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6-17-2019

### Proof of Claim form: John Doe 169B

Hall & Monagle, LLC

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## Proof of Claim form: John Doe 169B

### Content Notice

This item is part of the Archdiocese of Santa Fe Institutional Abuse Collection, and it may contain descriptions of physical, emotional, sexual, and religious abuse, including abuse of minors. Other potentially sensitive topics within the collection include mental health conditions, substance abuse, and other forms of violence.

Resources are available if you or someone you know needs support for any reason.

For the National Sexual Assault Hotline, call 800-656-HOPE (4673) or go to <https://hotline.rainn.org/online>

For the 988 Suicide and Crisis Lifeline, call or text 988, or go to <https://chat.988lifeline.org/>

For the Substance Abuse and Mental Health Services Administration Helpline, call 1-800-662-4357

For crisis treatment in New Mexico: <https://www.nmhealth.org/contact/crisis/>

Survivors Network of those Abused by Priests resources: [https://www.snapnetwork.org/resources\\_for\\_survivors](https://www.snapnetwork.org/resources_for_survivors)

To report abuse:

- <https://archdiosf.org/report-abuse>
- <https://www.reportbishopabuse.org/>

To report child abuse:

- <https://www.childhelpline.org/>

### Keywords

child sexual abuse, church abuse, New Mexico, Archdiocese of Santa Fe

### Disciplines

Catholic Studies | Ethics in Religion | Religion Law | United States History

JD169

UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF NEW MEXICO

FILED  
at 11:37 o'clock PM

JUN 17 2019

In re:  
  
ROMAN CATHOLIC CHURCH OF THE  
ARCHDIOCESE OF SANTA FE, a New Mexico  
corporation sole,  
  
Debtor.

Chapter 11 United States Bankruptcy Court  
Case No. 18-13027-TPI Albuquerque, New Mexico

**CORRECTED SEXUAL ABUSE PROOF OF CLAIM**

**This form has been corrected solely with respect to the address for hand delivery.**

**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.

**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 2: IDENTIFYING INFORMATION**

**A. Sexual Abuse Claimant**

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ #1 Last Name \_\_\_\_\_ Jr/Sr/III

Mailing Address (If party is incapacitated, is a minor or is deceased, please provide the address of the individual submitting the claim. If you are in jail or prison, your current address). #2 \_\_\_\_\_

City \_\_\_\_\_ State/Prov. \_\_\_\_\_ Zip Code (Postal Code) \_\_\_\_\_ Country(if other than U.S.A.) \_\_\_\_\_ #2

Telephone No(s):  
Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_ #2

Email address: \_\_\_\_\_ #2

Social Security Number: \_\_\_\_\_ #4

If you are in jail or prison, your identification number: \_\_\_\_\_

May we leave voicemails for you regarding your claim?  Yes  No (please contact my attorneys)

May we send confidential information to your email:  Yes  No (please contact my attorneys)

Birth Date: \_\_\_\_\_ #2  Male  Female  
Month Day Year

Any other name, or names, by which the Sexual Abuse Claimant has been known:

\_\_\_\_\_

**B. Sexual Abuse Claimant's Attorney (if any):**

Hall & Monagle, LLC  
Law Firm Name

Brad D. Hall  
Attorney's First Name Middle Initial Last Name

320 Gold Ave SW #1218  
Street Address

Albuquerque, NM 87102  
City State/ Prov. Zip Code (Postal Code) Country  
(if other than U.S.A.)

(505) 255-6300 (505) 255-6323 brad@hallmonagle.com

Telephone No.

Fax No.

E-mail address

**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?

I was sexually abused as a child by Conran Runnebaum. Fr. Conran was employed and empowered to abuse me by the Archdiocese of Santa Fe, Holy Trinity parish in Arroyo Seco, the Franciscan Friars, Province of St. John and the Franciscan Friars Our Lady of Guadalupe Province.

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

Fr. Conran was the Parish Priest, and a friend of the family. He came to our home for dinners and everything. He did my Confirmation, and I was his altar boy. We attended both the church in Arroyo Seco and the Santo Nino de Atucha mission.

