


PROOF OF CLAIM		YOUR CLAIM IS SCHEDULED AS
<b>In re</b> Exide Technologies  <p style="font-size: 1.2em; font-weight: bold;">P268-141731-01</p>	<b>Case Number</b> 02-11125	101730 <b>YOUR CLAIM IS SCHEDULED AS</b> sa42109  UNKNOWN UNSECURED CONTINGENT, DISPUTED, UNLIQUIDATED
<b>NOTE</b> 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.		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. <b>THIS SPACE IS FOR COURT USE ONLY</b>
<b>Name of Creditor and Address:</b>  02209278108532 Elizabeth Maher JACKIE DELONG CLAIM REPRESENTATIVE SEARS C/O HELMSMAN MGMT SVCS INC 1000 PLAZA DRIVE 600 SCHAUMBURG, IL 60173-7908 PO Box 768 MISHAWAKA IN 46546-0768		
<b>Creditor Telephone Number ( )</b> 04-2791584	<b>ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR</b> P268-141731-01	Check here <input type="checkbox"/> replaces or <input type="checkbox"/> amends a previously filed claim dated _____
<b>1 BASIS FOR CLAIM</b> <input checked="" type="checkbox"/> Goods sold <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Services performed <input type="checkbox"/> Taxes <input type="checkbox"/> Wages, salaries and compensation (Fill out below) <input type="checkbox"/> Money loaned <input checked="" type="checkbox"/> Other (describe briefly) <i>Battery leaked acid, exploded</i> Your social security number _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
<b>2 DATE DEBT WAS INCURRED</b> 6-09-2003 <b>3 IF COURT JUDGMENT, DATE OBTAINED</b> _____		
<b>4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE</b> \$ 5571.81 \$ _____ \$ _____ \$ _____ (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. <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 above, if any \$ _____	<b>6 UNSECURED PRIORITY CLAIM</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim. 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 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 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 U.S.C. § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) _____ <small>*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.</small>	
<b>7 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>8 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>9 DATE-STAMPED COPY</b> 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.		<b>THIS SPACE FOR COURT USE ONLY</b> <div style="text-align: center; font-size: 1.5em; font-weight: bold;">FILED</div> <div style="text-align: center; font-size: 1.2em;">AUG 04 2004</div> <div style="text-align: center; font-size: 1.5em; font-weight: bold;">BMC</div> <div style="text-align: center; font-size: 0.8em;">Exide Technologies</div> <div style="text-align: center;">   04659 </div>
<b>BY MAIL TO:</b> Exide Technologies et al c/o Bankruptcy Management Corporation PO Box 1063 El Segundo, CA 90245 - 1063	<b>BY HAND OR OVERNIGHT DELIVERY TO:</b> Exide Technologies et al c/o Bankruptcy Management Corporation 1330 East Franklin Ave El Segundo, CA 90245	
<b>DATE SIGNED</b> 7/29/2004	<b>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)</b> Elizabeth Maher for Helmsman Management Services	

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

PAGE 01  
INSD SEARS ROEBUCK AND CO  
CLMT BEERS, JOHN

CHECK LIST (CK)  
DOL 06/09/2003 CLAIM NO P 268-141731-01 HOD  
CLAIM STATUS O

SPEC CLM SERV H

SV NO	CH/EFT NO	PAYEE	PYMT AMT	ISSUE DATE	T/C ST	PR ST	RV ST	R/R ST	ID
002	00154184	JOHN BEERS	5571 81	10/23/2003			00		C268B09
001	00151710	PDA INC	88 00	09/02/2003			00		C268B12

SKIP TO DATE

ENTER SV NO AND  
SP CMSP R+C CMR+C STATUS STOP PRINT DISPLAY CORR MENU  
R/R ST MESSAGE

SCREEN SUFFIX REMARKS Y ID A499B10

S

1000 Plaza Dr  
Suite 600  
Schaumburg, Illinois 60173-7900  
Telephone 800-811-8175  
Fax 847-517-2540



Helmsman  
Management  
Services, Inc

Claim No. P268-141731-01

### RELEASE AND INDEMNITY AGREEMENT

For and in consideration of the sum of \$5571.81 to me/us in hand paid, I/we, John Beers, my/our heirs, executors, administrators and assigns, fully and forever release and discharge Sears, Roebuck and Co and Liberty Mutual, Exide and all other persons, firms and corporations from any and all claims, demands, actions or causes of action which I may have against them or any of them, by reason of any damages or injuries whatsoever sustained by me/us as the result of an accident occurring on or about 06/09/2003 <sup>near</sup> at the Sears Store Unit 6819 in City Of Industry, CA 91748 <sub>JNB</sub>

It is understood and agreed that this settlement is in compromise of a disputed claim where liability or fault is not admitted and is to include any and all injuries, disability, damage to person or property, and the consequences thereof, whether known or unknown, foreseen or unforeseen, and whether the same may be latent or may hereafter appear, develop or occur as a result of said accident. Also, in consideration of the settlement herein agreed to, I/we expressly waive all rights under **Section 1542 of the Civil Code of California** which is referred to below.

