

Fill in this information to identify the case:

Debtor 1 GenCanna
Debtor 2
(Spouse, if filing) _____
United States Bankruptcy Court for the Eastern District of Kentucky
Case number 20-50133

3531
1970

RECEIVED

FEB 21 2020

Official Form 410

Proof of Claim

LEGAL SERVICES

04/16

Read the instructions before filling out this form. This form is for making a claim for payment or make a request for payment of an administrative expense. Make such a request according to 11

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 explanation in an attachment.

Filed: USBC - Eastern District of Kentucky
GenCanna Global USA, Inc., Et al (B10)
20-50133 (GRS)

GCA



A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.

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?	<u>Jeanetta Lynn Middleton Ramsey</u> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor <u>Jeanetta Ramsey</u>	
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? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? <u>Jeanetta Ramsey</u> Name <u>452 Brownings Corner Rd</u> Number Street <u>Falmouth Ky 41040</u> City State ZIP Code Contact phone <u>859-620-5732</u> Contact email <u>Jnettllynn@yahoo.com</u>	Where should payments to the creditor be sent? (if different) Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Contact phone _____ Contact email _____
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 ____/____/____	
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: _____

7. How much is the claim? \$ 45,375.⁰⁰ / 14 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.

Sell of hemp Crop

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 \$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.

Amount entitled to priority

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

* 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.

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 2 12 2020
MM / DD / YYYY

Jeanetta L. M. Ramsey
Signature

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

Name Jeanetta Lynn Ramsey
First name Middle name Last name

Title _____

Company _____

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 452 Brownings Corner Road
Number Street
Palmouth Ky 41040
City State ZIP Code

Contact phone 859-620-5732 Email Jnettylynn@yahoo.com

Jeanetta Ramsey

9/30/2019

Date	Description	Orig. Amt.	Amt. Due	Discount	Amount
8/30/2019	Bill #0000001	5,500.00	5,500.00		5,500.00

10101020 CASH : CHECKING -...

5,500.00

GenCanna Global USA, Inc.

10399

Jeanetta Ramsey

12/20/2019

Date	Description	Orig. Amt.	Amt. Due	Discount	Amount
10/31/2019	Bill #0000001-October	5,500.00	5,500.00		5,500.00
12/20/2019	Bill #JRa200	13,750.00	13,750.00		13,750.00

10101015 CASH : CHECKING-K...

19,250.00

3531
1970

Total paid
\$24,750.¹⁰/_{xx}
12/20/2019

Balance \$45,375.⁰⁰/_{xx}
due

3531
1970

GenCanna CFN Farmers Name: Jaenetta Ramsey
GenCanna CFN Farmers KDA License Number: 19-0770-G
GenCanna CFN Farming Region: CKY
Date of Last Harvest Delivery: Tuesday, October 29, 2019
Date Invoice Submitted: Wednesday, November 20, 2019



GenCanna
PRODUCTION PLATFORM

SEQUENTIAL LOAD NUMBER	DATE AND TIME RECEIVED	ORIGINATING FARM	ESTIMATED TOTAL GROSS WEIGHT (lbs)	ESTIMATED TOTAL TARE WEIGHT (lbs)	ESTIMATED TOTAL NET WEIGHT (lbs)	ESTIMATED COMPOSITE MOISTURE (%)	ESTIMATED DRY LB AT 0% MC	ESTIMATED DRY LB AT 10% MC	INITIALS
SHTN-1049181	10/29/19 @ 18:29	Jaenetta Ramsey	45,200.00	27,970.00	17,230.00	73.50%	4,565.95	5,073.28	SLC
SHTN-1049182	10/2/19 @ 18:34	Jaenetta Ramsey	37,150.00	22,740.00	14,410.00	76.50%	3,386.35	3,762.61	SLC
CKY-411	10/29/19 @ 23:33	Jaenetta Ramsey	34,380.00	22,810.00	11,470.00	75.90%	2,764.27	3,071.41	DJC
			116,730.00	73,620.00	43,110.00	75.30%	10,716.57	11,907.30	