- 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.

It happened in Arroyo Seco, at Holy Trinity Church in the sacristy, and at Santa Nino Chapel and San Antonio de Padua missions, also in the sacristy at each mission.

- 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.

The abuse started in 1983 and lasted three years, until he wanted a younger boy. There were about 150 incidents, of which 100 or more were anal penetrations/rapes.

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.

I was about 14 when it started and 17 when it ended.

- e. What happened (describe what happened):

Fr. Conran had just arrived from Cincinnati. My parents went to take my brothers to wrestling camp, and I had to serve as an altar boy alone with Fr. Conrad. He knew my parents were gone to Oklahoma because they were the Mayo Dormos – they took care of the church so he knew they were gone. He asked me to come early. I was an altar boy, but I never had to dress the priest. He made me dress him – that first time and every other time. He would close the door and get naked. Then I had to put his mass clothing on. He was extra nice to me. He gave me a glass of wine, and then began to fondle under my clothing and then he made me suck him off then, and he ejaculated. He did all of this before mass. And then we had to go out and do mass.

From then on, this happened every week. He became very friendly to me. He bought me my first pair of “Nike” sneakers and he told me that I was very special to him, he took me for rides in his sports car and said that he was going to leave me his sport car in his will. He bought me gifts.

After that first time, Fr. Conran would fondle me and dry hump me while we were getting ready for mass. Always after he got naked and I had to get naked. I had to dress him and it happened when I was dressing him. He would be telling me that what we were doing was good, I was helping him be holy and that God was pleased with what we were doing. I was very confused because we were poor and he was generous to me and giving me gifts and making me feel special and then he was doing this to me. I did not know much about sex.

He quickly progressed to anal penetration of me with his penis. He was a grown adult male and I was a child. It was extremely painful and I would shit my pants after the first time when I bled but lost my bowels. He then did this regularly to me – masturbate me and then anally rape me before mass. I would have to celebrate mass dirty. Sometimes I would come to mass dirty down there because he did not like that. He would bend me over the counter, a table, and sometimes have me get on top of him on the chair – it depended where we were at. He would always ejaculate. I felt shame and embarrassment during mass. He did this to me for years, at least once a week for years. It was all either in Arroyo Seco or the missions, where we drove to say mass so had to drive back.

Fr. Conran hired my father to be the contractor to remodel the church. This was held over my head so that I knew I could never tell my parents because he would fire my father. I was a prisoner of Fr. Conran

Even after he stopped raping me because I got too old for him and I stopped going to mass and altar serving , I was forced to face him because he joined #6 #6 a a lay fraternity and he was my hermano "brother". They are both a part of the church as well as a separate entity. It was extremely embarrassing and painful to me for him to always be there. He tortured me.

- 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)?

I have only told #3 my girlfriend of 10 years, about the abuse. I told her a few years ago.

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

#6 , which I joined in high school and still belong to.

- 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.

There were no witnesses that I know of.

**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)?

Having been sexually abused the way I was, I have always had a chip on my shoulder, and felt angry. I joined the air force but got discharged for behavioral problems. I got into a lot of fights. Fr. Conran always gave me wine before he raped me and I always drank it. It made it easier. I was an alcoholic beginning in high school and cocaine shortly thereafter.

I've had numerous (3) DWI's. I have suffered anger, depression, sleeping problems, anxiety. I cannot go into a church without being very angry. I have only had a string of bad relationships with intimacy issues. I've been suicidal, and I got in a lot of fights in my 20's, and developed drug problems. I do not know how to perform sex other than how I learned. While I have a daughter and a son, I have a lonely existence. I have not thought about this since it happened. My children and I are alienated because I was such a bad father to them and their mothers. I thought I put it away but now I am having crying I can't control, nightmares (I wake up) and I can't take my mind off of it. I believe it is PTSD. I feel out of control. My girlfriend is my everything and has encouraged me to deal with this finally.

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

I have not sought counseling. I have been advised to do so I am so bad right now.

#### **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: NO

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: 6

Signature: \_\_\_\_\_

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

Relationship to Sexual Abuse Claimant: self

#1