

**PROOF OF CLAIM FORM**

**IN THE MATTER OF THE COMPANIES' CREDITORS  
ARRANGEMENT ACT, RSC 1985, c C-36, AS AMENDED**

**AND IN THE MATTER OF A PLAN OF COMPROMISE OR  
ARRANGEMENT OF 2412170 ALBERTA LTD. AND 2416326  
ALBERTA LTD.**

Regarding the claim of \_\_\_\_\_ (referred to  
in this form as "**the Claimant**"). *(Name of Claimant)*

All notices or correspondence regarding this claim to be forwarded to the Claimant at the following  
address:

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Telephone Number: \_\_\_\_\_

Facsimile Number: \_\_\_\_\_

Attention (Contact Person): \_\_\_\_\_

Email Address: \_\_\_\_\_

*(Note – All future correspondence will be delivered to the designated email address unless the  
Claimant specifically requests that hardcopies be provided)*

Please provide hardcopies of materials to the address above.

I, \_\_\_\_\_ (name of the Claimant or representative of the  
Claimant), of \_\_\_\_\_ (City, Province or State) do hereby certify  
that:

(a) I am (select one):

the Claimant; or

I am \_\_\_\_\_ (state position/title) of the Claimant.

- (b) I have knowledge of all the circumstances connected with the Claim referred to below;
- (c) I confirm that complete documentation in support of the Claim referred to below is attached; and
- (d) The Applicants and/or one or more of the Directors or Officers of the Applicants were and still are Indebted to the Claimant as follows:

**I. Pre-Filing Proof of Claim**

<b>Debtor</b>	<b>Pre-Filing Claim Amount</b>	<b>Nature of Claim (Secured, Priority, Unsecured or Secured)</b>	<b>Value of Security Held (if any)</b>
<b>2412170 Alberta Ltd.</b>	CAD\$		
<b>2416326 Alberta Ltd.</b>	CAD\$		

The particulars of the undersigned's total Claim, in the sum of \$CAD \_\_\_\_\_ (insert \$CAD value of total Claim) are attached.

*(Please provide full particulars of the Claim and supporting documentation including amount, description of transaction(s) or agreement(s) or legal breach(es) giving rise to the Claim, name of any guarantor(s) which have guaranteed the Claim, particulars and copies of an security and amount of Claim allocated thereto, date and number of all invoices, particulars of all credits, discounts, etc. claimed. Any claim for interest must be supported by contractual documentation evidencing the entitlement to interest. Claims should not include the value of goods and/or services supplied or interest accrued after January 7, 2026).*

**FILING DEADLINES FOR CLAIM:**

For all Claims, this Proof of Claim must be received by the Monitor before 5:00 p.m. MST on June 22, 2026

(the "**Claims Bar Date**").

Proofs of Claim MUST be submitted by prepaid registered mail, courier, personal delivery, or electronic or digital transmission addressed to the following address:

**To the Monitor:**

**BDO CANADA LIMITED**

20 Wellington Street East, Suite 500  
Toronto, ON M5E 1C5

Attention: Breanne Scott / Azeem Shah  
Telephone: 403-298-2432 / 647-249-8859  
Email: [brscott@bdo.ca](mailto:brscott@bdo.ca) / [azeshah@bdo.ca](mailto:azeshah@bdo.ca)

**With a copy to:**

**MILLER THOMSON LLP**

Barristers and Solicitors  
525-8<sup>th</sup> Avenue SW, 43<sup>rd</sup> Floor  
Calgary, AB, Canada T2P 1G1

Attention: Pavin Takhar  
Telephone: 403-298-2432  
Email: [ptakhar@millerthomson.com](mailto:ptakhar@millerthomson.com)

Any such notice or communication delivered by a Claimant shall be deemed to be received upon actual receipt thereof before 5:00 p.m. MST on a Business Day or if delivered outside of normal business hours, the next Business Day.

**CLAIMS WHICH ARE NOT RECEIVED BY THE MONITOR BY CLAIMS BAR DATE WILL BE FOREVER BARRED FROM MAKING OR ENFORCING ANY CLAIM AGAINST ANY OF WESTCASTLE GMC.**

DATED this \_\_\_\_ day of \_\_\_\_\_, 2026

Per:

\_\_\_\_\_  
Witness

Print name of Claimant:

\_\_\_\_\_  
*If Claimant is other than an individual, print name  
and title of authorized signatory*

Name:

\_\_\_\_\_  
Title: