

July 25, 2023

EDWARD J. EMMONS, CLERK
U.S. BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA

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FELDERSTEIN FITZGERALD
WILLOUGHBY PASCUZZI & RIOS LLP

The following constitutes the order of the Court.

Signed: July 25, 2023

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Charles Novack
U.S. Bankruptcy Judge

Attorneys for
The Roman Catholic Bishop of Santa Rosa

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA
SANTA ROSA DIVISION

In re:

THE ROMAN CATHOLIC BISHOP OF
SANTA ROSA,

Debtor In Possession.

Case No. 23-10113

Chapter 11

Date: July 19, 2023
Time: 11:00 a.m.
Location: 1300 Clay Street, Ctrm. 215
Oakland, CA 94612
[In person or via Zoom]
Judge: Hon. Charles Novack

**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 of The Roman Catholic Bishop of Santa Rosa, the Debtor and Debtor in Possession herein (the "Debtor" or "RCBSR"), seeking entry of an order, pursuant to sections 501, 502 and 503 of title 11 of the United States Code (the "Bankruptcy Code"), Rules 2002, 3001-3005 and 9008 of the Federal Rules of Bankruptcy Procedure (the "Bankruptcy Rules") and Rule 3003-1 of the Local Rules of Practice for the United States Bankruptcy Court, Northern District of California (the "Local Rules") establishing bar dates for filing proofs of claim and approving the form and manner of notice thereof (the "Motion") (Dkt. No. 231), came on for hearing on July 19,

ORDER: (1) FIXING BAR DATE; (2) APPROVING CLAIM
FORMS; AND (3) CONFIDENTIAL PROTOCOLS (4)
APPROVING FORM AND MANNER OF NOTICE

2023 at 11:00 a.m., in Courtroom 215 of the United States Bankruptcy Court for the Northern District of California.¹ The Debtor appeared through its counsel, Paul J. Pascuzzi. Other appearances were noted on the record. The Court finding that notice was adequate under the circumstances and that good cause exists therefor;

IT IS HEREBY ORDERED as follows:

1. The Motion is granted, as set forth herein.

2. The General Proof of Claim Form, the Confidential Survivor Proof of Claim Form, 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, are approved in all respects pursuant to Bankruptcy Rules 2002, 3003 and 9008 and Local Rule 3003-1. The form and manner of notice of the Bar Date approved herein are deemed to fulfill the notice requirements of the Bankruptcy Rules and the Local Rules, and notice of the Bar Date in the form and manner as proposed by the Debtor herein 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 the Debtor's estate in this chapter 11 case. Accordingly, the Debtor is authorized to serve and publish the Bar Date Notices in the manner described herein.

3. Except as provided in paragraph 6 of this Order, any person or entity holding a prepetition claim against the Debtor must file a proof of claim in accordance with the procedures described herein on or before October 20, 2023 (the "Bar Date"). The Bar Date applies to all persons and entities 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 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

¹ All capitalized terms used but otherwise not defined herein shall have the meanings set forth in the Motion.

1 the Bar Date, including governmental units holding claims against the Debtor for unpaid taxes,
2 whether such claims arise from prepetition tax years or periods or prepetition transactions to which
3 the Debtor was a party.

4 5. Except as provided in paragraph 6 of this Order, any entity holding a prepetition
5 claim arising from Abuse (defined below) for which the individual believes the Debtor may be
6 liable, must file a proof of claim in accordance with the procedures described herein on or before
7 October 20, 2023. For purposes of this Order:

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

9 (b) A "Survivor Claim" is defined as any Claim (as defined in section 101(5)
10 of the Bankruptcy Code) against RCBSR resulting or arising or related to
11 in whole or in part, directly or indirectly from any actual or alleged sexual
12 conduct or misconduct, grooming, sexual abuse or molestation, indecent
13 assault and/or battery, rape, pedophilia, ephebophilia, or sexually-related
14 physical, psychological, or emotional harm, or contacts, or interactions of
15 a sexual nature between a child and an adult, or a nonconsenting adult and
16 another adult, sexual assault, sexual battery, sexual psychological or
17 emotional abuse, humiliation, intimidation, any other conduct constituting
18 a sexual offense, or any other sexual misconduct, and seeking monetary
19 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 RCBSR or any other person or entity for whose acts or failures
to act the RCBSR is or may be responsible, including but not limited to,
claims against clergy, deacons, seminarians, employees, teachers, or
volunteers.

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

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

23 (a) Any person or entity that has already properly filed a proof of claim against
24 the Debtor with the Clerk of the Court for the United States Bankruptcy
25 Court for the Northern District of California or with Donlin, Recano &
Company, Inc.²

26 (b) Any person or entity: (i) whose claim is listed in the Schedules or any

27 ² Any Survivor Claimant who timely files a proof of claim without completing the Confidential
28 Survivor Claim Supplement may subsequently be required to provide additional information
regarding such Survivor Claim, including the information in the Confidential Survivor Claim
Supplement, in connection with the administration of his or her Survivor Claim.

1 amendments thereto, and (ii) whose claim is not described therein as
2 “disputed,” “contingent,” or “unliquidated,” and (iii) which does not dispute
the amount or classification of its claim as set forth in the Schedules;

- 3 (c) Professionals retained pursuant to orders of this Court who assert
4 administrative claims for payment of fees and expenses subject to the
Court’s approval pursuant to sections 330, 331(a) and 503(b) of the
5 Bankruptcy Code;
6 (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;
7 (e) Any person or entity whose claim has been paid in full; and
8 (f) The United States Trustee regarding a claim for quarterly fees under 28
U.S.C. § 1930(a)(6).

9
10 7. The Debtor shall retain the right to: (i) dispute, or assert offsets or defenses against,
11 any filed claim or any claim listed or reflected in the Schedules as to nature, amount, liability,
12 classification or otherwise; and (ii) subsequently designate any claim as disputed, contingent or
13 unliquidated.

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

- 16 (a) Any entity or person whose prepetition claim against the Debtor is not listed
17 in the Debtor’s Schedules or whose prepetition claim is listed in the
Schedules but is listed as disputed, contingent or unliquidated and that
18 desires to participate in this chapter 11 case or share in any distribution in
this chapter 11 case;
19 (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
20 to have its claim allowed in a classification or amount other than that
identified in the Schedules; and
21 (c) Any person who believes that he or she has or may have a Survivor Claim
22 for which the person believes the Debtor may be liable.

