

UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF NEW MEXICO

In re:

ROMAN CATHOLIC CHURCH OF THE
ARCHDIOCESE OF SANTA FE, a New Mexico
corporation sole,

Debtor.

Chapter 11

Case No. 18-13027-t11

SEXUAL ABUSE PROOF OF CLAIM

IMPORTANT:

**THIS FORM MUST BE RECEIVED NO LATER THAN
June 17, 2019 AT 5:00 P.M. (PREVAILING MOUNTAIN TIME)**

Carefully read Notice and Instructions that are included with this **CONFIDENTIAL PROOF OF CLAIM** and complete all applicable questions. Send together with one copy to: Clerk of the United States Bankruptcy Court, District of New Mexico at the following address: Office of the Clerk of Court-ATTN SEALED DOCUMENTS, U.S. Bankruptcy Court, District of New Mexico, Pete V. Domenici U.S. Courthouse, 333 Lomas Blvd. NW, Suite 360 Albuquerque, NM 87102. If you prefer to hand deliver the completed Confidential Proof of Claim form to the Clerk, the physical address for hand delivery is Clerk of the United States Bankruptcy Court, District of New Mexico, 333 Lomas Blvd. NW, Suite 360 Albuquerque, NM 87102.

If you mail or deliver the Confidential Proof of Claim form it must be received by the Clerk no later than 5:00 p.m. (prevailing Mountain Time) on June 17, 2019.

YOU MAY WISH TO CONSULT AN ATTORNEY REGARDING THIS MATTER.

AND YOU MAY ALSO OBTAIN INFORMATION FROM THE OFFICIAL COMMITTEE OF UNSECURED CREDITORS BY CALLING TOLL FREE AT 888-570-6217.

FAILURE TO COMPLETE AND RETURN THIS FORM MAY RESULT IN YOUR INABILITY TO VOTE ON A PLAN OF REORGANIZATION AND RECEIVE A DISTRIBUTION FROM THE ROMAN CATHOLIC CHURCH OF THE ARCHDIOCESE OF SANTA FE, COMMONLY KNOWN AS THE ARCHDIOCESE OF SANTA FE (THE "ARCHDIOCESE").

UNLESS YOU INDICATE OTHERWISE IN PART 1 BELOW, YOUR IDENTITY WILL BE KEPT STRICTLY CONFIDENTIAL, UNDER SEAL, AND OUTSIDE THE PUBLIC RECORD OF THE BANKRUPTCY COURT. HOWEVER, THIS PROOF OF CLAIM AND THE INFORMATION IN THIS PROOF OF CLAIM WILL BE PROVIDED PURSUANT TO COURT-APPROVED CONFIDENTIALITY GUIDELINES TO THE ARCHDIOCESE, THE OFFICIAL COMMITTEE OF UNSECURED CREDITORS AND

TO SUCH OTHER PERSONS AS THE BANKRUPTCY COURT DETERMINES NEED THE INFORMATION IN ORDER TO EVALUATE THE CLAIM.

THIS PROOF OF CLAIM IS FOR SEXUAL ABUSE CLAIMANTS ONLY.

For the purposes of this Proof of Claim, a **Sexual Abuse Claim** is defined as any Claim (as defined in section 101(5) of the Bankruptcy Code) against the Archdiocese resulting or arising in whole or in part, directly or indirectly from any actual or alleged sexual conduct or misconduct, sexual abuse or molestation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually-related physical, psychological, or emotional harm, or contacts, or interactions of a sexual nature between a child and an adult, or a nonconsenting adult and another adult, sexual assault, sexual battery, sexual psychological or emotional abuse, humiliation, or intimidation, or any other sexual misconduct, and seeking monetary damages or any other relief, under any theory of liability, including vicarious liability, any negligence-based theory, contribution, indemnity, or any other theory based on any acts or failures to act by the Archdiocese or any other person or entity for whose acts or failures to act the Archdiocese is or was allegedly responsible.

For Purposes of this Proof of Claim, a **Sexual Abuse Claimant** is defined as the person asserting a Sexual Abuse Claim against the Archdiocese, or if a minor, then his parent or legal guardian.

TO BE VALID, THIS PROOF OF CLAIM MUST BE SIGNED BY YOU OR YOUR ATTORNEY. IF THE SEXUAL ABUSE CLAIMANT IS DECEASED OR INCAPACITATED, THE FORM MAY BE SIGNED BY THE SEXUAL ABUSE CLAIMANT'S REPRESENTATIVE, EXECUTOR OF THE ESTATE OR THE ATTORNEY FOR THE ESTATE. IF THE SEXUAL ABUSE CLAIMANT IS A MINOR, THE FORM MAY BE SIGNED BY THE SEXUAL ABUSE CLAIMANT'S PARENT OR LEGAL GUARDIAN, OR THE SEXUAL ABUSE CLAIMANT'S ATTORNEY.

