

**SCHEDULE  
FORM C**

**PROOF OF CLAIM BY FINANCIAL CREDITORS**

*[Under Regulation 8 of the Insolvency and Bankruptcy Board of India (Insolvency Resolution Process for Corporate Persons) Regulations, 2016]*

*[Date]*

To

The Interim Resolution Professional/ Resolution Professional  
*[Name of the Insolvency Resolution Professional/ Resolution Professional]*  
*[Address as set out in public announcement]*

From

*[Name and address of the registered office and principal office of the financial creditor]*

**Subject:** Submission of proof of claim.

Madam/Sir,

*[Name of the financial creditor]*, hereby submits this proof of claims in respect of the corporate insolvency resolution process in the case of *[name of corporate debtor]*. The details for the same are set out below:

<b>PARTICULARS</b>	
1.	NAME OF FINANCIAL CREDITOR
2.	IDENTIFICATION NUMBER OF FINANCIAL CREDITOR  (IF AN INCORPORATED BODY PROVIDE IDENTIFICATION NUMBER AND PROOF OF INCORPORATION. IF A PARTNERSHIP OR INDIVIDUAL PROVIDE IDENTIFICATION RECORDS* OF ALL THE PARTNERS OR THE INDIVIDUAL)
3.	ADDRESS AND EMAIL ADDRESS OF FINANCIAL CREDITOR FOR CORRESPONDENCE
4.	TOTAL AMOUNT OF CLAIM  (INCLUDING ANY INTEREST AS AT THE INSOLVENCY COMMENCEMENT DATE)
5.	DETAILS OF DOCUMENTS BY REFERENCE TO WHICH THE DEBIT CAN BE SUBSTANTIATED.
6.	DETAILS OF HOW AND WHEN DEBIT INCURRED
7.	DETAILS OF ANY MUTUAL CREDIT, MUTUAL DEBIT OR OTHER MUTUAL DEALINGS BETWEEN THE CORPORATE DEBIT AND THE CREDITOR WHICH MAY BE SET OFF AGAINST THE CLAIM
8.	DETAILS OF ANY SECURITY HELD, THE

