An affiliate of
Raymond Chabot Grant Thornton S.E.N.C.R.L.

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Raymond Chabot inc.

C A N A D A	S U P E R I O R C O U R T
PROVINCE OF QUEBEC	« *Companies' Creditors Arrangement Act* »
DISTRICT OF: 01-MONTREAL	(LRC 1985, ch.C-36) »
COURT NO. : 500-11-053313-173	_____
OFFICE NO: 334612-001	

IN THE MATTER OF THE
ARRANGEMENT OR COMPROMISE OF :

JAVA-U GROUP INC., JAVA-U FOOD SERVICES INC., CAFÉ JAVA-U INC., JAVA-U RTA INC.
Legal persons having their principal place of business located at 5473 Royalmount Avenue, Suite 205, in the city of Mont-Royal, in the province of Québec, H4P 1J3.

                                                    Debtor companies

PROOF OF CLAIM

The completed Proof of Claim together with supporting documents must be received by Raymond Chabot Inc. no later than 5:00 p.m. (EDT) on November 15, 2017 by mail, courier, email or fax at the following address:

RAYMOND CHABOT INC.,
Monitor of the business and financial affairs of the Debtor companies
Attention: Jean Gagnon, CPA, CA, CIRP, LIT
National Bank Tower
600 de La Gauchetière Street West, Suite 2000
Montréal (Quebec) H3B 4L8
Email : reclamationmtl@rcgt.com
Fax : 514 858-3303

A.   PARTICULARS OF CREDITOR

1. Full legal name of creditor:_____(the "**Creditor**").

2. Full mailing address of the Creditor:_____

    _____

3. Telephone number of Creditor:_____

4. Fax number of Creditor:_____

5. E-mail address:_____

6. Contact person:_____

B. PROOF OF CLAIM

I, *(name of Creditor or representative of the Creditor)*_____, hereby certify that I am a creditor of *(check as appropriate)* :

☐ Java-U Group inc.

☐ Java-U Food Services inc.

☐ Café Java-U inc.

☐ Java-U RTA inc.

and I am aware of all circumstances surrounding the Claim referred to herein.

The Debtor company was, on the date of the Initial Order, indebted to the creditor and is still indebted to the creditor for the total amount of CA$_____, as shown in the statement of account or affidavit appended hereto such as Annex A, after deducting the amount of any compensatory claim to which the Debtor company is entitled.

Note: A Creditor who holds different Claims against different Debtor Companies must file a distinct Proof of Claim for each Claim.

C. NATURE OF CLAIM:

(check and complete appropriate category)

☐ 1) UNSECURED CLAIM IN THE AMOUNT OF CA$_____

In respect of this claim, the Creditor does not hold any assets of the Debtor companies as security;

☐ 2) SECURED CLAIM IN THE AMOUNT OF CA$_____

In respect of this claim, the Creditor holds assets of the Debtor companies valued at CA$_____

as security, particulars of which are as follows;

☐ 3) RESTRUCTURING CLAIM IN THE AMOUNT OF CA$_____

In respect of this debt, the Creditor does not hold any assets of the Debtor companies as security;

D. CLAIM AGAINST THE DIRECTORS AND OFFICERS

☐ The creditor <u>must</u> check this box if any director(s) or officer(s) of the applicable Debtor company is (are) liable for this claim.

If the box is checked, the amount for which the director(s) and officer(s) is (are) liable is CA$_____.

E.   PARTICULARS OF CLAIM:

Other than as already set out herein, the particulars of the Creditor's claim are attached.

A detailed, complete statement of account must be attached to the proof of claim. Provide all particulars of the claim and supporting documentation, including amount, description of transaction(s) or agreement(s) giving rise to the Claim.

F.   FILING OF CLAIM

Creditors who fail to file a Proof of Claim and documentation in support thereof, as directed, **before 5:00 p.m. (EDT) on November 15, 2017**, shall not be entitled to any further notice, shall not be entitled to participate in the present proceedings as Creditor, shall be barred from receiving a distribution in respect of such Claim and shall be barred from seeking payment of said Claim from the Debtor companies or any director or officer of the Debtor companies.

DATED at _____   this _____ day of _____.

_____
(Signature of witness)

_____
(Signature of individual completing this form)

_____
(Please print name of witness)

_____
(Please print name)