UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE	PROOF OF CLAIM
In re **Exide Technologies**	Case Number **02-11125**

02202490040416

YOUR CLAIM IS SCHEDULED AS

$113 80 UNSECURED

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

Name of Creditor and Address

02202490040416

QUEST TECHNOLOGIES INC
1060 CORPORATE CENTER DR
OCONOMOWOC WI 53066 3692

Creditor Telephone Number (262) 262-567-9157

☐ 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

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

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

The amounts reflected above constitute your claim as scheduled by the Debtor If you agree with the amounts set forth herein and have no other claim against the Debtor you do not need to file this proof of claim EXCEPT as stated below

If the amounts shown above are listed as Contingent Unliquidated or Disputed a proof of claim must be filed

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again

CREDITOR TAX I D # 39-0758869

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR 25 22600

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

1 BASIS FOR CLAIM

☐ Goods sold
☑ Services performed
☐ Money loaned
☐ Personal injury/wrongful death
☐ Taxes
☐ Other (describe briefly)
☐ Retiree benefits as defined in 11 U S C § 1114(a)
☐ Wages salaries and compensation (Fill out below)

Your social security number _____

Unpaid compensation for services performed from _____ (date) to _____ (date)

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE $ 113 80 (unsecured) $ _____ (secured) $ _____ (unsecured priority) $ _____ (total)

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

FILED
MAR 21 2003
BMC

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

Specify the priority of the claim

☐ Wages salaries or commissions (up to $4 650*) 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 $2 100* 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 units 11 U S C § 507(a)(8)
☑ Other Specify applicable paragraph of 11 U S C § 507(a) Business Expense

Amounts are subject to adjustment on 4/1/01 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

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

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is received on or before 4 00 pm, Eastern Time on April 23, 2003

THIS SPACE FOR COURT USE ONLY

BY MAIL TO
Bankruptcy Management Corporation
P O BOX 1063
El Segundo CA 90245-1063

BY HAND OR OVERNIGHT DELIVERY TO
Bankruptcy Management Corporation
1330 East Franklin Avenue
El Segundo CA 90245

Exide Technologies
02197

DATE SIGNED 3/17/03

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)

CFO Daniel J Heerey

Penalty for presenting fraudulent claim is a fine of up to $500 000 or imprisonment for up to 5 years or both 18 U S C §§ 152 AND 3571

QUEST TECHNOLOGIES, INC

CASE NO 02-11125, Exide Technologies

INVOICE DETAIL REPORT - INVOICES THAT MAKE UP THE SCHEDULED AMOUNT

QUEST TECHNOLOGIES INC
1060 CORPORATE CENTER DR
OCONOMOWOC WI 53066 3692

SCHEDULED AMOUNT $113 80

SCHEDULE ID 52638
CREDITOR ID 40416
VENDOR CODE JDE-141903

INV C NUMBER	*INV C AMT*	*INV C DATE*	*REF ID NUMBER*
135719	$113 80	4/28/2002	
	$113 80		

QUEST® TECHNOLOGIES, INC
1060 Corporate Center Dr * Oconomowoc, WI 53066 3692 USA
PHONE 262-567 9101
800-245-0779
FAX # 262-567 4047

INVOICE	PAGE
135719	1

FED ID# 39-0758869

ORIGINAL INVOICE

REPRINT

DATE	2/27/02
DUE ON	3/29/02

SHIP TO
EXIDE TECHNOLOGY CORP
413 E BERG ROAD
ATTN DEREK MCKELLIP
SALINA KS 67401
USA

SOLD TO
EXIDE CORPORATION
413 EAST BERG ROAD
SALINA KS 67401
USA

EXPORT	CURRENCY
N	

TERMS
1 % 10 Net 30

SELLER ID

CUSTOMER NO	ORDER	REGION	PURCHASE ORDER NO	P O REV
1 2522600	CO 122815	99	DM2999	

SHIP NO	SHIP VIA	SHIP DATE	SHIP WEIGHT
130014	1007738	2/27/02	1 100 LB

ITEM NUMBER/DESCRIPTION	U/M	QUANTITY/PRICE	NET SALES AMT
Carrier UPS Ground			
Reference order number 1007738			
02LABOR1	HR	1 000	
SVCS/WARR LABOR JS1 22-8700		105 000	105 00
* 058-886	EA	1 000	
CA-12B CALIBRATOR ASBLY-		000	00
FRT-UPS Ground			8 80

MELINDA REICHERT, A.R.
Administrative Assistant
1060 CORPORATE CENTER DRIVE
OCONOMOWOC WI 53066
262 567-9157 Ext 138
800-245-0779 • FAX. 262-567 6932
email mreichert@quest technologies com

NET SALES	105 00	TRADE CODE	00
MISC CHARGES	00	TERMS CODE	1 05
FREIGHT	8 80		
TAXES	00	AMOUNT DUE	113 80