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LEGAL SERVICES

Fill in this information to identify the case:

Debtor 1 We EnergiesDebtor 2  
(Spouse, if filing)

United States Bankruptcy Court for the: District of Delaware

Case number 24-10245Filed: USBC - District of Delaware  
Sientra, Inc., et al  
24-10245 (JTD)

(CLM)

SNX



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04/19

## Official Form 410

## Proof of Claim

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.

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?	<b>WE ENERGIES</b> 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?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent?  <b>WE ENERGIES</b> Name <b>333 W EVERETT ST</b> Number Street <b>MILWAUKEE WI 53203</b> City State ZIP Code Contact phone <b>4142213219</b> Contact email	Where should payments to the creditor be sent? (if different)  <b>WE ENERGIES</b> Name <b>333 W EVERETT ST</b> Number Street <b>MILWAUKEE WI 53203</b> City State ZIP Code Contact phone 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: 3 6 5 5

7. How much is the claim? \$ 21,641.58. 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.  
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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:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

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

☐ Up to \$3,025\* 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 \$13,650\*) 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 4/01/22 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 03/12/2024  
MM / DD / YYYY

Signature

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

Name	JILL CASTILLO		
	First name	Middle name	Last name
Title	BANKRUPTCY CLERK		
Company	WE ENERGIES		
	Identify the corporate servicer as the company if the authorized agent is a servicer.		
Address	333 W EVERETT ST ATTN BANKRUPTCY		
	Number	Street	
	MILWAUKEE	WI	53203
	City	State	ZIP Code
Contact phone	4142213558		Email

## Account Billing and Payment Information



From 12/1/2023 to 03/5/2024

Company Name: WE ENERGIES

**Customer Information:**

Account Number: 719133655-2

**Service Information:**

Service Address:

Customer Name: SIENTRA INC

Account Date: 04/18/2020

<u>Date</u>	<u>Description</u>	<u>Transaction Amount</u>	<u>Balance Amount</u>
	Beginning Balance		\$0.00
12/26/2023	Service Bill	\$8,470.31	\$8,470.31
01/17/2024	Payment	\$-8,470.31	\$0.00
01/24/2024	Service Bill	\$7,430.08	\$7,430.08
02/22/2024	Service Bill	\$4,466.30	\$11,896.38
02/22/2024	Write Off	\$0.00	\$11,896.38
	Ending Balance		\$11,896.38

**2023 Recap For Period Selected****What You Were Billed**

County Tax Billed:	\$40.14
State Tax Billed:	\$401.44
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

**2024 Recap For Period Selected****What You Were Billed**

County Tax Billed:	\$95.34
State Tax Billed:	\$561.95
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

Notes: All amounts have sales tax included when applicable.

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## Account Billing and Payment Information



From 12/1/2023 to 03/5/2024

Company Name: WE ENERGIES

Customer Information:

Account Number: 719133655-6

Service Information:

Service Address:

Customer Name: SIENTRA INC

Account Date: 07/07/2021

<u>Date</u>	<u>Description</u>	<u>Transaction Amount</u>	<u>Balance Amount</u>
	Beginning Balance		\$0.00
12/19/2023	Service Bill	\$302.82	\$302.82
01/10/2024	Payment	\$-302.82	\$0.00
01/19/2024	Service Bill	\$460.43	\$460.43
02/16/2024	Service Bill	\$4.60	\$465.03
02/16/2024	Service Bill	\$395.08	\$860.11
02/23/2024	Cancel Service Bill	\$-395.08	\$465.03
02/23/2024	Service Bill	\$356.60	\$821.63
02/23/2024	Write Off	\$0.00	\$821.63
	Ending Balance		\$821.63

2023 Recap For Period Selected2024 Recap For Period SelectedWhat You Were Billed

County Tax Billed:	\$1.44
State Tax Billed:	\$14.35
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

What You Were Billed

County Tax Billed:	\$6.22
State Tax Billed:	\$38.61
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

Notes: All amounts have sales tax included when applicable.