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

PART 1: CONFIDENTIALITY

THIS SEXUAL ABUSE PROOF OF CLAIM (ALONG WITH ANY ACCOMPANYING EXHIBITS AND ATTACHMENTS) WILL BE MAINTAINED AS CONFIDENTIAL PURSUANT TO COURT-APPROVED GUIDELINES UNLESS YOU EXPRESSLY REQUEST THAT IT BE PUBLICLY AVAILABLE BY CHECKING THE BOX AND SIGNING BELOW. ONLY THE SEXUAL ABUSE CLAIMANT MAY WAIVE CONFIDENTIALITY IN THIS PART 1.

- I do not want this Proof of Claim (along with any accompanying exhibits and attachments) to be kept confidential. Please verify this election by signing directly below.

Signature: _____

Print Name: _____

PART 3: NATURE OF COMPLAINT
(Attach additional separate sheets if necessary)

NOTE: IF YOU HAVE PREVIOUSLY FILED A LAWSUIT AGAINST THE ARCHDIOCESE IN STATE OR FEDERAL COURT, YOU MAY ATTACH THE COMPLAINT. IF YOU DID NOT FILE A LAWSUIT, OR IF THE COMPLAINT DOES NOT CONTAIN ALL OF THE INFORMATION REQUESTED BELOW, YOU MUST PROVIDE THE INFORMATION BELOW.

a. Who committed the acts of sexual abuse or other wrongful conduct?

b. What is the position, title or relationship to you (if known) of the abuser or individual who committed these acts?

c. Where did the sexual abuse or other wrongful conduct take place? Please be specific and complete all relevant information that you know, including the City and State, name of the School (if applicable) and/or the name of any other location.

d. When did the sexual abuse or other wrongful conduct take place?

1. If the sexual abuse or other wrongful conduct took place over a period of time (months or years), please state when it started, when it stopped, and how many times it occurred.

2. Please also state your age(s) and your grade(s) in school (if applicable) at the time the abuse or other wrongful conduct took place.

e. What happened (describe what happened):

f. Did you tell anyone about the sexual abuse or other wrongful conduct and, if so, who did you tell and when (this would include parents; relatives; friends; the Archdiocese; attorneys; counselors; and law enforcement authorities)?

g. Identify any church or religious organization you have belonged to or have been affiliated with.

h. State whether there were any witnesses to the abuse. If there were any witnesses, please list their name(s) and any contact information you have.

PART 4: IMPACT OF COMPLAINT

(Attach additional separate sheets if necessary)

(If you are uncertain how to respond to this Part 4, you may leave this Part 4 blank, but you will be required to complete this Part 4 within thirty (30) days after a written request is made for the information requested in this Part 4)

1. What injuries (including physical, mental and/or emotional) have occurred to you because of the act or acts of sexual abuse or other wrongful conduct that resulted in the claim (for example, the effect on your education, employment, personal relationships, health, and any physical injuries)?

2. Have you sought counseling or other treatment for your injuries? If so, with whom and when?

PART 5: ADDITIONAL INFORMATION

1. Prior Claims: Have you filed any claims in any other bankruptcy case relating to the sexual abuse described in this claim.

Yes No (If “Yes,” you are required to attach a copy of any completed claim form.)

If “Yes,” which case(s):

2. Settlements: Regardless of whether a complaint was ever filed against any party because of the sexual abuse or other wrongful conduct, have you settled any claim relating to the sexual abuse or other wrongful conduct described in this claim?

Yes No (If “Yes,” please describe, including parties to the settlement. You are required to attach a copy of any settlement agreement.)

3. Bankruptcy. Have you ever filed bankruptcy? Yes No (If "Yes," please provide the following information:

Name of Case: _____ Court: _____

Date filed: _____ Case No. _____

Chapter: 7 11 12 13 Name of Trustee: _____

4. State whether you have previously commenced any lawsuit seeking damages for the identified sexual abuse. If yes, please state:

a. Where and when you commenced the lawsuit:

b. The parties to the lawsuit:

c. The case number if any:

d. The result of the lawsuit:

Sign and print your name. If you are signing the claim on behalf of another person or an estate, print your title.

Under penalty of perjury, I declare the foregoing statements to be true and correct.

