

UNITED STATES
BANKRUPTCY COURT
DISTRICT OF DELAWARE

AB CUSTOMER
PROGRAMS PROOF OF
CLAIM

Debtor Information:

Deconic Group LLC (Case No. 20-11792)

In the United States Bankruptcy Court for the District of Delaware

Note: This form should only be used in respect of a claim on account of a pre-paid, reloadable gift card related to the Alexis Bittar® brand of goods sold prior to

September 11, 2020 (such gift cards, "AB Gift Cards") and merchandise or store credits issued prior to September 11, 2020 ("AB Customer Credits", together with AB Gift Cards, the "AB Customer Programs").

Name of Creditor
(The person or entity to whom the debtor owes money or property)

Check box if you are aware that anyone else has filed a proof of claim relating to your AB Customer Programs claim. Attach copy of statement giving particulars.

Check here if this claim:

replaces or amends a previously filed AB Customer Programs Proof of Claim.

Claim Number (if known):

Name and Addresses Where Notices Should be Sent:

Name and Addresses Where Payment Should be Sent (if different):

Dated:

1. BASIS FOR CLAIM:

- Gift card related to the Alexis Bittar® brand of goods sold prior to September 11, 2020
- Merchandise or store credits issued prior to September 11, 2020

2. DATE CARD OR CREDIT WAS SOLD/ISSUED (IF KNOWN):

3. GIFT CARD IDENTIFICATION NUMBER / CREDIT TRANSACTION NUMBER:

Note: For merchandise or store credits, please provide a copy of the receipt or other proof of a valid merchandise or store credits. For physical gift cards, the gift card identification number is listed on the back of the card. For electronic gift cards, a similar identification number was provided via e-mail.

4. TOTAL AMOUNT OF CLAIM: \$ _____ (Total)

5. SUPPORTING DOCUMENTS: No supporting documentation is required for claims regarding gift cards so long as the information requested in Box 3 (above) has been provided. For claims regarding AB Customer Credits, attach a copy of the receipt or other proof of a valid merchandise or store credits to this form.

6. TIME-STAMPED COPY: To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

THIS SPACE IS FOR
COURT USE ONLY

Date:

Sign and print the name and title, if any, of the creditor or other person authorized to file this Claim (attach copy of power of attorney, if any)