


UNITED STATES BANKRUPTCY COURT <u>for the</u> DISTRICT OF <u>DELAWARE</u>		PROOF OF CLAIM
Name of Debtor <u>Exide Technologies</u>		Case Number <u>02-11125 (KJC)</u>
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 USC § 503		
Name of Creditor (The person or other entity to whom the debtor owes money or property) <u>Kimberly McKenzie</u>		<input type="checkbox"/> 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. <input checked="" type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.
Name and address where notices should be sent <u>Kimberly McKenzie</u> <u>1526 Arizona</u> <u>Dallas TX 75210</u> Telephone number <u>214/941-5210</u>		
Account or other number by which creditor identifies debtor		Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated _____
<b>1 Basis for Claim</b> <input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input checked="" type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____		
<input type="checkbox"/> Retiree benefits as defined in 11 USC § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Last four digits of SS # _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
<b>2 Date debt was incurred</b>		<b>3 If court judgment, date obtained</b>
<b>4 Total Amount of Claim at Time Case Filed</b> \$ <u>400,000</u> (unsecured) (secured) (priority) (Total) If all or part of your claim is secured or entitled to priority, also complete Item 5 or 7 below <input type="checkbox"/> 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.		
<b>5 Secured Claim</b> <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff) Brief Description of Collateral <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral \$ _____ Amount of arrearage and other charges at time case filed included in secured claim if any \$ _____		<b>7 Unsecured Priority Claim</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim <input type="checkbox"/> 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 USC § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan 11 USC § 507(a)(4) <input type="checkbox"/> Up to \$2,100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 USC § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse former spouse, or child 11 USC § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units 11 USC § 507(a)(8) <input type="checkbox"/> Other - Specify applicable paragraph of 11 USC § 507(a)(____) *Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment
<b>6 Unsecured Nonpriority Claim</b> \$ _____ <input type="checkbox"/> Check this box if a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority		THIS SPACE IS FOR COURT USE ONLY
<b>8 Credits</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.		
<b>9 Supporting Documents</b> 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.		
<b>10 Date-Stamped Copy</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		FILED JUL 14 2004 BMC Exide Technologies  04100
Date <u>7-11-04</u>	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) <u>Kimberly McKenzie Kimberly McKenzie</u>	

12/20/91

EUNICE FIELDS  
3535 GALLAGHER ST  
DALLAS, TX 75212

Dear EUNICEFIELDS,

This letter is to inform you of the test results of soil samples collected by the Environmental Protection Agency (EPA) on your property located at 3535 GALLAGHER ST

The EPA and the Agency for Toxic Substances and Disease Registry (ATSDR) consider the following heavy metal levels in residential soil, to be an unacceptable threat to the public health,

lead	500 ppm
cadmium	30 ppm
arsenic	20 ppm

Our test results show that one or more of the samples taken from your property have heavy metal levels that exceed the above mentioned levels. An EPA representative will be contacting you soon to discuss EPA's plan for cleanup of the contaminated soil in your yard.

Please see the attached information for specific location and values for each sample. If you have any questions pertaining to these sample results from your property, please call Mike Williams at 655-2275 or Vera Henry at 655-3036 or 630-3181.

I greatly appreciate your cooperation during the sampling process on your property and look forward to your continued cooperation during the clean-up of your property.

Sincerely,  
*Warren Zehner*

Warren Zehner  
Senior On-Scene Coordinator

663 654 - 1

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ATTACHMENT

SOIL SAMPLING RESULTS AND LOCATIONS

Samples were taken three inches below the top of the ground from the northern and southern areas of your property

Sample Location -----	Results Parts per Million (ppm) -----		
	Lead	Arsenic	Cadmium
North	585 00	14 90	N
South	354 00	17 70	N

ND - NOT DETECTED