UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE

PROOF OF CLAIM

In re

Exide Technologies

Case Number

02-11125

94167

YOUR CLAIM IS SCHEDULED AS

sa32878

UNKNOWN UNSECURED CONTINGENT
DISPUTED, UNLIQUIDATED

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

02209279102528

HUTCHINSON ROBERT D
3021 CHIMNEYWOOD
FLOYD KNOBS IN 47119

812 923-9758

Creditor Telephone Number ( )

☐ 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

THIS SPACE IS FOR COURT USE ONLY

CREDITOR TAX I D #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

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 274-38-3813

Unpaid compensation for services performed from 12-31-98 (date) to 3-31-00 (date)

2 DATE DEBT WAS INCURRED MAR 31-00

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

$	$	$	$
(unsecured)	8,771.66 (secured)	(unsecured priority)	8,771.66 (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

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) _____

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, prevailing Eastern Time on July 26, 2004

BY MAIL TO
Exide Technologies et al
c/o Bankruptcy Management Corporation
PO Box 1063
El Segundo CA 90245 - 1063

BY HAND OR OVERNIGHT DELIVERY TO
Exide Technologies et al
c/o Bankruptcy Management Corporation
1330 East Franklin Ave
El Segundo CA 90245

THIS SPACE FOR COURT USE ONLY

FILED
JUL 08 2004
BMC

DATE SIGNED 7-5-04

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)

Robert Hutchinson Robert Hutchinson

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

Exide Technologies
03945

LORCH & NAVILLE, LLC
ATTORNEYS

May 14, 2003

Robert Hutchinson
3021 Chimneywood
Floyds Knobs, IN 47119

Dear Mr Hutchinson

As a follow-up to our phone conversation of Monday, May 12th, I have run into a dead end on finding out what happened to your deferred compensation plan held with Exide Corporation

After several attempts, I did speak with a representative of the U S Department of Labor, Bob Armstrong Mr Armstrong indicated his agency could not help us in any way and suggested our only remedy was to file a Proof of Claim in the bankruptcy

I tried initially to get the status of the bankruptcy but to no avail I am sorry, but it simply seems I have run into a dead end and don't know what else I can do

I had also written Danielle Rose with Exide Tech, who I understand to be the successor in interest to the Exide Corporation I never heard anything from her

I am sure this is frustrating for you and I am afraid I have no other suggestions on how you may or should proceed

I have a red file folder with all of your file materials in it that you left at my office Since it was too big to mail, I will leave it out front with our receptionist for you pick up at your convenience

Yours very truly,

Robert P Hamilton

RPH/cp

#27042/clp/hutchinson/hutchinson let

CHESTER V LORCH
(1900 1972)
FRANK E LORCH JR
(1905 1951)
BASIL H LORCH JR
(1925 1997)

WILLIAM C MOYER*
MICHAEL G NAVILLE
GEORGE W GESENHUES JR
LINDA B LORCH
ROBERT P HAMILTON
TIMOTHY J NAVILLE*
LISA GARCIA REGER
SALLY A THOMAS
CARY J HURST
GREGORY M RECER*
ALLEN C PLATT III*

*ADMITTED ALSO IN KENTUCKY

OF COUNSEL
HERBERT F NAVILLE
BARRY N BITZECAIO

506 State Street
PO Box 1343
New Albany Indiana 47151 1343
Phone (812) 949 1000
Fax (812) 949 3773
attorneys@lorchnaville com

-800 523-4622-

EXIDE® CORPORATION

678 566 8 07

Daniel Rodes

~~Glenda~~ Williams

Glenna 9629

~~Judy~~ 678-566 9033

July = Judy left company

December 8, 1998

ROBERT D. HUTCHINSON
3021 CHIMNEYWOOD
FLOYD KNOBS IN 47119

1-800-523-9664

OCT-30-

Re: **1999 Pre-Tax Deferral Limits**

The Internal Revenue Service (IRS) deems you to be "highly compensated" in 1999 since your total 1998 gross earnings will total $80,000 or more Since you are included in Exide's "highly compensated" population, we are forced to dictate your level of participation for 1999 in our Exide Salaried Retirement and 401(k) Plan

We, as well as all companies who sponsor qualified retirement plans, are subject to a battery of discrimination testing The only way we can insure passing these tests is to have you consult the chart below and make sure you are not deferring more than the chart allows

If you are able to defer more in 1999, call Dreyfus at 1-800-473-4015 and increase your deferral percentage If you do not call, your 1998 deferral percentage will continue through 1999 as long as it does not exceed the maximum allowable percentage for your birth year

Year of Birth	1998 Maximum Annual Deferral Percentage
1948 and Earlier	10%
1949 – 1958	6%
1959 and Later	4%

Sincerely,
EXIDE CORPORATION

Judith Copeland

Judith A Copeland
Director
Employee Benefits

Current Value Insurance.

