

PROOF OF CLAIM

In the Matter of:

**IDUN PHARMACEUTICALS, INC
12462 RANCHO BERNARDO ROAD, SUITE 554
SAN DIEGO, CALIFORNIA 92042**

The undersigned creditor of Idun Pharmaceuticals, Inc. (the "Company") hereby submits its claim in the general assignment estate created upon the execution and acceptance of the Company's general assignment in favor of Development Specialists, Inc. as of March 28, 2016, in the amount as set forth below, and substantiated by the attached invoices or statement of account.

Date Submitted: _____

Name of Debtor: _____

Amount of Claim: _____

Name of Creditor: _____

By: _____

Title

Address: _____

City, State & Zip: _____

() _____; () _____

Telephone

Facsimile

E-mail address: _____

NOTE: Interest is applicable only to the date of the assignment and then only in the event a written agreement exists between you and the debtor providing for the payment of interest.

*Return completed form to Development Specialists, Inc.
333 South Grand Avenue, Suite 4070, Los Angeles, CA 90071
(213) 617-2717/FAX (213) 617-2718*

Note: If faxing the proof of claim, the original must be received by the Assignee by December 7, 2009