Date: _____

Signature: _____

Print Name: _____

Relationship to Sexual Abuse Claimant: _____

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW MEXICO

In re:

ROMAN CATHOLIC CHURCH OF THE
ARCHDIOCESE OF SANTA FE, a New
Mexico corporation sole,

Debtor.

Chapter 11

Case No. 18-13027-t11

**NOTICE OF DEADLINE FOR FILING CLAIMS
RELATING TO OR ARISING FROM SEXUAL ABUSE**

**TO ALL PERSONS WITH CLAIMS ARISING FROM SEXUAL ABUSE FOR WHICH
THE ROMAN CATHOLIC CHURCH OF THE ARCHDIOCESE OF SANTA FE MAY
BE LIABLE.**

**JUNE 17, 2019 AT 5:00 P.M. (PREVAILING MOUNTAIN TIME) IS THE LAST DATE
TO FILE PROOFS OF CLAIM FOR SEXUAL ABUSE**

On December 3, 2018 (the "Petition Date") The Roman Catholic Church of the Archdiocese of Santa Fe ("Debtor") Debtor and Debtor-in-possession in the above-captioned case filed voluntary petition for relief under Chapter 11 of Title 11 of the United States Code in the United States Bankruptcy Court for the District of New Mexico (the "Court"). The Debtor, its address, case number, proof of claim forms and other relevant information related to this Chapter 11 case may be obtained at: <https://archdiosf.org>. Individuals may assert a Sexual Abuse Claim (as defined in the next paragraph) against the Debtor. Any person who believes that he or she has, or may have, a Sexual Abuse Claim should carefully read this notice.

For the purposes of filing a Sexual Abuse Proof of Claim, a **Sexual Abuse Claim** is defined as any Claim (as defined in section 101(5) of the Bankruptcy Code) against the Archdiocese resulting or arising in whole or in part, directly or indirectly from any actual or alleged sexual conduct or misconduct, sexual abuse or molestation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually-related physical, psychological, or emotional harm, or contacts, or interactions of a sexual nature between a child and an adult, or a nonconsenting adult and another adult, sexual assault, sexual battery, sexual psychological or emotional abuse, humiliation, or intimidation, or any other sexual misconduct, and seeking monetary damages or any other relief, under any theory of liability, including vicarious liability, any negligence-based theory, contribution, indemnity, or any other theory based on any acts or failures to act by the Archdiocese or any other person or entity for whose acts or failures to act the Archdiocese is or was allegedly responsible.

Any individual asserting a Sexual Abuse Claim is referred to in this form as a **Sexual Abuse Claimant**.

A SEXUAL ABUSE CLAIMANT REPRESENTED BY COUNSEL SHOULD CONSULT HIS OR HER OWN ATTORNEY IF THE SEXUAL ABUSE CLAIMANT HAS ANY QUESTIONS, INCLUDING WHETHER SUCH SEXUAL ABUSE CLAIMANT MUST FILE A PROOF OF CLAIM. A SEXUAL ABUSE CLAIMANT MAY ALSO OBTAIN INFORMATION (BUT NOT LEGAL ADVICE) FROM THE OFFICIAL COMMITTEE OF UNSECURED CREDITORS BY CALLING 888-570-6217.

YOU MAY WANT TO CONSULT WITH AN ATTORNEY BEFORE FILING A SEXUAL ABUSE PROOF OF CLAIM AGAINST THE DEBTOR.

FILING DEADLINE

The United States Bankruptcy Court for the District of New Mexico entered an order (the “Bar Date Order”) establishing **June 17, 2019 at 5:00 p.m. (prevailing Mountain Time)**, as the last date and time (the “Sexual Abuse Bar Date”) for each Sexual Abuse Claimant to file a proof of claim form (the “Sexual Abuse Proof of Claim Form”). The Sexual Abuse Bar Date and the procedures set forth below for filing proofs of claim apply to all Sexual Abuse Claims against the Debtor, based upon acts of sexual abuse occurring prior to December 3, 2018.

WHO MUST FILE

If you believe that you have a Sexual Abuse Claim, you must file a Sexual Abuse Proof of Claim Form to maintain and/or preserve any claims that you have against the Debtor. Even if you have already filed a lawsuit against the Debtor alleging sexual abuse prior to December 3, 2018, you must still file a Sexual Abuse Proof of Claim Form to maintain and/or preserve your rights in the Debtor’s Chapter 11 case.

WHO SHOULD NOT FILE

You should not file a Sexual Abuse Proof of Claim Form if:

- Your Sexual Abuse Claim has already been paid in full;
- You hold a claim that has been allowed by an order of the Bankruptcy Court on or before the Sexual Abuse Bar Date; or
- You do not have a claim against the Debtor.