23 9. Pursuant to Bankruptcy Rule 3003(c)(2), **any entity that is required to file a proof**
24 **of claim in this chapter 11 case pursuant to the Bankruptcy Code, the Bankruptcy Rules or**
25 **this Order with respect to a particular claim against the Debtor, but that fails to do so by the**
26 **applicable Bar Date, may NOT be treated as a creditor with respect to such claim for the**
27 **purposes of voting on and distribution under any chapter 11 plan proposed and/or confirmed**
28 **in this case.**

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

9 11. Within ten (10) business days of the entry of the Bar Date Order, the Debtor shall
10 serve by United States mail, first-class postage prepaid: (i) the Survivor Claim Bar Date Notice
11 substantially in the form attached as Exhibit E to this Bar Date Order, (ii) a copy of the
12 Confidential Survivor Proof of Claim upon all known Survivor Claimants and their counsel (if
13 known)³ substantially in the form attached as Exhibit B to this Bar Date Order, and (iii) a letter
14 from counsel to the Committee substantially in the form attached here as Exhibit G to this Bar
15 Date Order. In addition, the Debtor shall request that each Parish and school within the
16 geographic limits of the Diocese provide it access to its contact lists, and as permitted shall mail
17 a copy of the Publication Notice substantially similar to the form attached as Exhibit F to each
18 household and address on such contact list.

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

- 21 (a) The Debtor shall post on the home page of the Diocese of Santa Rosa
22 website a copy of the General Bar Date Notice and General Proof of
23 Claim as well as a copy of the Survivor Claim Bar Date Notice and the
24 Confidential Survivor Proof of Claim. The Debtor shall also attempt to
25 post the Survivor Claim Bar Date Notice on the website of the Survivors
26 Network of those Abused by Priests and other websites for victim
27 advocacy groups that will allow the Debtor to publish the Survivor Claim
28 Bar Date Notice.
- (b) The Debtor shall cause a copy of the notice substantially in the form
 attached as Exhibit F to this Bar Date Order (the “Publication Notice”),

³ 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, the Debtor is authorized to serve the Survivor Claimant’s counsel with the Survival Claim Bar Date 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*, on the first available date reasonably practical after entry of the Bar Date Order;
- (ii) Twice each, first on the first available date reasonably practical after entry of the Bar Date Order and second, approximately one month prior to the expiration of the Survivor Claim Bar Date in English, in the following newspapers:
 - i. *Los Angeles Times*;
 - ii. *Sacramento Bee*;
 - iii. *San Francisco Chronicle*;
 - iv. *San Jose Mercury News*;
 - v. *Santa Rosa Press Democrat* (Sonoma county);
 - vi. *Napa Valley Register* (Napa county);
 - vii. *The Ukiah Daily Journal* (Humboldt county);
 - viii. *Lake County Record-Bee* (Lake county);
 - ix. *Times Standard* (Mendocino county);
 - x. *Del Norte Triplicate* (Del Norte county).
- (iii) Twice each, in Spanish, in the *La Opinion de la Bahia* (weekly), *La Prensa Sonoma* (monthly), and *El Leñador* (monthly) first on the first available date reasonably practical after entry of the Bar Date Order and second, approximately one month prior to the expiration of the Survivor Claim Bar Date.

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

- (a) The Debtor will use best efforts to cause the Publication Notice to be placed, in the manner reasonably available with such organization, with the following organizations:
 - (1) National Catholic Register;
 - (2) National Catholic Reporter;
 - (3) Catholic World Report;
 - (4) EWTN (Global Catholic Network);
 - (5) Catholic San Francisco Magazine (monthly)
 - (6) Catholic Voice Oakland (monthly)
 - (7) The Valley Catholic;
 - (8) The Catholic Herald Sacramento
- (b) The Debtor will cause the Publication Notice to be published in the next available edition of the North Coast Catholic. In addition, for each Diocese in California (total of 12), Oregon (2), Washington (3), Idaho (1), Nevada (2), and Arizona (Phoenix and Tucson), to the extent not already identified above, the Debtor will use its best effort to publish the Publication Notice in the respective Diocese publication if available. If

ORDER: (1) FIXING BAR DATE; (2) APPROVING CLAIM
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1 there is a separate Spanish publication, or a Spanish section of the
2 publication, the Debtor will also include the Publication Notice in Spanish
3 in these publications. The Debtor also will request that each Diocese post
4 the Notice of Survivor Claims Bar Date on their website.

- 5 (c) The Debtor will request that an announcement be placed bi-weekly from
6 the first available date after entry of the Bar Date Order until the Survivor
7 Claim Bar Date in the bulletins produced by the parishes and missions
8 located within the geographic territory of the Diocese, in the language in
9 which the Mass is conducted (English or Spanish).
- 10 (d) The Debtor will request each parish and mission in the Diocese to post a
11 flyer announcing the Survivor Claim Bar Date in a prominent location
12 for at least six weeks prior to the Survivor Claim Bar Date.

13 14. The Debtor is authorized pursuant to 11 U.S.C. § 503(b) to pay the costs of
14 mailing and publication as described herein.

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

- 17 (a) Potential Survivor Claimants are directed not to file a Survivor Proof of
18 Claim Form with the Court. Instead, all Survivor Proof of Claim Forms are
19 directed to be sent to the Claims Agent in accordance with the procedures
20 set forth in the Survivor Claim Bar Date Notice.
- 21 (b) Survivor Proof of Claim Forms submitted by Survivor Claimants will not
22 be available to the general public. The Confidentiality Protocol is for the
23 benefit of the Survivor Claimants. Accordingly, Survivor Claimants may
24 elect to make any of the information contained in their own Survivor Proof
25 of Claim Form public; provided, however, notwithstanding that a Survivor
26 Claimant may disclose information on such claimant's Survivor Proof of
27 Claim, such disclosure shall not constitute a waiver of confidentiality and
28 no other party may disclose any information from such Survivor Proof of
29 Claim, except as allowed by Permitted Parties, as defined below.
- 30 (c) Survivor Proof of Claim Forms submitted by a Survivor Claimant shall be
31 held and treated as confidential by the Debtor and Debtor's counsel and
32 copies thereof shall be provided by the Debtor or Debtor's counsel to the
33 parties listed below (the "Permitted Parties") and to such other persons that
34 may be granted access to the Survivor Proofs of Claim by order of the
35 Court. No party (including a Permitted Party) may obtain copies of
36 Survivor Proofs of Claim unless such party first executes a confidentiality
37 agreement substantially in the form attached hereto as Exhibit C (the
38 "Confidentiality Agreement").⁴ Executed Confidentiality Agreements
39 shall be provided to counsel to the Debtor, insurers, reinsurers of the
40 Debtor, Catholic Mutual Relief Society of America and any successor
41 third-party administrator of the Debtor's insurance program, and counsel to
42 the Committee. Permitted Parties shall keep confidential and not disclose
43 the contents of any Survivor Claim Form except as otherwise provided by

⁴ Notwithstanding paragraph 15(c), the U.S. Trustee shall have full access to the Survivor Proofs of Claim without executing a Confidentiality Agreement.

