

## PROOF OF CLAIM

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IN THE MATTER OF MIGU INVESTMENTS INC. AND THE OTHER COMPANIES  
ENUMERATED IN APPENDIX “A” HERETO (collectively, the “**Respondents**”)

ALL CAPITALIZED TERMS NOT OTHERWISE DEFINED HEREIN HAVE THE MEANINGS GIVEN TO THEM IN THE ENCLOSED CLAIMS PROCESS INSTRUCTION LETTER, INCLUDING APPENDIX “B” THERETO.

Please read the enclosed Claims Process Instruction Letter carefully prior to completing this Proof of Claim.

Please review the Claims Process Order, which is posted to the Monitor’s Website at: [www.alvarezandmarsal.com/minisocanada](http://www.alvarezandmarsal.com/minisocanada).

### 1. Particulars of Claim

(a) Please complete the following (The name and contact information should be of the original Creditor, regardless of whether all or any portion of the Claim has been assigned).

Full Legal Name:	
Full Mailing Address:	
Telephone Number:	
Facsimile Number:	
E-mail address:	
Attention (Contact Person):	

(b) Has all or part of the Claim been assigned by the Creditor to another party?

Yes: ☐

No: ☐

### 2. Particulars of Assignee(s) (If any)

Please complete the following if all or a portion of the Claim has been assigned. Insert full legal name of the assignee(s) of the Claim. If there is more than one assignee, please attach a separate sheet with the required information.

Full Legal Name of Assignee:	
Full Mailing Address of Assignee:	
Telephone Number of Assignee:	
Facsimile Number of Assignee:	
E-mail address of Assignee:	
Attention (Contact Person):	

### 3. Proof of Claim

I, \_\_\_\_\_ (name), of \_\_\_\_\_  
(City and Province, State or Territory) do hereby certify that:

- ☐ I am a Creditor; **or**  
☐ I am the \_\_\_\_\_ (state position or title) of  
\_\_\_\_\_ (name of corporate Creditor), which is a Creditor;
- I have knowledge of all the circumstances connected with the Claim referred to below;
- I (or the corporate Creditor, as applicable) have a Claim against the Respondent(s) indicated beside the checked boxes in Appendix "A" as follows:

PRE-FILING CLAIM (as at July 12, 2019):

\$ \_\_\_\_\_ (insert amount of Claim)

RESTRUCTURING CLAIM:

\$ \_\_\_\_\_ (insert amount of Claim resulting from the disclaimer, rescission or termination, after the Filing Date, of any contract including any employment agreement, lease or other agreement or arrangement of any nature whatsoever, whether written or oral);

TOTAL \$ \_\_\_\_\_

- I (or the corporate Creditor, as applicable) have a Director/Officer Claim against the following persons \_\_\_\_\_ (if asserting a Claim against a Director or Officer, insert name(s) of such persons) as follows:

DIRECTOR/OFFICER CLAIM:

\$ \_\_\_\_\_ (insert amount of Claim)

Note: Claims should be submitted in Canadian Dollars converted using the applicable Bank of Canada exchange rate published on the Filing Date.

#### 4. Nature of Claim

*(Check and complete appropriate category)*

☐ A. UNSECURED CLAIM OF \$\_\_\_\_\_. That in respect of this debt, no assets of the Respondents are pledged or held as security.

☐ B. SECURED CLAIM OF \$\_\_\_\_\_. That in respect of this debt, assets of the Respondents valued at \$\_\_\_\_\_ are pledged to or held by me as security, particulars of which are as follows:

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*(Give full particulars of the security, including the date on which the security was obtained, and attach a copy of any security documents.)*

#### 5. Particulars of Claims

Please attach details concerning the particulars of the Creditor's Claims or Restructuring Claims, as well as any security held by the Creditor.

*(Provide all particulars of the Claims and supporting documentation, including the amount, description of transaction(s) or agreement(s) giving rise to the Claims, name of any guarantor which has guaranteed the Claims, amounts of invoices, particulars of all credits, discounts, etc. claimed, description of the security, if any, granted by the relevant Respondent(s) to the Creditor or asserted by the Creditor and estimated value of such security. Where a Claim is advanced against any Director or Officer, please explain the basis for such Claim, including, if applicable, reference to any relevant statutory or other authority.)*

#### 6. Filing of Claims

This Proof of Claim **must be received by the Monitor by no later than 5:00 p.m. (Vancouver time) on September 6, 2019** (the "Claims Bar Date") unless your claim is a Restructuring Claim.