WHAT TO FILE

YOU MUST FILE A SEXUAL ABUSE PROOF OF CLAIM FORM, A COPY OF WHICH IS ENCLOSED. YOU MAY ALSO OBTAIN A COPY OF THE SEXUAL ABUSE PROOF OF CLAIM FORM BY FOLLOWING THE INSTRUCTIONS BELOW.

PROCEDURES FOR FILING A SEXUAL ABUSE PROOF OF CLAIM FORM

To file a Sexual Abuse Proof of Claim Form, you must take the following steps:

- Fill out the Sexual Abuse Proof of Claim Form.
- For additional copies of the Sexual Abuse Proof of Claim Form: (a) photocopy the Sexual Abuse Proof of Claim Form; (b) contact the Debtor between the hours of 9:00 a.m. and 5:00 p.m. (prevailing Mountain Time), Monday through Friday, at 1-505-831-8144, or (c) visit the Debtor's website at: <https://archdiosf.org/>.
- **Please note that the Debtor's staff is not permitted to give you legal advice. You should consult your own attorney for assistance regarding any other inquiries, such as questions concerning the completion or filing of a proof of claim.**
- Return the completed Sexual Abuse Proof of Claim Form, together with one (1) copy, to the U.S. Bankruptcy Court Clerk at the address set forth above no later than **June 17, 2019 at 5:00 p.m. (prevailing Mountain Time)**. Sexual Abuse Proof of Claim Forms will be deemed timely filed only when they are **actually received** by the Clerk of the Court by **June 17, 2019 at 5:00 p.m. (prevailing Mountain Time)**
- **Please note that a Sexual Abuse Proof of Claim Form submitted by facsimile, telecopy or electronic mail transmission will not be accepted and may not be deemed filed.** If you are returning a Sexual Abuse Proof of Claim Form by mail, allow sufficient mailing time so that the Sexual Abuse Proof of Claim Form is received on or before **June 17, 2019 at 5:00 p.m. (prevailing Mountain Time)**. Sexual Abuse Proof of Claim Forms that are postmarked before the Sexual Abuse Bar Date, but which are received by the Clerk of the Court after the Sexual Abuse Bar Date, will be considered late.
- If a Sexual Abuse Claimant returns a Sexual Abuse Proof of Claim Form in person, by overnight mail or by courier service, or by mail the Sexual Abuse Proof of Claim Form should be delivered to the following address, between the hours of 9:00 a.m. and 5:00 p.m. (prevailing Mountain Time), Monday through Friday:

Office of the Clerk of Court
U.S. Bankruptcy Court for the District of New Mexico
Pete V. Domenici U.S. Courthouse
333 Lomas Blvd. NW, Suite 360
Albuquerque, NM 87102

CONSEQUENCES OF FAILURE TO FILE A PROOF OF CLAIM

The deadline for filing a Sexual Abuse Proof of Claim Form is **June 17, 2019 at 5:00 p.m.** (prevailing Mountain Time). Any person who has a Sexual Abuse Claim and does not file a Sexual Abuse Claim by that date may **not** be treated as a creditor for voting or distribution purposes under any plan of reorganization and such claim may be subject to discharge. Failure to file a Sexual

Abuse Claim may prevent such person from voting on any plan of reorganization in this case. Further, if such Sexual Abuse Claim is discharged, the Sexual Abuse Claimant may be forever barred and prevented from asserting his or her Sexual Abuse Claim against the Debtor or its property, and may not receive any payment or distribution in connection with such Sexual Abuse Claim.

CONFIDENTIALITY

Pursuant to the Bar Date Order, filed Sexual Abuse Proof of Claim Forms will remain confidential in this bankruptcy case, unless you elect otherwise in Part 1 of the Sexual Abuse Proof of Claim Form. Therefore, the Sexual Abuse Proof of Claim Form that you file will not be available to the general public, but will be kept confidential, except that information will be provided to the Debtor, the Debtor's attorneys, the Debtor's insurers, attorneys for the Official Committee of Unsecured Creditors and its members, any unknown claims representative appointed under a plan of reorganization, any settlement trustee appointed to administer payments to Sexual Abuse Claimants, prison authorities for incarcerated Sexual Abuse Claimants and such other persons as the Court determines should have the information in order to evaluate the Sexual Abuse Claim, all of whom will agree to keep the information provided by you confidential.

Dated: March 8, 2019

BY ORDER OF THE HONORABLE DAVID T. THUMA

UNITED STATES BANKRUPTCY JUDGE