOR SUPPLEMENT. IF A SURVIVOR FILES A SURVIVOR PROOF OF CLAIM WITHOUT ATTACHING A SURVIVOR SUPPLEMENT, THE CLAIM MAY BE SUBJECT TO OBJECTION AND DISALLOWANCE UNLESS ADDITIONAL INFORMATION IN SUPPORT OF THE CLAIM IS THEREAFTER PROVIDED.

CONFIDENTIALITY

Pursuant to the Bar Date Order, all Survivor Proofs of Claim and the Confidential Survivor Supplements and any attachments thereto shall remain confidential in this bankruptcy case. Therefore, the Survivor Claim Form, including the Confidential Survivor Supplement, that you file will not be available to the general public, but will be kept confidential, except that as specified by

1 court order, information will be provided to Debtor, Debtor's attorneys, the United States Trustee,
2 Debtor's insurer(s), attorneys for the Official Committee of Unsecured Creditors and its members,
3 any unknown claims representative appointed under a plan of reorganization, any settlement trustee
4 appointed to administer payments to Survivor Claimants, and such other persons as the Court
determines should have the information in order to evaluate the Survivor Claim, all of whom will
agree to keep the information provided by you confidential.

5
6 Dated: November 12, 2024

GORDON REES SCULLY MANSUKHANI,
LLP

7
8 BY: _____

Jeffrey D. Cawdrey
Megan M. Adeyemo
Kathryn M.S. Catherwood
Annie Carter Matthews
Attorneys for Debtor
The Roman Catholic Bishop of San Diego

Gordon Rees Scully Mansukhani, LLP
101 W. Broadway, Suite 2000
San Diego, CA 92101

EXHIBIT F

**UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF
CALIFORNIA**

**In re The Roman Catholic Bishop of San Diego
Case No. 24-02202**

Notice of Deadline for Filing Claims: FEBRUARY 3, 2025

**YOU MAY HAVE A SEXUAL ABUSE CLAIM OR OTHER CLAIM AGAINST THE
DIOCESE OF SAN DIEGO**

On June 17, 2024, The Roman Catholic Bishop of San Diego, sometimes referred to as The Diocese of San Diego (“Debtor”) filed for protection under chapter 11 of Title 11 of the United States Code (the “Bankruptcy Code”).

If you were sexually abused by any person connected with Debtor, you must file a claim so as to be received by February 3, 2025, or otherwise you will be forever barred, estopped, and enjoined from asserting such claim against the Debtor. Even if you have already filed a lawsuit against Debtor alleging abuse you must still file a claim to maintain and/or preserve your rights.

Claims based on acts or omissions of the Debtor that occurred before June 17, 2024, must be filed on or before February 3, 2025, even if such claims are not now fixed, liquidated, or certain or did not mature or become fixed, liquidated, or certain before June 17, 2024.

For more information on how to obtain and file a proof of claim form and associated documents, please visit <https://www.donlinrecano.com/rcbsd>, or contact Donlin Recano, the Debtor’s claims agent, via email at rcbsdinfo@drc.equiniti.com or by phone at 1-866-521-4424, between the hours of 9:00 a.m. and 5:00 p.m. (prevailing Eastern Time), Monday through Friday.

**TRIBUNAL DE BANCARROTA DE ESTADOS UNIDOS PARA EL DISTRITO SUR
DE CALIFORNIA**

**En relación con la Diócesis de San Diego
Caso n.º 24-02202**

Aviso de plazo para presentar reclamaciones: 3 DE FEBRERO DEL 2025

**ES POSIBLE QUE TENGA UNA RECLAMACIÓN POR ABUSO SEXUAL U OTRA
RECLAMACIÓN CONTRA LA DIÓCESIS DE SAN DIEGO**

El 17 de junio del 2024, la Diócesis de San Diego (“Deudor”) solicitó protección en virtud del Capítulo 11 del Título 11 del Código de los Estados Unidos (el “Código de Bancarrota”).

Si fue víctima de abuso sexual por parte de cualquier persona relacionada con el Deudor, debe presentar una reclamación para que se reciba antes del 3 de febrero del 2025 o, de lo contrario, se le prohibirá, impedirá y restringirá presentar este tipo de reclamaciones contra el Deudor para siempre. Incluso si ya presentó una demanda contra el Deudor por abuso, debe presentar una reclamación para mantener o preservar sus derechos.