Proofs of Claim for Restructuring Claims arising after the Filing Date **must be received by the Monitor by the later of: (a) the Claims Bar Date, and (b) by 5:00 p.m. (Vancouver time) on the day which is twenty (20) days after the date of the applicable Notice of Disclaimer or Resiliation** (the "Restructuring Claims Bar Date").

**IN ACCORDANCE WITH THE TERMS OF THE CLAIMS PROCESS ORDER, THE FAILURE TO FILE YOUR PROOF OF CLAIM BY THE CLAIMS BAR DATE OR THE RESTRUCTURING CLAIMS BAR DATE, AS APPLICABLE, WILL RESULT IN YOUR CLAIM BEING FOREVER BARRED AND EXTINGUISHED, AND YOU WILL BE PROHIBITED FROM MAKING OR ENFORCING A CLAIM AGAINST ANY OF THE RESPONDENTS OR THE DIRECTORS AND OFFICERS.**

This Proof of Claim must be delivered by prepaid registered mail, personal delivery, e-mail, courier or facsimile transmission at the following addresses:

Alvarez & Marsal Canada Inc.  
400 Burrard Street  
Suite 1680, Commerce Place  
Vancouver, British Columbia V6C 3A6  
Attention: Nishant Virmani  
Telephone: 604.639.0850  
Fax: 604.638.7441  
Email: nvirmani@alvarezandmarsal.com

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 2019.

\_\_\_\_\_  
Witness:

Per: \_\_\_\_\_

Print name of Creditor:  
  
\_\_\_\_\_

*If Creditor is other than an individual, print name  
and title of authorized signatory*

Name: \_\_\_\_\_

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

APPENDIX “A”

RESPONDENTS

	#	Entity Name
<input type="checkbox"/>	1	Migu Investments Inc.
<input type="checkbox"/>	2	Miniso Canada Investments Inc.
<input type="checkbox"/>	3	Miniso Canada Store Inc.
<input type="checkbox"/>	4	Miniso (Canada) Store One Inc.
<input type="checkbox"/>	5	Miniso (Canada) Store Two Inc.
<input type="checkbox"/>	6	Miniso (Canada) Store Three Inc.
<input type="checkbox"/>	7	Miniso (Canada) Store Four Inc.
<input type="checkbox"/>	8	Miniso (Canada) Store Five Inc.
<input type="checkbox"/>	9	Miniso (Canada) Store Six Inc.
<input type="checkbox"/>	10	Miniso (Canada) Store Seven Inc.
<input type="checkbox"/>	11	Miniso (Canada) Store Eight Inc.
<input type="checkbox"/>	12	Miniso (Canada) Store Nine Inc.
<input type="checkbox"/>	13	Miniso (Canada) Store Ten Inc.
<input type="checkbox"/>	14	Miniso (Canada) Store Eleven Inc.
<input type="checkbox"/>	15	Miniso (Canada) Store Twelve Inc.
<input type="checkbox"/>	16	Miniso (Canada) Store Thirteen Inc.
<input type="checkbox"/>	17	Miniso (Canada) Store Fourteen Inc.
<input type="checkbox"/>	18	Miniso (Canada) Store Fifteen Inc.
<input type="checkbox"/>	19	Miniso (Canada) Store Sixteen Inc.
<input type="checkbox"/>	20	Miniso (Canada) Store Seventeen Inc.
<input type="checkbox"/>	21	Miniso (Canada) Store Eighteen Inc.
<input type="checkbox"/>	22	Miniso (Canada) Store Nineteen Inc.
<input type="checkbox"/>	23	Miniso (Canada) Store Twenty Inc.
<input type="checkbox"/>	24	Miniso (Canada) Store Twenty-One Inc.
<input type="checkbox"/>	25	Miniso (Canada) Store Twenty-Two Inc.