FORM 535 - FORMAL PROOF OF DEBT OR CLAIM

SARA LEE HOLDINGS PTY LTD (ADMINISTRATORS APPOINTED) ACN 650 567 641 ("THE COMPANY")

To the Voluntary Administrators of Sara Lee Holdings Pty Ltd (Administrators Appointed) ACN 650 567 641 ("the Company")

1.	This is to state that the Company was on 17 October 2023, and still is, justly and truly indebted to: (full name, ABN and address of the creditor and, if applicable, the creditor's partners) for \$													
								Date Consideration		Amount (\$/c)	Remarks			
								(state	how the debt arose)		(include details of voucher substantiating payment)			
2.	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:													
	bills or other negotiable securities are held, sho Date Drawer		ow them in a schedule in the following form). Acceptor Amount (\$		5/c) Due Date									
_	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. Bated: Dated: Occupation:													
Add	ress:			tion of the occupation of										
RE	CEIVE REPORTS BY EM	AIL			YES	NO								
		future reports and corre												
If be	ing used for the purpo	se of voting at a meeting	g:											
a)	Is the debt you are	claiming assigned to you	?		☐ Yes	□No								
b)	If yes, attach writter	n evidence of the debt, t	he assignment and con	sideration given.	☐ Attached									
c)	you pay for the deb		_	(eg, what amount did	\$									
d)		ed party creditor of the ontact the Voluntary Adr			☐ Yes	□No								

Our Ref.: AMJ_ EH-C-POD