1 the confidentiality provision herein or order of the court. Counsel to the
2 Debtor, insurers, reinsurers of the Debtor, Catholic Mutual Society of
3 America and any administrator of the Debtor's insurance programs, and
counsel to the Committee shall only be required to execute a single
Confidentiality Agreement per firm.

4 (d) The Permitted Parties (the "Permitted Party List") include:

- 5 (1) Counsel and other professionals for the Debtor retained pursuant to
6 an order of the Bankruptcy Court, including partners, counsel,
7 associates, and employees of such professionals, who are necessary
8 to assist the Debtor in reviewing and analyzing the Survivor Claims;
- 9 (2) The Bishop of the Debtor and employees of the Debtor who are
10 necessary to assist the Bishop in reviewing and analyzing the
11 Survivor Claims, Catholic Mutual Relief Society of America and
12 any successor third-party administrator of the Debtor's insurance
13 program and the employees thereof;
- 14 (3) Counsel and other professionals for the Committee, including
15 partners, counsel, associates, and employees of such professionals,
16 who are necessary to assist the Committee in reviewing and
17 analyzing the Survivor Claims;
- 18 (4) Insurers for the Debtor, together with their successors,
19 administrators, retrocessionaires, reinsurers, reinsurance
20 intermediaries, and their counsel and other professionals, including
21 partners, counsel, associates, and employees of such professionals,
22 who are necessary to assist the forgoing in reviewing and analyzing
23 the Survivor Claims;
- 24 (5) Any unknown claims representative appointed pursuant to an order
25 of the Court in this case;
- 26 (6) Any mediator appointed pursuant to an order of this Court to
27 mediate the terms of a settlement or Plan of reorganization in this
28 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 personal counsel (after the
Survivor Proof of 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 Proof of 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 the counsel to the Debtor,

Committee and Insurers 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 7 days' notice to Survivor Claimants.

16. For any proof of claim to be validly and properly filed, a signed original⁵ and a copy of the completed proof of claim, together with any accompanying documentation required by Bankruptcy Rules 3001(c) and 3001(d), must be delivered to the Claims Processing Agent (Donlin Recano & Company, hereafter "Claims Processing Agent") at the address identified on the applicable Bar Date Notice or electronically filed with the Claims Processing 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 wishes to receive acknowledgement of receipt of a proof of claim, the creditor also must submit to the Claims Processing Agent by the applicable Bar Date and concurrently with submitting its original proof of claim: (i) a third copy of the original proof of claim; and (ii) a self-addressed, stamped return envelope.

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

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

19. This Order is without prejudice to any request by the Debtor, Committee or future claims representative to modify the Survivor Claim Bar Date.

20. Pursuant to Fed. R. Bankr. Proc. 3002(c)(4), any claim arising from the rejection of

⁵ Any proof of claim may be signed using software with electronic signature capabilities, such as DocuSign, AdobeSign, VineSign, or similar, reliable program.

1 an executory contract or unexpired lease of the Debtor shall be filed within 30 days after such
2 rejection.

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


5 ***END OF ORDER***
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EXHIBIT A
General Proof of Claim Form

Fill in this information to identify the case:

Debtor 1 The Roman Catholic Bishop of Santa Rosa

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of California 

Case number 23-10113

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?**Federal Rule of
Bankruptcy Procedure
(FRBP) 2002(g)**Where should notices to the creditor be sent?**

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact phone _____

Contact email _____

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

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact phone _____

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? ☐ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ____

7. How much is the claim? \$ ____ Does this amount include interest or other charges?
☐ No
☐ 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? ☐ No
☐ Yes. The claim is secured by a lien on property.
- Nature of property:**
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ 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) _____ %
☐ Fixed
☐ Variable

10. Is this claim based on a lease? ☐ No
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ _____

11. Is this claim subject to a right of setoff? ☐ No
☐ Yes. Identify the property: _____

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.

☐ 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).

Amount entitled to priority

\$ _____

☐ 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.

\$ _____

* 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 _____

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.**
- **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 reverse 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 you may access the claims agent's website (www.donlinrecano.com/rcbsr) 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.

PLEASE SEND COMPLETED PROOF(S) OF CLAIM TO:

If Proof of Claim is sent by mail, send to:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of Santa Rosa
P.O. Box 199043
Blythebourne Station
Brooklyn, NY 11219

If Proof of Claim is sent by Overnight Courier or Hand Delivery, send to:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of Santa Rosa
6201 15th Avenue
Brooklyn, NY 11219

If Proof of Claim is filed electronically, please follow the instructions on the Donlin website at:

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

Do not file these instructions with your form.

EXHIBIT B

Confidential Survivor Proof of Claim Form

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA
SANTA ROSA DIVISION

In re:

THE ROMAN CATHOLIC BISHOP OF
SANTA ROSA¹,

Debtor In Possession.

Case No. 23-10113

Chapter 11

CONFIDENTIAL SURVIVOR PROOF OF CLAIM

IMPORTANT:
PLEASE COMPLETE THIS FORM SO THAT IT IS RECEIVED NO LATER THAN
OCTOBER 20, 2023 (“BAR DATE”)

IMPORTANT - DO NOT FILE THIS DOCUMENT WITH THE COURT

This Confidential Survivor Proof of Claim has two separate components: (1) a mandatory 3-page “Official Form 410” attached hereto (“**Proof of Claim**”), and (2) a voluntary Confidential Survivor Supplement, also attached hereto (“**Supplement**”). When submitting your Proof of Claim in this case, you are **strongly encouraged** to also complete the Supplement, and include it as an attachment to your Proof of Claim. Submitting the completed Supplement at the outset will help streamline the process of identifying claims and all applicable insurance and expedite distribution to creditors.

