FORM 535 – FORMAL PROOF OF DEBT OR CLAIM

BWX LIMITED (ACN 163 488 631) AND ITS SUBSIDIARIES AS LISTED IN SCHEDULE 1

(RECEIVERS AND MANAGERS APPOINTED) (ADMINISTRATORS APPOINTED)

(TOGETHER "THE COMPANIES")

To the Administrators of the BWX Group (see below list of companies):

Select **one (1)** Company only that applies. Please tick **only one** Company that you are a creditor of *(if you are a creditor of more than one Company, you **must** complete a new Formal Proof of Debt for the other Company/s).*

Company name	ACN	Tick only ONE
BWX Limited	163 488 631	☐
Beautiworx Pty Ltd	163 847 916	☐
LHS No. 2 Pty Ltd	165 455 201	☐
Sapu Corporation Pty Ltd (Formerly Uspa Corporation Pty Ltd)	163 273 514	☐
Edward Beale Hair Care Pty Ltd	167 891 161	☐
BWX Brands Pty Ltd*	602 062 117	☐
BWX Australia Pty Ltd	601 966 170	☐
Sukin Australia Pty Ltd	602 062 199	☐
Renew Skin Care Australia Pty Ltd	606 139 315	☐
Derma Sukin Australia Pty Ltd	606 140 818	☐
Lightning Distribution Pty Ltd	610 861 455	☐
BWX Digital Pty Ltd	621 403 370	☐
The Good Collective Pty Ltd	169 556 398	☐

Creditor Name:.....

Address: .....

Amount $.....

Particulars of the debt are:

Date	Consideration	Amount ($/c)	Remarks
	(state how the debt arose)		*(include details of voucher substantiating payment)*

1. To my knowledge or belief the creditor has not, nor has any person by the creditor's order, had or received any satisfaction or security for the sum or any part of it except for the following:.....
.....
(insert particulars of all securities held. If the securities are on the property of any of the Companies, assess the value of those securities. If any bills or other negotiable securities are held, show them in a schedule in the following form).

Date	Drawer	Acceptor	Amount ($/c)	Due Date

2. Signed by *(select correct option)*:
   - ☐ I am the creditor personally
   - ☐ I am employed by the creditor and authorised in writing by the creditor to make this statement. I know that the debt was incurred for the consideration stated and that the debt, to the best of my knowledge and belief, remains unpaid and unsatisfied
   - ☐ I am the creditor's agent authorised in writing to make this statement in writing. I know the debt was incurred for the consideration stated and that the debt, to the best of my knowledge and belief, remains unpaid and unsatisfied.

Signature: ..... Dated: .....

Name: ..... Occupation: .....

Address: .....

** If prepared by an employee or agent of the creditor, also insert a description of the occupation of the creditor*

RECEIVE REPORTS BY EMAIL	**YES**	**NO**
Do you wish to receive all future reports and correspondence from our office via email?	☐	☐
Email:		

If being used for the purpose of voting at a meeting:

a) Is the debt you are claiming assigned to you? ☐ Yes ☐ No

b) If yes, attach written evidence of the debt, the assignment and consideration given. ☐ Attached

c) If yes, what value of consideration did you give for the assignment (e.g., what amount did you pay for the debt?) $ .....

d) If yes, are you a related party creditor of any of the Companies? (If you are unsure contact the Administrator) ☐ Yes ☐ No

Schedule 1 – Schedule of Subsidiaries

Company name	ACN
Beautiworx Pty Ltd	163 847 916
LHS No. 2 Pty Ltd	165 455 201
Sapu Corporation Pty Ltd (Formerly Uspa Corporation Pty Ltd)	163 273 514
Edward Beale Hair Care Pty Ltd	167 891 161
BWX Brands Pty Ltd	602 062 117
BWX Australia Pty Ltd	601 966 170
Sukin Australia Pty Ltd	602 062 199
Renew Skin Care Australia Pty Ltd	606 139 315
Derma Sukin Australia Pty Ltd	606 140 818
Lightning Distribution Pty Ltd	610 861 455
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