

**Fill in this information to identify the case:**

Debtor 1	Hooper Holmes, Inc.
Debtor 2	
(Spouse, if filing)	
United States Bankruptcy Court	Southern District of New York
Case number:	18-23302

FILED  
 U.S. Bankruptcy Court  
 Southern District of New York  
 9/12/2018  
 Vito Genna, Clerk

**Official Form 410  
 Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. You must make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503(c)(2).

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. Explain in an attachment.

Filed: USBC - Southern District of New York  
 Hooper Holmes, Inc. D/B/A Provant Health (B10)  
 18-23302 (RDD)



PRH

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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?	Pitney Bowes Inc	
	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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom?	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
	Pitney Bowes Inc	
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name	Name
	27 Waterview Dr, 3rd Fl Shelton, CT 06484	
	Contact phone 203-794-5558	Contact phone
	Contact email grisselle.betancourt@pb.com	Contact email
	Uniform claim identifier for electronic payments in chapter 13 (if you use one):	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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: 0202

7. How much is the claim? \$ 856.39 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 healthcare information.  
Goods Sold

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: \_\_\_\_\_

<p>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</p> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <i>Check all that apply:</i>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;"><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</td> <td style="width:20%; text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) 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).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p style="font-size: small;">* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.</p>	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____	<input type="checkbox"/> Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____	<input type="checkbox"/> Wages, salaries, or commissions (up to \$12,850*) 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).	\$ _____	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies	\$ _____
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<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies	\$ _____													

**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 9/12/2018  
MM / DD / YYYY

/s/ /s/ Grisselle Bctancourt  
Signature

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

Name	<u>/s/ Grisselle Bctancourt</u>
	First name      Middle name      Last name
Title	<u>Bankruptcy Analyst</u>
Company	<u>Pitney Bowes Inc</u>
Address	Identify the corporate servicer as the company if the authorized agent is a servicer <u>27 Waterview Dr, 3rd Fl</u>
	Number    Street
	<u>Shelton, CT 06484</u>
	City    State    ZIP Code
Contact phone	<u>203-794-5558</u> Email <u>grisselle.bctancourt@pb.com</u>

**Fill in this information to identify the case:**

Debtor 1 HOOPER HOLMES, INC

Debtor 2 (Spouse, if filing) \_\_\_\_\_

United States Bankruptcy Court for the: Southern District of New York

Case number 18-23302

Official Form 410

**Proof of Claim**

04/16

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.

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**Part 1: Identify the Claim**

1. Who is the current creditor? Pitney Bowes Inc  
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)

<p><b>Where should notices to the creditor be sent?</b></p> <p><u>Pitney Bowes Inc</u>  <small>Name</small></p> <p><u>27 Waterview Dr, 3rd Fl</u>  <small>Number Street</small></p> <p><u>Shelton CT 06484</u>  <small>City State ZIP Code</small></p> <p>Contact phone <u>203-794-5558</u></p> <p>Contact email <u>grisselle.betancourt@pb.com</u></p> <p>Uniform claim identifier for electronic payments in chapter 13 (if you use one):              _____</p>	<p><b>Where should payments to the creditor be sent? (if different)</b></p> <p>_____  <small>Name</small></p> <p>_____  <small>Number Street</small></p> <p>_____  <small>City State ZIP Code</small></p> <p>Contact phone _____</p> <p>Contact email _____</p>
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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**

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Goods Sold

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 Other. Describe: \_\_\_\_\_  
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 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).

Amount entitled to priority

\$ \_\_\_\_\_

Up to \$2,850\* 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 \$12,850\*) 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 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

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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.

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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 09/12/2018  
MM / DD / YYYY

/s/ Grisselle Betancourt

Signature

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

Name Grisselle Betancourt  
First name Middle name Last name

Title Bankruptcy Specialist

Company Pitney Bowes Inc  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 27 Waterview Dr, 3rd Fl  
Number Street

Shelton CT 06484  
City State ZIP Code

Contact phone 203-794-5558 Email grisselle.betancourt@pb.com

# Purchase Power® Account Statement

Statement Date March 9, 2018

Page 1 of 3

## SUMMARY OF YOUR CHARGES

Previous Balance	\$715.21
Purchases	
Permit Postage	\$88.65
Total Purchases	\$88.65
Payments	\$0.00
Credits	\$0.00
Other Charges	\$39.99
Finance Charges	\$12.54
New Balance	<b>\$856.39</b>
Minimum Payment Due 04/05/2018	\$30.00

To avoid late fees please ensure Pitney Bowes receives a minimum payment before the due date of April 05, 2018

Credit Cards are NOT an accepted form of payment for accounts.