Please carefully read the Notice and Instructions that are included with this Confidential Survivor Proof of Claim and respond to all applicable questions. If you have an attorney, you should complete this form with the assistance of counsel. Send a signed original of the completed Survivor Proof of Claim and one copy as follows: If by **mail**, to: Donlin, Recano & Company, Inc., Re: The Roman Catholic Bishop of Santa Rosa, P.O. Box 199043, Blythebourne Station, Brooklyn, NY 11219, or if by **hand delivery or overnight courier**, to: Donlin, Recano & Company, Inc., Re: The Roman Catholic Bishop of Santa Rosa, 6201 15th Avenue, Brooklyn, NY 11219, or you may submit a claim **electronically** at:

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

The Confidential Survivor Proof of Claim form must be mailed, delivered or electronically submitted to Donlin, Recano & Company, Inc. (“DRC”) so that it is received no later than October 20, 2023. 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.

¹ The last four digits of the Debtor’s federal tax identification number are 0038. The Debtor’s principal place of business is located at 985 Airway Court, Santa Rosa, CA 95403.

FAILURE TO COMPLETE AND RETURN A PROOF OF CLAIM MAY RESULT IN YOUR INABILITY TO VOTE ON A PLAN OF REORGANIZATION AND RECEIVE A DISTRIBUTION FROM THE ROMAN CATHOLIC BISHOP OF SANTA ROSA, REFERRED TO HERE AS “RCBSR”.

The failure to submit a completed Supplement with a Proof of Claim asserting a Survivor Claim may be a basis for an objection to such claim.

Your Identity Will be Kept Strictly Confidential, and Outside the Public Record of the Bankruptcy Court. However, this Confidential Survivor Proof of Claim and the Information in this Confidential Survivor Proof of Claim will be Provided Pursuant to Court-Approved Confidentiality Guidelines to the Debtor, the Official Committee of Unsecured Creditors and to such other Persons as the Bankruptcy Court Determines need the Information in Order to Evaluate the Claim.

This Confidential Survivor Proof of Claim is for Survivor Claimants Only.

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 RCBSR 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 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 RCBSR or any other person or entity for whose acts or failures to act the RCBSR is or was allegedly responsible, including but not limited to, claims against clergy, deacons, seminarians, employees, teachers, or volunteers.

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


To be valid, the Confidential Survivor Proof of Claim must be signed by you or your attorney (if represented by one). If the Survivor Claimant is deceased or incapacitated, the Confidential Survivor Proof of Claim may be signed by the Survivor Claimant’s representative, executor of the estate or the attorney for the estate. If the Survivor Claimant is a minor, the Confidential Survivor Proof of 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 which question your answer applies to.

Fill in this information to identify the case:

Debtor 1 The Roman Catholic Bishop of Santa Rosa

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of California 

Case number 23-10113

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?

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

Where should notices to the creditor be sent?

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact phone _____

Contact email _____

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

Name _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Contact phone _____

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?** ☐ No
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: ____

7. **How much is the claim?** \$ ____ **Does this amount include interest or other charges?**
☐ No
☐ 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?** ☐ No
☐ Yes. The claim is secured by a lien on property.

Nature of property:
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
☐ Motor vehicle
☐ 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) _____ %
☐ Fixed
☐ Variable

10. **Is this claim based on a lease?** ☐ No
☐ Yes. **Amount necessary to cure any default as of the date of the petition.** \$ _____

11. **Is this claim subject to a right of setoff?** ☐ No
☐ 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 _____

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 RCBSR, certain insurers of the RCBSR, the Official Committee of Unsecured Creditors, the United States Trustee, 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.

PART 2: IDENTIFYING INFORMATION

A. Survivor Claimant

First Name	Middle Initial	Last Name	Suffix
------------	----------------	-----------	--------

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 other than USA)
------	-------------	------------------------	-----------------------------

Telephone No(s):

Home: _____ Work: _____ Cell: _____

Email address: _____

Last 4 digits of Social Security Number: _____

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: _____

B. 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.)

Telephone

Fax Number

Email Address

PART 3: NATURE OF COMPLAINT

(Attach additional sheets if necessary)

Note: If you have previously filed a lawsuit against The Roman Catholic Bishop of Santa Rosa, aka Diocese of Santa Rosa ("RCBSR") in state or federal court, you may attach the complaint. If you did not file a lawsuit, or if the complaint does not contain all of the information requested below, you must provide the information below.

- **As to claims involving multiple perpetrators, this part must be answered separately as to any claimant alleging abuse by one or more RCBSR affiliated perpetrators. Part 4 must be answered separately for each complaint related to separate RCBSR affiliated perpetrators.**

- a. Who committed the acts of abuse or other wrongful conduct? Please identify the person by complete name(s) or other description of each abuser to the best of your recollection. 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.).

- b. What is the position, title or relationship to you (if known) of the abuser or individual who committed these acts?

- c. Where did the Abuse or other wrongful conduct take place? Please be specific and complete 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).

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

1. If the Abuse or other 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 season (fall, winter, spring, summer), if you remember).

2. If the Abuse or other 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 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).

- e. 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 sexual abuse). (Please use additional pages and attach them to this Proof of Claim, if necessary):

- f. Were there any witnesses to the abuse? If so, please identify the witnesses and their present location, if known.

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

- h. Did you tell anyone about the Abuse or other wrongful conduct, 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 RCBSR; counselors; and law enforcement authorities)? You do not need to disclose any communications you had with your attorney.

- i. If subsequent wrongful conduct by the RCBSR or its employees or officials caused you further trauma 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.

Continued on next page.

PART 4: 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 act or acts of Abuse or other wrongful conduct that resulted in the claim (for example, the effect on your education, employment, personal relationships, health, and any physical injuries)?

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

PART 5: ADDITIONAL INFORMATION

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

☐ Yes ☐ No (If “Yes,” you are required to 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,” which case(s): _____

Please attach a copy of any complaint in such lawsuit.

If “Yes,” did you file a “certificate of merit” (described at CA Code Civil Proc. § 340.1(g))?