Las reclamaciones basadas en actos u omisiones del Deudor que ocurrieron antes del 17 de junio del 2024 deben presentarse el 3 de febrero del 2025 o antes, incluso si dichas reclamaciones no se han solucionado, liquidado o determinado o no vencieron ni se solucionaron, liquidaron o determinaron antes del 17 de junio del 2024.

Para obtener más información sobre cómo obtener y presentar un formulario de prueba de reclamación y documentos asociados, visite <https://www.donlinrecano.com/rcbsd> o comuníquese con Donlin Recano, el agente de reclamaciones del Deudor, por correo electrónico a rcbsdinfo@drc.equiniti.com o por teléfono al 1-866-521-4424 de lunes a viernes, de 9:00 a. m. a 5:00 p. m. (horario del Este actual).

EXHIBIT G



1801 Century Park East
Twenty-Sixth Floor
Los Angeles, California 90067

**Re: Important Deadline for Submission of Sexual Abuse Claims in the
Bankruptcy Case of The Roman Catholic Bishop of San Diego**

Dear Survivor:

On June 17, 2024, the Roman Catholic Bishop of San Diego (the “**Diocese**”) filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code in the United States Bankruptcy Court for the Southern District of California (the “**Bankruptcy Court**”) commencing the Diocese’s chapter 11 bankruptcy case (the “**Bankruptcy Case**”). On July 1, 2024, the Office of the United States Trustee appointed an official committee of unsecured creditors (the “**Committee**”) to represent the interests of all the Diocese’s unsecured creditors, including any person who may assert a claim for sexual abuse for which the Diocese may be responsible (collectively, “**Survivors**”). The Committee is comprised of nine Survivors. On September 6, 2024, the Bankruptcy Court approved the Committee’s application to employ KTBS Law LLP as bankruptcy counsel for the Committee in the Bankruptcy Case.

You are receiving this letter because the Diocese has identified you as a Survivor who may be entitled to assert a sexual abuse claim against the Diocese in the Bankruptcy Case. The Bankruptcy Court has required that all persons holding claims against the Diocese must submit proofs of claim so that they are received no later than 11:59 p.m. PT on **February 3, 2025**.

This letter is being delivered to you (or your counsel) as part of a package of materials that includes a notice of the claims bar date, a copy of a proof of claim form, and a confidential Survivor Supplement. If you believe that you have a claim against the Diocese and/or its related entities or agents (such as priests or other personnel, schools, or parishes) on account of sexual abuse **you must complete and submit the proof of claim form by February 3, 2025** in accordance with the procedures outlined in the enclosed package of materials.

It is very important that you timely complete and submit the proof of claim form and the Survivor Supplement. Even if you have already filed a lawsuit alleging sexual abuse, you must still submit the proof of claim form to maintain and/or preserve your rights to assert a claim against the Diocese in the Bankruptcy Case. If you fail to complete and submit a proof of claim by February 3, 2025, you may not be treated as a creditor for voting or distribution purposes under any plan of reorganization, meaning your claim may be subject to discharge without any payment or recovery. If you fail to complete and submit the confidential Survivor Supplement by February 3, 2025, your claim may be subject to objection and disallowance unless you thereafter furnish additional information to support your claim.

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The Committee strongly encourages you to complete and submit the confidential Survivor Supplement together with your proof of claim. The information requested in the Survivor Supplement will assist the Diocese, the Committee, and the Diocese's insurers in negotiating a resolution of the Bankruptcy Case and will facilitate the processing of your sexual abuse claim against the Diocese.

As explained in the enclosed materials, you can submit the proof of claim form and Survivor Supplement online at <https://www.donlinrecano.com/Clients/rcbsd/FileSurvivorClaim>. Please be assured that any information you provide in the proof of claim form and the Survivor Supplement will be kept strictly **confidential** and will only be shared with parties who are bound to confidentiality pursuant to procedures approved by the Bankruptcy Court. If you are represented by an attorney, you should work closely with your attorney to complete and submit the proof of claim form and the Survivor Supplement. If you are not represented by an attorney, you are strongly encouraged to consider consulting an attorney.

If you have any questions regarding the proof of claim form or the Survivor Supplement, please do not hesitate to contact counsel to the Committee at 310-407-4022.

Sincerely,



Thomas E. Patterson



Sasha M. Gurvitz

KTBS Law LLP

*Counsel to the Official Committee
of Unsecured Creditors*