Online payments can be made. Go to [pitneybowes.com/us/paypurchasepower](http://pitneybowes.com/us/paypurchasepower)

WE HAVE NOT RECEIVED A PAYMENT SINCE YOUR LAST BILLING STATEMENT. IF PAYMENT HAS ALREADY BEEN REMITTED, PLEASE DISREGARD THIS MESSAGE. THANK YOU.

## PITNEY BOWES REWARDS POINTS

Previous Balance	3,765
- Points Redeemed	0
- Points Adjusted	-215
Points Earned this billing period	89
<b>New Rewards Balance</b>	<b>3,639</b>
<b>Review Details: <a href="http://pitneybowes.us/rewards">pitneybowes.us/rewards</a></b>	

**Credit Line is: \$5,000.00**  
**Available Credit: \$4,143.61**

Questions about this statement?  
[pitneybowes.us/signin](http://pitneybowes.us/signin)  
 Manage your account online, view and pay your bills, see detailed history, much more...  
 or  
 Call Monday – Friday 9AM to 5PM ET  
 888 737 6486. Please have your 16 digit account number available.

The Pitney Bowes Bank, Inc. Tax ID#: 84-1386389

To make a payment by mail, please complete and send the coupon below. Please allow 7-10 business days for mail delivery.

Tear off here

PURCHASE POWER  
 2225 AMERICAN DRIVE  
 NEENAH WI 54956-1005

Account #	New Balance	Minimum Payment Due	Payment Due Date	Amount Enclosed
8000-9090-0647-0202	\$856.39	\$30.00	04/05/2018	\$

Change of address/contact information, please update at:  
[pitneybowes.com/us/support/addresschange](http://pitneybowes.com/us/support/addresschange)

Make check payable to EasyPermit Postage  
 If you've chosen to pay by mail, please include this payment coupon as well as your 16 digit account number on your check.

HOOPER HOLMES PORTAMEDIC  
 ACCOUNTS PAYABLE  
 560 N ROGERS RD  
 OLATHE KS 66062

EasyPermit Postage  
 PO BOX 371874  
 PITTSBURGH PA 15250-7874

800090900647020200003000000856394

**Permit Postage**

8000-9090-0645-6474	Tran Date	Post Date	Description	Permit Info	Pieces	Amount
ACCOUNTS PAYABLE	03/08	03/08	User Name: Presort Xtra/G Hart Job ID: January 2018 - Flats Fee	03/09/2018 PB PresortXtra		\$88.65
	<b>Permit Activity</b>					<b>\$88.65</b>
<b>Total Permit Activity \$88.65</b>						

**Credits**

Tran Date	Post Date	Description	Amount
<b>Total Credits \$0.00</b>			

**Other Charges**

Tran Date	Post Date	Description	Amount
03/08	03/08	LATE FEE	\$39.99
<b>Total Charges \$39.99</b>			

**Purchase Power®**

SEND OVERNIGHT CHECKS TO:  
 EASY PERMIT POSTAGE  
 ATTN: BOX 371874  
 500 ROSS STREET SUITE 154-0470  
 PITTSBURGH PA 15262-0001



## Finance Charges

Description	Average Daily Balance \$	Daily Periodic Rate	APR	Amount
Postage/Supplies	\$724.39	0.060%	22.00%	\$12.54
<b>Total Finance Charges \$12.54</b>				

## Important Information

**Access the following activities on our website:**

- View and pay bills
- Order Supplies
- Update account information
- Access technical support
- Add postage to meters
- Permit Mail

It's easy. Go to [pitneybowes.us/signin](http://pitneybowes.us/signin)

**Payment Options:** When making payments to your account, please include your 16 digit account # on your check and allow for 7-10 days for mailing and processing. You can make a payment online at [pitneybowes.us/signin](http://pitneybowes.us/signin). You can also transfer funds from your bank account.

If we do not receive your payment by the Payment Due Date, late fees will apply. If your payment is returned, you're liable for any charges we incur.

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18-23302  
CASE NO.

1-1  
COURT CLAIM NO.

9/13/2018  
DATE RETRIEVED

SH  
RECEIVED BY