☐ 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. You are required to attach a copy of any settlement agreement.) _____

d. Bankruptcy. Have you ever filed bankruptcy? ☐ Yes ☐ No (If "Yes," please provide the following information:

Name of Case: _____ Court: _____

Date filed: _____ Case No. _____

Chapter: 7 11 12 13 Name of Trustee: _____

Sign and print your name. If you are signing the claim on behalf of another person or an estate, print your title.

Under penalty of perjury, I declare the foregoing statements to be true and correct.

Date: _____

Signature: _____

Print Name: _____

Title: _____

(Relationship of signer to party on behalf of whom claim is being made: (such as 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 5 years, or both. 18 U.S.C. §§ 152 and 3571.

EXHIBIT C
Confidentiality Agreement

1 PAUL J. PASCUZZI, State Bar No. 148810
2 JASON E. RIOS, State Bar No. 190086
3 THOMAS R. PHINNEY, State Bar No. 159435
4 FELDERSTEIN FITZGERALD
5 WILLOUGHBY PASCUZZI & RIOS LLP
6 500 Capitol Mall, Suite 2250
7 Sacramento, CA 95814
8 Telephone: (916) 329-7400
9 Facsimile: (916) 329-7435
10 ppascuzzi@ffwplaw.com
11 jrios@ffwplaw.com
12 tphinney@ffwplaw.com

13 Attorneys for
14 The Roman Catholic Bishop of Santa Rosa

15 UNITED STATES BANKRUPTCY COURT
16 NORTHERN DISTRICT OF CALIFORNIA
17 SANTA ROSA DIVISION

18 In re:

19 THE ROMAN CATHOLIC BISHOP OF
20 SANTA ROSA¹,

21 Debtor In Possession.

22 Case No. 23-10113

23 Chapter 11

24 **CONFIDENTIALITY AGREEMENT**

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

26 The undersigned (the “**Recipient**”) is a Permitted Party pursuant to the Order Fixing Time for
27 Filing Proofs of Claims; Approving Proof of Claim Forms; Providing Confidentiality
28 Protocols; and Approving Form and Manner of Notice (the “**Order**”) [Docket No.____] on
_____, 2023 by the United States Bankruptcy Court for the Northern District of
California (the “Court”) in Case No. 23-10113, In Re: The Roman Catholic Bishop of Santa
Rosa (the “**Case**”).

29 **WHEREAS**, the Recipient requests access to confidential Survivor Proof of Claim Forms² filed
30 in the Case after execution of this Agreement pursuant to and in accordance with the terms of
31 the Order;

32 **WHEREAS**, Recipient agrees to keep the information provided in any and all Survivor Proof of

33 ¹ The last four digits of the Debtor’s federal tax identification number are 0038. The Debtor’s
34 principal place of business is located at 985 Airway Court, Santa Rosa, CA 95403.

35 ² Capitalized terms used but not defined herein shall have the meaning and definitions ascribed to
36 them in the Order.

1 Claim Forms confidential pursuant to and in accordance with the terms of the Order and this
2 Agreement; and

3 **WHEREAS**, with the exception of the parties identified in paragraph 15(d) of the Order,
4 access to the Survivor Proof of Claim Forms extends only to the natural person who executes
5 this Agreement. A separate confidentially agreement must be signed by each natural person
6 who seeks access to the Survivor Proof of Claim Forms on behalf of a Permitted Party.

7 **NOW, THEREFORE, IT IS AGREED AS FOLLOWS:**

- 8 1. Recipient agrees to keep the information provided in the Survivor Proof of
9 Claim Forms confidential pursuant to and in accordance with the terms of the
10 Order;
- 11 2. Recipient agrees to not distribute any Survivor Proof of Claim Forms or
12 information provided in the Proof of Claim Forms in violation of the
13 Confidentiality Protocols in the Order.
- 14 3. Recipient agrees that only the natural person who executes this Agreement
15 will have access to the Survivor Proof of Claim Forms unless Recipient is a
16 Permitted Party pursuant to paragraph 15(d) of the Order.
- 17 4. Recipient will only communicate information from the confidential Survivor
18 Proof of Claim Forms with other Permitted Parties who have executed a
19 confidentiality agreement pursuant to the Order.
- 20 5. Recipient consents to the jurisdiction of the Court to adjudicate any violation of
21 this Agreement or the Order.
- 22 6. Recipient shall promptly report any disclosure of information from a
23 confidential Survivor Claim to the Debtor and any appointed Committee, and
24 shall cooperate with efforts to recover the information and/or mitigate the
25 effects of the disclosure.

26 Dated: _____, 2023.

27 Signature: _____

28 Print Name: _____

Name of Party Represented (if any): _____

EXHIBIT D
General Bar Date Notice

1 PAUL J. PASCUZZI, State Bar No. 148810
JASON E. RIOS, State Bar No. 190086
2 THOMAS R. PHINNEY, State Bar No. 159435
FELDERSTEIN FITZGERALD
3 WILLOUGHBY PASCUZZI & RIOS LLP
500 Capitol Mall, Suite 2250
4 Sacramento, CA 95814
Telephone: (916) 329-7400
5 Facsimile: (916) 329-7435
ppascuzzi@ffwplaw.com
6 jrios@ffwplaw.com
tphinney@ffwplaw.com

7 Attorneys for
8 The Roman Catholic Bishop of Santa Rosa

9 UNITED STATES BANKRUPTCY COURT
10 NORTHERN DISTRICT OF CALIFORNIA
11 SANTA ROSA DIVISION

12 In re:

13 THE ROMAN CATHOLIC BISHOP OF
SANTA ROSA,¹

14 Debtor In Possession.

Case No. 23-10113

Chapter 11

15
16 **NOTICE OF BAR DATE FOR FILING OF GENERAL PROOFS OF CLAIM**
17 **[Survivor Claimants will receive Notice separately with additional Claim Form**
Instructions]

18 **TO ALL PERSONS AND ENTITIES WITH CLAIMS AGAINST THE ROMAN**
19 **CATHOLIC BISHOP OF SANTA ROSA:**

20 **PLEASE TAKE NOTICE** that on March 13, 2023 (the “Petition Date”) The Roman Catholic
21 Bishop of Santa Rosa, debtor and debtor in possession (“Debtor”) in the above-captioned case filed
22 a voluntary petition for relief under Chapter 11 of Title 11 of the United States Code in the United
23 States Bankruptcy Court for the Northern District of California (the “Court”). The Debtor, its
address, case number, proof of claim forms and other relevant information related to this Chapter
11 case may be obtained at: www.donlinrecano.com/rcbsr.