GenCanna CFN 2019 Industrial Hemp Growing Season Contract Summary	
Acres Planted (pursuant to planting report)	11.00
Estimated plants per acre (-10% for attrition)	3,420.00
Estimated Total Plants Planted	37,620
Estimated Total Dry Pounds Delivered Before Floral Separation	11,907.30
Estimated Average Floral Content of Crop Delivered	67.17%
Estimated Average Non-Floral Content of Crop Delivered	32.83%
Estimated Total Dry Pounds Delivered of Floral Material	11,907.30
Estimated Average Dry Floral Yield per Plant in Pounds	0.3165
Estimated Average Yield per Acre in Pounds	1,082.48

Qualified Harvest Yield Tier	1
Acres Planted (pursuant to planting report)	11.00
Payment per Qualified Acre	\$ 6,000.00
Estimated Total Contract Amount	\$ 66,000.00
First Advance Payment Date Paid	Monday, September 30, 2019
First Advance Payment Document Number	4892
First Advance Payment Amount Paid	\$ 5,500.00
Estimated Sub-Total Balance	\$ 60,500.00
Second Advance Payment Due	Friday, December 20, 2019
Second Advance Payment Amount	\$ 5,500.00
Estimated Remaining Balance Due	\$ 55,000.00

Estimated Installment Payment Summary		
Installment Payment Terms	Due Date	Amount Due
1st Installment Payment (30 days after final crop load)	Friday, December 20, 2019	\$ 19,250.00
2nd Installment Payment (60 days after final crop load)	Sunday, January 19, 2020	\$ 13,750.00
3rd Installment Payment (90 days after final crop load)	Tuesday, February 18, 2020	\$ 13,750.00
4th Installment Payment (120 days after final crop load)	Thursday, March 18, 2020	\$ 13,750.00
Total Contract Amount		\$ 66,000.00

NOTE: The information contained in this document, including without limitation the yield and harvest payments, is confidential and proprietary information of GenCanna Global USA, Inc. and may not be disclosed to third parties without the express written consent of GenCanna Global USA, Inc. Pursuant to the Parties' Industrial Hemp Cultivation Agreement, Payment will be made after acceptance of the product, following inspection and testing, and based on the CBD content and weight of Floral Material.

Ryan F. Quarles
Commissioner



Kentucky Department of Agriculture

Office of Agriculture Marketing
Industrial Hemp Program
111 Corporate Drive
Frankfort, KY 40601
Phone: (502) 573-0282

Industrial Hemp Research Pilot Program

Grower License

3531
1970

License Holder	Jeanetta Lynn Middleton Ramsey
License Number	19-0770-G
Signing Authority (if different from License Holder)	
Mailing Address	452 Brownings Corner Rd Falmouth, KY 41040

DATE OF ISSUANCE	DATE OF EXPIRATION
03/1/2019	03/31/2020

The terms and conditions of this license are identical to the terms and conditions stated in the License Holder's current *Grower Licensing Agreement*. Refer to page 2 of this license for a complete list of licensed growing and storage locations for this License Holder.

This Industrial Hemp Research Pilot Program License has been issued under the authority of KRS 260.850 to 260.869. This license is non-transferable. This license does not automatically renew; License Holders must re-apply to the program to renew the Grower License past the date of expiration listed in this document.

Law enforcement officials or individuals with questions should contact KDA Industrial Hemp Program Manager Doris Hamilton at Doris.Hamilton@ky.gov or 502-782-4113 for confirmation and further details.

Keith L. Rogers, Chief of Staff

3/1/2019

Date



2 Business name/disregarded entity name, if different from above

7 List account number(s) here (optional)

(Applies to accounts maintained outside the U.S.)

Requester's name and address (optional)

Employer identification number

Date ▶ 12/2/19

Form **W-9** (Rev. 11-2017)

1049181

73.5

WEIGHED ON A FAIRBANKS SCALE

TICKET NUMBER

432

CUSTOMER'S NAME

JEANETTA RAMSEY #1

ADDRESS

COMMODITY

CARRIER

INBOUND
LOOP ID

45200 1b

029

INBOUND DATE

10/29/2019

TIME

06:29 PM

OUTBOUND DATE

10/29/2019

TIME

07:06 PM

45200 1b GROSS
27970 1b TARE
17230 1b NET

LOOP ID

029

DRIVER ON

OFF



SHIPPER

WEIGHER

CHRIS JOHNSON

FAIRBANKS SCALE CAT. 96754

a^o
RM

Farmer:

Jeanetta Ramsey

Variety:

Phase 3

Number

1049181

Delivery:

10/29/2019

Delivery:

18:29

ght (lbs):

