

INSTRUCTIONS FOR CLAIM FORM

UNITED STATES DISTRICT COURT Central District of California

SECURITIES AND EXCHANGE COMMISSION

vs.

ROBERT YANG, et al., Defendants; and
YANROB'S MEDICAL, INC., et al., Relief Defendants

Case No. 5:15-cv-02387-svw

GENERAL INFORMATION

Stephen J. Donell is the Court-appointed Receiver in the above-captioned case. He is responsible for reviewing Claim Forms, and when appropriate, objecting to claims. The purpose of the Claim Form is to help the Receiver learn who you are, how much you are owed, the reason(s) you have a claim, and how the Receiver can contact you. **Unless otherwise ordered by the Court, if you fail to submit a Claim Form by March 15, 2017, you will lose your right to receive any distributions from the Receiver or the receivership estate and your claim will be forever barred.**

1. **WHO MUST FILE A CLAIM FORM?** Other than the EB-5 investors who have received an Investor Claim Letter, you must file a Claim Form if you believe you have any claim against:

Defendants Suncor Fontana, LLC, Suncor Hesperia, LLC, Suncor Care Lynwood, LLC, and their respective subsidiaries and affiliates (collectively, the "Companies".)

This includes any claim that you are owed money by any of the Companies; assert any interest in any of the Companies or in any of its assets or in any claim against any of the Companies or any entity under its control; or assert any claim of any sort against any of the Companies whether such claim is based upon contract, tort, contribution, indemnity, reimbursement, subrogation theories or other legal or equitable theory. Claim Forms must be submitted by claimants who were creditors or investors of any type, including employees of the Companies. If you are an investor in or a creditor of more than one of the Companies or affiliates or subsidiaries, please file a separate Claim Form for each and every claim or interest you allege to have against them or any of them. If you are a claimant who performed work on more than one project, you should submit a Claim Form as to each project.

Failure to submit a signed Claim Form and supporting documentation will result in the denial of your claim.

2. **CONSENT TO JURISDICTION OF THE COURT AND THE CONSEQUENCES THEREOF.** If you submit a Claim Form in this case, you consent to the jurisdiction of United States District Court for the Central District of California ("District Court") for all purposes, agree to be bound by its decisions, including a determination, among other things, as to the validity and amount of your claim against the above-captioned Companies, affiliates, subsidiaries or other persons or entities as identified in paragraph 1. In submitting a Claim Form, you agree to be bound by the actions of the District Court even if that means that a claim is limited or denied. By submitting a Claim Form, you further agree that your participation in any distribution of the receivership estate may exclude or prevent you from pursuing other remedies.
3. **HOW ARE CLAIMS SUBMITTED?** Claimants can submit a completed Claim Form, along with all supporting documentation, by mail to Stephen J. Donell, Receiver, 12121 Wilshire Blvd., Suite 1120, Los Angeles, CA 90025 or by email to sarah.bates@fedreceiver.com. Please submit only one Claim Form per claim. Please do **not** send or file Claim Forms with the Court.
4. **WHAT IS THE DEADLINE TO SUBMIT THIS CLAIM FORM?** The Claim Form must be **received** by the Receiver, by **March 15, 2017**. Please note that, unless the Court orders otherwise, any late filed claim will be denied.
5. **SUPPORTING DOCUMENTS.** You must attach to the Claim Form copies of all documents that show that the Companies owe the debts or amounts claimed, or if the documents are too lengthy, a summary of those documents. If supporting documents are not available, you must attach an explanation of why they are not available. Failure to provide such documents may result in the denial of your claim.
6. **ADDITIONAL INFORMATION.** Additional information regarding filing the Claim Form, along with additional blank forms, can be obtained at <https://www.fedreceiver.com/case/engagement-suncor-receivership-estate/claim-information/> or you may write to the Receiver at the following address: Stephen J. Donell, Receiver, 12121 Wilshire Blvd., Suite 1120, Los Angeles, CA 90025.
7. **TAX AND LEGAL ADVICE.** The Receiver cannot provide tax or legal advice. You are encouraged to seek independent advice regarding tax and legal issues in regard to filing your claim.

INFORMATION ON COMPLETING THE CLAIM FORM

1. **Information about Claimant.** Complete this section giving the name, address, telephone number and email address of the Claimant who is asserting a claim against the Companies, and any account or reference number associated with such debt. If the Claimant is an entity, please provide contact information for an authorized representative.
2. **Claim information.**
 - 2a. Please indicate the basis of your claim in this section.
 - 2b. **Which Company did you contract with or owes you money:** Please identify the Company in the Receivership which you contracted with or which you believe owes you the money on your claim.
 - 2c. **Entity or Project to which your claim relates:** Please identify which entity or project your claim relates to. If you performed work or provided materials to several projects, you should file a separate Claim Form for each project related claim.
 - 2d. **Date the Claim was Incurred.** Please indicate the date on which the amount you allege to be owed arose.
 - 2e. **Total Claim Amount as of March 15, 2017.** Please state your claim amount as of March 15, 2017.
 - 2f. **Other liable parties.** Please identify any other party you believe may be liable to you on the claim.
 - 2g. **Pending Legal Action.** If you have commenced a legal action against any of the above-captioned defendants or any Receivership Entity or Company, please provide the details of said legal action here. Please attach any additional pages of description and supporting documentation. Also, please provide any information regarding court judgments obtained against any of the above-captioned defendants.
 - 2h. **Security interest.** Please mark the applicable box if you contend your claim is subject to a security interest, and attach copies of all security agreements and other documents that evidence the claim of secured status and any evidence of perfection.
 - 2i. **Claim above principal amount.** Mark the applicable box if your claim amount includes interest or other charges, such as attorneys' fees, loss profits, or late fees in addition to the principal amount of your claim, and attach an itemized statement of all such additional charges.

Please feel free to provide additional pages of explanation or narrative discussing your claim.
3. **Claims Bar Date.** You must submit the Claim Form by the Claims Bar Date of **March 15, 2017** or your claim will be barred.
4. **Supporting Documentation.** In addition to filing out the Claim Form, you must provide supporting documentation evidencing your claim. Investors should submit their Subscription Agreement or wire instructions reflecting their payment. Other claimants should submit supporting documentation such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, or evidence of perfection of liens. The Receiver may choose to redact personally identifying information in accordance with federal court rules should filing of any documents with the Court become necessary.
5. **Third Party Actions.** If you have asserted any claims for damages related to your claim against third parties, please check the box and attach a brief description and state the amount of money recovered, if any.
6. **Signature. Sign the Claim Form and indicate your title, if applicable.**
7. **Date.** Insert the date on which you completed and signed the Claim Form.
8. **Submit Claim Form.** Claimants can submit a completed Claim Form, along with all supporting documentation, by mail to: Stephen J. Donell, Receiver, 12121 Wilshire Blvd., Suite 1120, Los Angeles, CA 90025 or by email to: sarah.bates@fedreceiver.com.

Please submit only one claim form per claim. Please do **not** send or file claim forms with the Court.
9. **Acknowledgment of Receipt of Claim.** To receive an acknowledgement of receipt of your Claim Form if you submit by mail, enclose a stamped, self-addressed envelope and an additional copy of the Claim Form. Claim Forms submitted by email will receive an acknowledgment of receipt by return email.