24 **PLEASE TAKE FURTHER NOTICE** that on July __, 2023, the Court entered an order (the
25 “Bar Date Order”) establishing October 20, 2023 as the claims bar date (“Bar Date”) in the
26 Debtor’s Chapter 11 case. The directions for filing a proof of claim by mailing and electronically
are set forth at the end of the instructions.

27 ¹ The last four digits of the Debtor’s federal tax identification number are 0038. The Debtor’s
28 principal place of business is located at 985 Airway Court, Santa Rosa, CA 95403.

1 **PLEASE TAKE FURTHER NOTICE** that for your convenience, enclosed with this notice (the
2 “General Creditor Bar Date Notice”) is a proof of claim form (the “General Creditor Proof of
3 Claim Form”). If this notice does not include a proof of claim form, a proof of claim form may
be obtained from the Debtor at: <https://www.donlinrecano.com/Clients/rcbsr/Static/POC>.

4 **KEY DEFINITIONS**

- 5 • As used in this Notice, the term “Entity” has the meaning given to it in section 101(15)
6 of the Bankruptcy Code, and includes all persons (individuals, partnerships and
corporations), estates, trusts, Governmental Units and the United States Trustee.
- 7 • As used in this Notice, the term “Governmental Unit” has the meaning given to it in
8 section 101(27) of the Bankruptcy Code and includes the United States, states,
9 commonwealths, districts, territories, municipalities, foreign states, or departments,
agencies or instrumentalities of the foregoing.
- 10 • As used in this Notice, the term “Claim” shall mean, as to or against the Debtor
11 and in accordance with section 101(5) of the Bankruptcy Code: (i) any right to
12 payment, whether or not such right is reduced to judgment, liquidated, unliquidated,
13 fixed, contingent, matured, unmatured, disputed, undisputed, legal, equitable, secured
14 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.

15 **PRELIMINARY INSTRUCTIONS**

16 Claims based on acts or omissions of the Debtor that occurred before March 13, 2023,
17 must be filed on or prior to the applicable Bar Date, even if such claims are not now fixed,
18 liquidated, or certain or did not mature or become fixed, liquidated, or certain before March 13,
2023.

19 **Please note that individuals asserting Claims arising from abuse for which such**
20 **individuals believe the Roman Catholic Bishop of Santa Rosa may be liable are instructed**
21 **to file a Confidential Survivor Proof of Claim Form, consistent with the Bar Date Order**
22 **and the Survivor Bar Date Notice. CLAIMANTS MAY OBTAIN COPIES of these Forms**
from the Debtor’s Claims, Noticing and Solicitation Agent, Donlin, Recano & Company,
Inc. at <https://www.donlinrecano.com/Clients/rcbsr/Static/SurvivorClaims>

23 **A Claimant Should Consult an Attorney if the Claimant Has Any Questions,**
24 **Including Whether Such Claimant Must File a Proof of Claim.**

25 **I. WHO MUST FILE A PROOF OF CLAIM AND THE APPLICABLE BAR DATES**

26 ***The Bar Date:*** The Bar Date Order establishes October 20, 2023, as the deadline for
filing proofs of claim in this case:

- 27 1. The General Bar Date. Except as set forth below, pursuant to the Bar Date Order, all
28 Entities, excluding Governmental Units, holding Claims against the Debtor (whether

secured, unsecured priority, or unsecured nonpriority) that arose or are deemed to have arisen prior to March 13, 2023, are required to file proofs of claims by the General Bar Date, **October 20, 2023**.

Entities that MUST File Proofs of Claims by the General Bar Date: Except as set forth in paragraph “3” below, the following Entities must file proofs of claim on or before the General Bar Date:

- A. Any person or entity whose pre-petition claim against the Debtor that is not listed in the Debtor’s Schedules or whose pre-petition 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, including claims based on 11 U.S.C. § 503(b)(9); and
- B. Any person or entity that believes that its pre-petition 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, including claims based on 11 U.S.C. § 503(b)(9).

2. **The Government Unit Bar Date.** Except as set forth below, pursuant to the Bar Date Order, all Governmental Units (as defined by 11 U.S.C. § 101(27)) holding Claims against the Debtor that arose or are deemed to have arisen prior to March 13, 2023, are required to file proofs of claims by **October 20, 2023**.

Entities that MUST File Proofs of Claims by the Government Unit Bar Date: Except as set forth in paragraph “3” below, the following Entities must file proofs of claim on or before the Governmental Unit Bar Date:

- A. Any person or entity whose pre-petition claim against the Debtor that is not listed in the Debtor’s Schedules or whose pre-petition 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 pre-petition 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 Proofs of Claim by the General Bar Date or Government Unit Bar Date:** The Bar Date Order further provides that the following Entities need not file proofs of claim by the General Bar Date:

- A. Any person or entity that has already properly filed a proof of claim against the Debtor with the Clerk of the Court for the United States Bankruptcy Court for the Northern District of California or with Donlin, Recano & Company, Inc., the Debtor’s claims, noticing and solicitation agent;
- 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;

- 1 C. Professionals retained by the Debtor or the Committee pursuant to orders of this
2 Court, who assert administrative claims for payment of fees and expenses subject
3 to the Court's approval pursuant to §§ 330, 331, and 503(b) of the Bankruptcy
4 Code;
- 5 D. Any person or entity that asserts an administrative expense claim against the Debtor
6 pursuant to §§ 503(b)(1) through (8) of the Bankruptcy Code;
- 7 E. Any person or entity whose claim against the Debtor has been allowed by an order
8 of the Court entered on or before the applicable Bar Date;
- 9 F. Any person or entity whose claim has been paid in full;
- 10 G. Any holder of a claim for which a separate deadline is (or has been) fixed by the
11 Court; and
- 12 H. The United States Trustee regarding a claim for quarterly fees under 28 U.S.C. §
13 1930(a)(6).

14 II. CONSEQUENCES OF FAILURE TO FILE PROOF OF CLAIM

15 Any Entity that is required to file a proof of claim, but fails to do so by the applicable Bar
16 Date described in this General Bar Date Notice: (i) may NOT be treated as a creditor with
17 respect to such Claim for the purposes of voting on and distribution under any Chapter
18 11 plan proposed and/or confirmed in this case; and (ii) may be forever barred, estopped,
19 and enjoined from asserting such Claim against the Debtor (or filing a proof of claim with
20 respect thereto), and the Debtor and its property may be forever discharged from any and
21 all indebtedness or liability with respect to such Claim.