45200

ght (lbs):

27970

red (lbs):

17230

terial (%):

73.50%

Jeanetta Ramsey

Date: Tuesday October 29, 2019

s Name:

Sarah Clark

Signature:

Date: Tuesday October 29, 2019

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1049182

176.31

WEIGHED ON A FAIRBANKS SCALE

TICKET NUMBER

433

CUSTOMER'S NAME

ADDRESS

COMMODITY

CARRIER

INBOUND 37150 lb
LOOP ID

29

INBOUND DATE

10/29/2019

TIME

06:34 PM

OUTBOUND DATE

10/29/2019

TIME

07:06 PM

37150 lb GROSS
22740 lb TARE
14410 lb NET

LOOP ID

29

DRIVER ON



OFF

SHIPPER

WEIGHER

CHRIS JOHNSON

FAIRBANKS SCALE CAT. 96754

mer: Jeanetta Ramsey

riety: Phase 3

mber 1049182

very: 10/29/2019

very: 18:34

(lbs): 37150

(lbs): 22740

(lbs): 14410

l (%): 78.50%

Jeanetta Ramsey

Date: Tuesday October 29, 2019

ne: Sarah Clark

ature:

Date: Tuesday October 29, 2019

1049198

WEIGHED ON A FAIRBANKS SCALE

TICKET NUMBER 449

CUSTOMER'S NAME

J. Ramsey

ADDRESS

COMMODITY

CARRIER

INBOUND 34380 lb
LOOP ID 029

INBOUND DATE 10/29/2019 TIME 11:33 PM

OUTBOUND DATE 10/29/2019 TIME 11:54 PM

34380 lb GROSS
22910 lb TARE
11470 lb NET

LOOP ID 029

DRIVER ON OFF

SHIPPER

WEIGHER

FAIRBANKS SCALE CAT 96754

a^o
RM

Driver: Jaenetta Ramsey

Variety: Phase 3

Number 1049198

Delivery: 10/28/2019

Delivery: 23:33

(lbs): 34380

(lbs): 22910

(lbs): 11470

Wt (%): 75.80%

Jaenetta Ramsey

Date:

10/29/2019

Name: Darren Cook

Signature:

Darren Cook

Date:

10/29/2019

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43110 #
3 tickets

Farmer *choose from dropdown*
 Jaenetta Ramsey

		1st Pmt	1st Pmt Date	2nd Pmt	2nd Pmt Date	3rd Pmt	3rd Pmt Date	4th Pmt	4th Pmt Date	5th Pmt	5th Pmt Date	Total payments
A	Option A	9,625.00	12/20/19	13,750.00	1/19/20	13,750.00	2/18/20	13,750.00	3/19/20	10,175.00	4/18/20	61,050.00
B	Option B	0.00	12/20/19	13,750.00	1/19/20	13,750.00	2/18/20	13,750.00	3/19/20	24,750.00	4/18/20	66,000.00
C	Option C	0.00	12/20/19	0.00	1/19/20	0.00	2/18/20	0.00	3/19/20	71,500.00	4/18/20	71,500.00
D	Option D	19,250.00	12/20/19	0.00	1/19/20	13,750.00	2/18/20	13,750.00	3/19/20	16,500.00	4/18/20	63,250.00
E	Option E	19,250.00	12/20/19	0.00	1/19/20	0.00	2/18/20	45,375.00	3/19/20	0.00	4/18/20	64,625.00



Retail

P

US POSTAGE PAID

\$7.75

Origin: 41004
02/19/20
2009880624-03

PRIORITY MAIL 2-DAY®

0 Lb 3.20 Oz

1006

EXPECTED DELIVERY DAY: 02/21/20

B900

SHIP
TO:

PO BOX 4419
BEAVERTON OR 97076-0419

USPS TRACKING® NUMBER



9505 5144 9926 0050 0543 91

PRESS FIRMLY TO SEAL

PRIORITY MAIL
POSTAGE REQUIRED

FROM: Jeanetta Ramsey
452 Brownings Corner Rd
Falmouth Ky 41040

TO:
GenCanna Global Usa Inc
Claims Processing Ctr
40 Epig Corp Restructing
PO Box 4419
Beaverton, OR 97076-4419

RECEIVED

FEB 21 2020

LEGAL SERVICES



PS00001000014

EP14F July 2013
OD: 12.5 x 9.5

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