FORM B10 (Official Form 10) (4/98) USBC Illinois Northern (4/1/98)

*FILE ORIGINAL FOR CHAPTERS 7 and 11, IN DUPLICATE FOR CHAPTER 13, FOR DATE-STAMPED COPY, SEE #9 BELOW

United States Bankruptcy Court
Northern District of Illinois, Eastern **Division**

☐ CH 7 ☐ CH 13 ☑ CH 11
PLEASE CHECK CHAPTER

Name of Debtor
Conseco Finance Corporation & Conseco Finance Servicing Corp

Case Number
02-49675 & 49676

PROOF OF CLAIM

NOTE This form should not be used to make a claim for an administrative expense arising after the commencement of the case A "request" for payment of an administrative expense may be filed pursuant to 11 U S C § 503

File Claim Form With
United States Bankruptcy Court
P O Box A3613
Chicago, Illinois 60690-3612

Name of Creditor (The person or other entity to whom the debtor owes money or property)
Key Sales & Supply Co , Inc

☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim Attach copy of statement giving particulars

Name and Address Where Notices Should be Sent
c/o Barry L Lippitt, Attorney
29777 Telegraph Rd Ste 2500
Southfield MI 48034
Telephone No 248-357-0002

☐ Check box if you have never received any notices from the bankruptcy court in this case

☐ Check box if the address differs from the address on the envelope sent to you by the court

Creditor # _____

THIS SPACE IS FOR **COURT USE ONLY**

Account or other number by which creditor identifies debtor
800-248-1430

Check here if this claim
☐ amends ☐ replaces a previously filed claim dated _____

1 BASIS FOR CLAIM

☑ Goods sold
☐ Money loaned
☐ Taxes
☐ Retiree benefits as defined in 11 U S C § 1114 (a)
☐ Services performed
☐ Personal injury/wrongful death
☐ Other _____
☐ Wages salaries and compensation (Fill out below)
Your social security number _____
Unpaid compensation for services performed
from _____ (date) to _____ (date)

FILED
MAR 14 2003
BMC

2 DATE DEBT WAS INCURRED 11/6/2002

3 IF COURT JUDGMENT DATE OBTAINED

4 Total Amount of Claim at Time Case Filed $ 1,668 00

If all or part of your claim is secured or entitled to priority also complete Item 5 or 6 below

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim Attach itemized statement of all interest or additional charges

5 Secured claim

☐ Check this box if your claim is secured by collateral (including a right of setoff)

Brief Description of Collateral

☐ Real Estate
☐ Motor Vehicle
☐ Other _____

Value of collateral $_____

Amount of arrearage and other charges at time case filed included in secured claim above if any $ _____

6 Unsecured Priority Claim

☐ Check this box if you have an unsecured priority claim
Amount entitled to priority $ _____
Specify the priority of the claim

☐ Wages salaries or commissions (up to $4 300) *earned within 90 days before filing of the bankruptcy petition or cessation of the debtor s business whichever is earlier 11 U S C § 507(a)(3)
☐ Contributions to an employee benefit plan 11 U S C § 507(a)(4)
☐ Up to $1,950* of deposits toward purchase lease or rental of property or services for personal family or household use 11 U S C § 507(a)(6)
☐ Alimony maintenance or support owed to a spouse former spouse or child 11 U S C § 507(a)(7)
☐ Taxes or penalties owed to governmental units11 U S C § 507(a)(8)
☐ Other—Specify applicable paragraph of 11 U S C § 507(a)_____

**Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment*

7 CREDITS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim

8 SUPPORTING DOCUMENTS *Attach copies of supporting documents* such as promissory notes purchase orders invoices itemized statements of running accounts, contracts court judgments mortgages security agreements and evidence of perfection of lien DO NOT SEND ORIGINAL DOCUMENTS If the documents are not available explain If the documents are voluminous attach a summary ANY ATTACHMENT MUST BE 8 1/2 BY 11 '

9 DATE STAMPED COPY To receive an acknowledgment of the filing of your claim enclose a stamped self addressed envelope and an additional copy of this proof of claim

THIS SPACE IS FOR **COURT USE ONLY**

Conseco Finance Corp Claim
49675000648

Date 3/11/03

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)

Barry L Lippitt, Atty for Creditor

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 and3571

KEY SALES & SUPPLY CO., INC
9950 Freeland Ave
Detroit, Michigan 48227

PHONE (313) 931-7720
FAX (313) 931-7758

Invoice

Number **14048**
Date **November 06, 2002**

Bill To
CONSECO FINANCE PA
P O.BOX 1158
WEXFORD,, PA. 15090

Ship To
CONSECO FINANCE PA
105 BRADORD ROAD
STONEWOOD COMMONS III STE 200
WEXFORD,, PA. 15090
#3 (2-3)
651-293-3609

PO Number	Terms	Credit Card #	General Info.	Account #
ROBIN	NET 10 DAYS			800.24[illegible]

Description	Quantity	Price Each	Tax	Amount
4001X3 MK/KD	150 00	10 34		1,551 00
EXTRA CUT BLANKS	100 00	0 50		50 00
U P S 5 CARTONS				67 00

C/o Development
1700 Rand Mark Tower
345 St Peter St F502
St Paul MN 55102

Sub-Total	$1,668.00
MI TAX 0 00% on 0 00	0 00
Total	$1,668 00

THANK YOU FOR THIS ORDER

0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
$1 668 00	$0 00	$0 00	$0 00	$1,668 00

12-18-02
12-19-02

LAW OFFICES

BARRY L LIPPITT, P C

SUITE 2500 • ONYX PLAZA
29777 TELEGRAPH ROAD • SOUTHFIELD MI 48034
PHONE (248) 357 0002 • FAX (248) 746 9746
E MAIL BARRYLIPPITT@ABANET ORG

March 11, 2003

Conseco Finance Corporation
c/o Bankruptcy Management Corporation
1330 E Franklin Ave
El Segundo CA 90245

RE Creditor Key Sales & Supply Co , Inc
Debtor Conseco Finance Corporation et al
Docket 02-49675 & 02-49676 (NDIL (ED))
My File No 03-004

Dear Clerk

Enclosed please find a copy of **Proof of Claim** filed on behalf of my client, with supporting documentation attached

Also, I enclose an extra copy of the Proof of Claim and a SASE Please stamp and return the additional copy

If you have any questions, please contact the undersigned

Very truly yours,

BARRY L LIPPITT
Attorney for Creditor

Enclosures (1)

cc Kirkland & Ellis
Client

03 004\030311BM File Proof of Claim wpd