22 RESERVATION OF RIGHTS

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

28 III. PROCEDURE FOR FILING PROOFS OF CLAIM

Unless one of the exceptions described in Section I, Paragraph 3 above applies, you MUST file
an original proof of claim 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 Proof of Claim is sent by mail:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of Santa Rosa
P.O. Box 199043
Blythebourne Station
Brooklyn, NY 11219

If Proof of Claim is sent by Hand Delivery or Overnight Courier, send to:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of Santa Rosa
6201 15th Avenue
Brooklyn, NY 11219

Or electronically at: <https://www.donlinrecano.com/Clients/rcbsr/FileClaim>

Any proof of claim submitted by facsimile or e-mail will not be accepted and will not be deemed filed until the proof of claim is submitted by the method described in the foregoing sentences.

All 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 proof of claim form must be written in English and be denominated in United States currency. In addition, all proofs of claim 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 proof of claim, you must also submit by the General Bar Date or the Government Unit Bar Date, as applicable, and concurrently with submitting your original proof of claim: (i) one additional copy of your original proof of claim; and (ii) a self-addressed, stamped return envelope.

ADDITIONAL INFORMATION

1. You may be listed as the holder of a Claim against the 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 www.donlinrecano.com/rcbsr
2. Questions concerning the contents of this Notice and requests for proofs of claim forms should be directed to Donlin Recano & Company, Inc. via e-mail at rcbsantarosainfo@drc.equiniti.com or toll free at 1-800-236-1551, between the hours of 9:00 a.m. and 5:00 p.m. (prevailing Eastern Time), Monday through Friday. Please note that Donlin, Recano & Company, Inc. 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: July __, 2023

FELDERSTEIN FITZGERALD
WILLOUGHBY PASCUZZI & RIOS LLP

By _____
PAUL J. PASCUZZI
Attorneys for Debtor and Debtor In Possession
The Roman Catholic Bishop of Santa Rosa

EXHIBIT E
Survivor Claim Bar Date Notice

1 PAUL J. PASCUZZI, State Bar No. 148810
2 JASON E. RIOS, State Bar No. 190086
3 THOMAS R. PHINNEY, State Bar No. 159435
4 FELDERSTEIN FITZGERALD
5 WILLOUGHBY PASCUZZI & RIOS LLP
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11 jrios@ffwplaw.com
12 tphinney@ffwplaw.com

13 Attorneys for
14 The Roman Catholic Bishop of Santa Rosa

15 UNITED STATES BANKRUPTCY COURT
16 NORTHERN DISTRICT OF CALIFORNIA
17 SANTA ROSA DIVISION

18 In re:

Case No. 23-10113

19 THE ROMAN CATHOLIC BISHOP OF
20 SANTA ROSA,¹

Chapter 11

21 Debtor In Possession.

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

24 **TO ALL PERSONS WITH CLAIMS ARISING FROM ABUSE FOR WHICH THE**
25 **ROMAN CATHOLIC BISHOP OF SANTA ROSA MAY BE LIABLE:**

26 **OCTOBER 20, 2023 IS THE LAST DATE TO FILE PROOFS OF CLAIM FOR ABUSE**

27 On March 13, 2023 (the "Petition Date") The Roman Catholic Bishop of Santa Rosa, aka
28 Santa Rosa Diocese ("Debtor" or "RCBSR") Debtor and Debtor in Possession in the above-
captioned case 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 Northern District of California (the
"Court"). The Debtor, its address, case number, proof of claim forms and other relevant
information related to this Chapter 11 case may be obtained at: www.donlinrecano.com/rcbsr.
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, the "Survivor Claims") should carefully read this notice.

¹ The last four digits of the Debtor's federal tax identification number are 0038. The Debtor's
principal place of business is located at 985 Airway Court, Santa Rosa, CA 95403.

For the purposes of this Proof of Claim, **Survivor Claim** is defined as: any Claim (as defined in section 101(5) of the Bankruptcy Code) against RCBSR 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 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 RCBSR or any other person or entity for whose acts or failures to act the RCBSR is or was allegedly responsible, including but not limited to, claims against clergy, deacons, seminarians, employees, teachers, or volunteers.

FILING DEADLINE

The United States Bankruptcy Court for the Northern District of California entered an order (the "Bar Date Order") establishing **October 20, 2023**, as the last date (the "**Survivor Bar Date**") for each Survivor Claimant to file a proof of claim form (the "**Survivor Proof of Claim Form**"). The Survivor Bar Date and the procedures set forth below for filing proofs of claim apply to all Survivor Claims against the Debtor.

WHO MUST FILE

If you believe that you have a Survivor Claim, you must file a Survivor Proof of Claim Form to maintain and/or preserve any claims that you have against the Debtor. Even if you have already filed a lawsuit against the Debtor alleging abuse you must still file a Survivor Proof of Claim Form to maintain and/or preserve your rights in the Debtor's Chapter 11 case.

WHAT TO FILE

FILE A CONFIDENTIAL SURVIVOR PROOF OF CLAIM FORM AND VOLUNTARY CONFIDENTIAL SURVIVOR SUPPLEMENT, COPIES OF WHICH ARE ENCLOSED. YOU MAY ALSO OBTAIN A COPY OF THE SURVIVOR PROOF OF CLAIM FORM AND SUPPLEMENT BY FOLLOWING THE INSTRUCTIONS BELOW.

PROCEDURES FOR FILING A SURVIVOR PROOF OF CLAIM FORM

To file a Survivor Proof of Claim Form:

- Fill out the **Confidential Survivor Proof of Claim Form**. A copy is provided with this Notice, and can also be obtained here:
<https://www.donlinrecano.com/Clients/rcbsr/Static/SurvivorClaims>
- Fill out the voluntary **Confidential Survivor Supplement**. A copy is provided with this Notice, and can also be obtained here:
<https://www.donlinrecano.com/Clients/rcbsr/Static/SurvivorClaims>

Survivor claimants are strongly encouraged to complete and submit the Confidential Survivor Supplement. The failure to submit a completed Confidential Survivor Supplement with any proof of claim asserting a Survivor

Claim may be a basis for an objection to such claim.