ROB. Hayde

609-617 7237

JAC/tmm

645 Penn Street Reading, PA 19601
P O Box 14205 Reading, PA 19612-4205
610/378-0500
www exideworld com/power

EXIDE CORPORATION

February 15, 1999

Mr. Robert D. Hutchinson
3021 Chimneywood
Floyd Knobs, IN 47119

RE: Executive Deferred Compensation Plan
Bonus Deferral for FY 2000

Dear Hutch:

It is time to make your annual election to defer all, none, or a portion of any bonus you may receive during fiscal year 2000.

If you currently have an election on record, it will continue unless I am notified to change it. If you have not elected to defer any portion of your potential bonus, you have a chance to do so by completing the attached "Bonus Deferral Form"

If you are interested in an investment mix change, complete the attached "Change In Investment Election Form" Complete the top half to change the investment fund for future dollars entering the plan and complete the bottom half if you wish to move your existing account balance.

Since this is your first year of election, we do not have a "Election Form" on file for you

All forms must be returned to me by March 24, 1999 As always, please contact me at 818 with any questions

Sincerely,

Judy Copeland

Judith A. Copeland
Director
Employee Benefits

JAC/lm
enclosures

Bonusletter doc/moyer

645 Penn Street Reading, PA 19601
P O Box 14205 Reading, PA 19612-4205
610/378-0500
www.exideworld.com/power

Memo

To ROBERT HUTCHINSON FILE (#27042)
From RPH
Date 11/25/02
Subject [Subject]

I left a message for the attorney for the unsecured creditors in the Excide Corporation case to find out the status of Mr Hutchinson executive deferred compensation plan

End

email to Kirsh
12/4

pre cmpt

EXIDE CORPORATION

DEFERRED COMPENSATION PLAN

* Quarterly Benefit Statement *

Participant	Robert Dorn Hutchinson	Statement Period	January 1, 2000 through March 31, 2000
Social Security Number	274-38-3813	Hire Date	December 31, 1998
Current Vesting in your Deferrals	100%	Current Vesting in Company Contributions	$8,771 66

Your Deferrals(Deferral Account)
Company Contributions(Benefit Adjustment Account)

Investments	Beginning Balance	Salary + Deferrals	Bonus + Deferrals	Current Company + Contribution	Transfer + In/(Out)	Investment +/- Return	= Ending Balance
Aggressive Stock Fund	$2 093 27	$0 00	$0 00	$0 00	$0 00	($12 15)	$2 081 12
Common Stock Fund	$2 101 07	$0 00	$0 00	$0 00	$0 00	$69 39	$2 170 47
Global Fund	$2 270 69	$0 00	$0 00	$0 00	$0 00	$31 31	$2 302 00
Growth Investors Portfolio Fund	$2 148 84	$0 00	$0 00	$0 00	$0 00	$69 23	$2 218 07
Total	**$8,613 87**	**$0 00**	**$0 00**	**$0 00**	**$0 00**	**$157 79**	**$8,771 66**

Note Changes in investment elections may be made by filing an election form at least 30 days prior to the upcoming calendar quarter

EXIDE CORPORATION
DEFERRED COMPENSATION PLAN

*** Quarterly Benefit Statement ***

Statement Period	April 1 2000 through June 30 2000
Participant	Robert Dorn Hutchinson
Social Security Number	274 38 3813
Current Vesting in your Deferrals	100%
Hire Date	12/31/1998

Participant Balance	$0 00
Corporate Balance	$0 00
Vested Balance	$0 00

Your Deferrals(Deferral Account)
Company Contributions(Benefit Adjustment Account)

Investments	Beginning Balance	Salary + Deferrals	Bonus + Deferrals	Current Company + Contribution	Withdrawals/ Distributions	Transfer + In/(Out)	Investment +/- Return	Ending = Balance
Aggressive Stock Fund	$2 081 12	$0 00	$0 00	$0 00	($2 081 12)	$0 00	$0 00	$0 00
Common Stock Fund	$2 170 47	$0 00	$0 00	$0 00	($2 170 47)	$0 00	$0 00	$0 00
Global Fund	$2 302 00	$0 00	$0 00	$0 00	($2 302 00)	$0 00	$0 00	$0 00
Growth Investors Portfolio Fund	$2 218 07	$0 00	$0 00	$0 00	($2,218 07)	$0 00	$0 00	$0 00
Totals	$8 771 66	$0 00	$0 00	$0 00	($8,771 66)	$0 00	$0 00	$0 00

Note Changes in investment elections may be made by filing an election form at least 30 days prior to the upcoming calendar quarter

I DID NOT MAKE ANY WITHDRAWALS
Robert Hutchinson