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## Account Billing and Payment Information



From 12/1/2023 to 03/5/2024

Company Name: WE ENERGIES

Customer Information:

Account Number: 719133655-5

Service Information:

Service Address:

Customer Name: SIENTRA INC

Account Date: 07/07/2021

<u>Date</u>	<u>Description</u>	<u>Transaction Amount</u>	<u>Balance Amount</u>
	Beginning Balance		\$0.00
12/20/2023	Service Bill	\$1,489.76	\$1,489.76
01/11/2024	Payment	\$-1,489.76	\$0.00
01/22/2024	Service Bill	\$1,479.51	\$1,479.51
02/19/2024	Service Bill	\$14.00	\$1,493.51
02/19/2024	Service Bill	\$1,478.84	\$2,972.35
02/27/2024	Cancel Service Bill	\$-1,478.84	\$1,493.51
02/27/2024	Cancel Service Bill	\$-14.00	\$1,479.51
02/27/2024	Service Bill	\$1,212.78	\$2,692.29
02/27/2024	Write Off	\$0.00	\$2,692.29
	Ending Balance		\$2,692.29

2023 Recap For Period Selected2024 Recap For Period SelectedWhat You Were Billed

County Tax Billed: \$7.01  
 State Tax Billed: \$70.13  
 Late Payment Charges Billed: \$0.00  
 Contributions To Solarwise: \$0.00  
 Contributions To WeCare: \$0.00

What You Were Billed

County Tax Billed: \$20.39  
 State Tax Billed: \$126.28  
 Late Payment Charges Billed: \$0.00  
 Contributions To Solarwise: \$0.00  
 Contributions To WeCare: \$0.00

**Account Billing and Payment Information****From 12/1/2023 to 03/5/2024****Company Name: WE ENERGIES****Customer Information:**

Account Number: 719133655-4

**Service Information:**

Service Address:

Customer Name: SIENTRA INC

Account Date: 02/01/2020

<u>Date</u>	<u>Description</u>	<u>Transaction Amount</u>	<u>Balance Amount</u>
	Beginning Balance		\$0.00
12/27/2023	Service Bill	\$3,451.31	\$3,451.31
01/18/2024	Payment	\$-3,451.31	\$0.00
01/25/2024	Service Bill	\$2,902.96	\$2,902.96
02/23/2024	Service Bill	\$2,935.03	\$5,837.99
02/27/2024	Cancel Service Bill	\$-2,935.03	\$2,902.96
02/27/2024	Service Bill	\$1,714.23	\$4,617.19
02/27/2024	Write Off	\$0.00	\$4,617.19
	Ending Balance		\$4,617.19

**2023 Recap For Period Selected****What You Were Billed**

County Tax Billed:	\$16.20
State Tax Billed:	\$162.02
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

**2024 Recap For Period Selected****What You Were Billed**

County Tax Billed:	\$36.46
State Tax Billed:	\$215.01
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

Notes: All amounts have sales tax included when applicable.

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## Account Billing and Payment Information



From 12/1/2023 to 03/5/2024

Company Name: WE ENERGIES

Customer Information:

Account Number: 719133655-3

Service Information:

Service Address:

Customer Name: SIENTRA INC

Account Date: 02/01/2020

<u>Date</u>	<u>Description</u>	<u>Transaction Amount</u>	<u>Balance Amount</u>
	Beginning Balance		\$0.00
12/26/2023	Service Bill	\$813.97	\$813.97
01/17/2024	Payment	\$-813.97	\$0.00
01/24/2024	Service Bill	\$1,057.58	\$1,057.58
02/22/2024	Service Bill	\$556.51	\$1,614.09
02/22/2024	Write Off	\$0.00	\$1,614.09
	Ending Balance		\$1,614.09

2023 Recap For Period Selected2024 Recap For Period SelectedWhat You Were Billed

County Tax Billed:	\$3.86
State Tax Billed:	\$38.58
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

What You Were Billed

County Tax Billed:	\$12.89
State Tax Billed:	\$76.25
Late Payment Charges Billed:	\$0.00
Contributions To Solarwise:	\$0.00
Contributions To WeCare:	\$0.00

Notes: All amounts have sales tax included when applicable.

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**We Energies**  
231 W. Michigan St.  
Milwaukee, WI 53203  
[www.we-energies.com](http://www.we-energies.com)

**Sientra Inc Claims Processing Center  
Epiq Corporate Restructuring LLC  
PO Box 4420  
Beaverton OR 97076-4420**

**March 12, 2024**

**RE: Filing Claim for Wisconsin Electric Power Company**

**Case No. 24-10245**

**Name: SIENTRA INC**

**Enclosed find an original and copy of the claim of Wisconsin Electric Power Company, DBA,  
We Energies, in this bankruptcy matter.**

**Please file this claim and return the copy to our office in the enclosed postage-paid envelope with  
your acknowledgment of receipt indicated thereon.**

**Sincerely,**

A handwritten signature in black ink that reads "Jill Castillo".

**Jill Castillo  
Bankruptcy Coordinator**

**Enclosure**



**We Energies**  
231 W. Michigan St.  
Milwaukee, WI 53203

ADDRESS SERVICE REQUESTED

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