- For additional copies of the Confidential Survivor Proof of Claim Form: (a) photocopy the Confidential Survivor Proof of Claim Form; (b) contact the Debtor's claims agent Donlin, Recano & Company, Inc. via e-mail at rcbsantarosainfo@drc.equiniti.com or toll free at 1-800-236-1551, 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: www.donlinrecano.com/rcbsr
- **Please note that the 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 Form **so as to be received** by **October 20, 2023**, as follows:

If Survivor Proof of Claim is sent by mail:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of Santa Rosa
P.O. Box 199043
Blythebourne Station
Brooklyn, NY 11219

If Survivor Proof of Claim is sent by Hand Delivery or Overnight Courier:

Donlin, Recano & Company, Inc.
Re: The Roman Catholic Bishop of Santa Rosa
6201 15th Avenue
Brooklyn, NY 11219

Or electronically at:

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

- Do not file the Survivor Claim with the Bankruptcy Court.
- Survivor Proof of Claim Forms will be deemed timely filed only if they are **received** by Donlin, Recano & Company, Inc. by **October 20, 2023**.
- **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.**

CONSEQUENCES OF FAILURE TO FILE A PROOF OF CLAIM

The deadline for filing a Survivor Proof of Claim Form is **October 20, 2023**. Any person who has a Survivor Claim and does not file a Survivor 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 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 the Debtor or its property, and may not receive**

1 any payment or distribution in connection with such Survivor Claim.

2
3 **CONFIDENTIALITY**

4 Pursuant to the Bar Date Order, filed Survivor Proofs of Claim Forms and the
5 Supplement thereto will remain confidential in this bankruptcy case. Therefore, the Survivor
6 Proof of Claim Form and the Supplement thereto that you file will not be available to the
7 general public, but will be kept confidential, except that as specified by court order information
8 will be provided to the Debtor, the Debtor's attorneys, the United States Trustee's Office for the
9 Northern District of California, the Debtor's insurers, attorneys for the official committee of
10 unsecured creditors and its members, any unknown claims representative appointed under a plan
11 of reorganization, any settlement trustee appointed to administer payments to Survivor
12 Claimants, and such other persons as the Court determines should have the information in order
13 to evaluate the Survivor Claim, all of whom will agree to keep the information provided by you
14 confidential.

15 Dated: July __, 2023

FELDERSTEIN FITZGERALD
WILLOUGHBY PASCUZZI & RIOS LLP

16 By: /s/ Paul J. Pascuzzi
17 PAUL J. PASCUZZI
18 Attorneys for Debtor and Debtor In Possession
19 The Roman Catholic Bishop of Santa Rosa
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EXHIBIT F
Publication Notice

U.S. BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF CALIFORNIA

In re: The Roman Catholic Bishop of Santa Rosa, Case No. 23-10113

Notice of Deadline for Filing Claims: October 20, 2023

**YOU MAY HAVE A SEXUAL ABUSE CLAIM OR OTHER
CLAIM AGAINST THE DIOCESE OF SANTA ROSA**

On March 13, 2023, The Roman Catholic Bishop of Santa Rosa aka Diocese of Santa Rosa, (“Debtor”) filed for protection under Chapter 11 of the Bankruptcy Code.

If you were sexually abused by any person connected with the Debtor, you must file a claim so as to be received by October 20, 2023, or otherwise you will be forever barred, estopped, and enjoined from asserting such claim against the Debtor.

Claims based on acts or omissions of the Debtor that occurred before March 13, 2023, must be filed on or before 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 March 13, 2023.

For more information on how to obtain and file a proof of claim form and associated documents, please visit www.donlinrecano.com/rcbsr, or contact Donlin, Recano & Company, Inc., the Debtor’s claims agent via e-mail at rcbsantarosainfo@drc.equiniti.com or toll free at 1-800-236-1551, between the hours of 9:00 a.m. and 5:00 p.m. (prevailing Eastern Time), Monday through Friday.

EXHIBIT G
Committee Support Letter

July 20, 2023

Re: In re The Roman Catholic Bishop of Santa Rosa (Case No. 23-10113)

Dear Survivor:

On March 13, 2023 the Roman Catholic Bishop of Santa Rosa (the “Diocese”) filed for bankruptcy relief in the United States Bankruptcy Court for the Northern District of California. Our law firm represents the Official Committee of Unsecured Creditors (the “Committee”) appointed in the Diocese’s bankruptcy case. The Committee is comprised of survivors of sexual abuse and it was appointed to represent the interests of all unsecured creditors in the Diocese’s bankruptcy case, including any person entitled to assert a sexual abuse claim against the Diocese.

You are receiving this letter because the Diocese has identified you as someone that may have a sexual abuse claim. The Court has required all persons holding claims against the Diocese to complete and submit a proof of claim form. Completed claim forms must be received no later than **October 20, 2023**.

This letter is being delivered to you along with a package of materials that includes a notice of the claims bar date, a copy of an official claim form (Official Form 410), and something called a Confidential Survivor Supplement. **To assert a claim against the Diocese, you must fill out Official Form 410 and submit that form so that it is received no later than October 20, 2023.**

You are not *required* to fill out and submit the Confidential Survivor Abuse Claim Supplement, but the Committee strongly recommends that you do so. The Committee believes that completing the Confidential Survivor Abuse Claim Supplement will be beneficial to you and other survivors in the case because completed supplements will help the Debtor, the Committee, and the Debtor’s insurance companies understand your claim more clearly. Once the details of all survivor claims are understood, the Committee believes that the case may resolve more quickly, recoveries for survivor claimants may be higher, additional attempts to get information from survivors (through depositions or other “discovery”) may become unnecessary, and costly and upsetting objections to survivor claims will become less likely to occur.

50 South Sixth Street, Suite 2600, Minneapolis, MN 55402

STINSON LLP / STINSON.COM

Please note that any information you provide on the Confidential Survivor Abuse Claim Supplement will be kept strictly confidential. Certain parties will have access to the information, such as the Diocese, its attorneys and insurers, legal counsel for the Committee, and the United States Trustee, but your information will only be shared with this limited group through confidentiality procedures imposed by the Bankruptcy Court.

Should you have any questions regarding the Confidential Survivor Abuse Claim Supplement, please do not hesitate to contact the Committee at the following number: **(612) 335-1500.**

Sincerely,

Stinson LLP

Robert Kugler