Further, the undersigned will discharge, defend, indemnify and hold harmless the Releases from any and all claims, demands, liens, known or unknown to either party hereto, of every kind or character which may ever be asserted by reason of said injuries, illness, disease, or the effects or consequences thereof, or damage to property or person, and any and all claims made by any person or entity under the Worker's Compensation Act, The Federal Medical Recovery Act or any other class or benefits paid to or payable to the undersigned or their representatives or attorneys.

I/we further state that I/we have carefully read the foregoing release and **Section 1542 of the Civil Code of California** and know the contents of it, and sign the same as my/our own free act. Witness my/our hand on this 15 day of October, <sup>2003</sup> ~~19~~ in the presence of

Harold Clark  
Witness

20573 E Missionary Ridge, Walnut CA  
Address

George W. [Signature]  
Witness

20570 Missionary Ridge Walnut, 91789  
Address

JNB  
Claimant Name

State of \_\_\_\_\_, County of \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me appeared \_\_\_\_\_ to me personally known and who acknowledge the execution of the foregoing instrument as his/her own free act and deed, for the consideration set forth in it.

My commission expires \_\_\_\_\_, 19\_\_

\_\_\_\_\_  
Notary Public

**Civil Code of California - Section 1542** A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor.

S

**CLAIM - JOHN N BEERS      D/L 06/09/03**  
**P 268-141731-01**

ITEM	COST	TOTAL
Disassemble front end, neutralize acid (Stuttgart Auto)	\$436 23	
Labor & material to neutralize acid, treat concrete to prevent powdering of premises garage floor and driveway (claimant)	\$240 00	
Replacement trunk carpet (Performance Products)	\$190 40	
Labor and travel expense to locate, pick up, purchase & install carpet (claimant)	\$ 90 00	
Estimate to repair dent in trunk lid, repaint this and acid affected areas (Autohahn auto Body)	\$1,267 40	
Labor and travel expense to visit numerous repair shops to obtain the repair estimate (claimant)	\$125 00	
Diminution of value - A significant asset of this auto was the presence of factory paint in excellent condition. The existence of non-factory paint on a significant area of the auto now lessens its value to a serious Porsche buyer in comparison to an identical auto with excellent condition factory paint.	\$3,000 00	
<b>TOTAL CLAIM</b>		<b>\$5,349 03</b>

5

CUSTOMER INFORMATION  
Name : BEERS JOHN  
20579 MISSIONARY RIDGE RD  
WALNUT, CA 91789-3529  
H-Phone: (909)598-5379  
W-Phone: (000)000-0000 Ext:0000

VEHICLE INFORMATION  
Year/Make/Model/Engine:  
1981 PORSCHE 911 Series  
License : 9095379 Color :  
Mileage In : 0 Received:  
Mileage Out: 6/24/96 13:51  
Vin No. :  
Location:

OWNER CONTACTED IN PERSON BY PHONE TAG  
DATE TIME PHONE NO ASSOC  
INITIAL ESTIMATE REVISED ESTIMATE REFERENCE NUMBER  
84.99P 0.00L CWO0133426  
84.99T AUTHORIZATION  
X *W Beer*

Promised Time: 06/24/96 01:50P \*WAITING\*

CUSTOMER COMMENTS/REASON FOR BRINGING VEHICLE IN  
CUSTOMER REQUEST NEW BATTERY  
0941  
02200274250007662901345580  
1

STORE ADDRESS  
1552 AZUSA AVENUE (818)839-7228  
CITY OF INDUSTRY, CA 91748  
EPA#CAD077254217 Store#01598  
MOTOR VEHICLE REPAIR NO AK041511

COMMENTS

GROUP 48 - 700CCA/850CA  
- RESERVE MIN. = 110  
'DIMENSIONS LxWxH = 11  
15/16 x 6 7/8 x 6 7/8  
ALIGNMENT/BRAKES/SHOCKS  
AND TIRE SERVICES WITH  
PROFESSIONAL INSTALLATION  
ON EVERYTHING WE SELL  
Warranty Information  
36249 Comes with 72 Months of Warranty Coverage  
If Found Defective During the First 18 Months it is  
Replaced Free, After the First 18 and Up To  
72 Months the Battery is Pro-rated on Months Used

NOTICE Applying tires to your vehicle with a lower speed rating than the original equipment tire on your vehicle is not recommended and may change the handling and performance of the vehicle. Your vehicle should not be operated at speeds in excess of the replacement tire.  
Customer Initials  
I understand that All mag wheel lug nuts must be re-torqued after 25 miles and checked periodically.  
Customer Initials

The following parts and or labor have been installed or performed on your vehicle.

Quantity Stock # Parts Description Price Ext Quantity Code Labor Description Tech Price Ext  
All parts new unless otherwise specified.

\*\*SAVE \* 10% OFF A BATTERY PKG 0.00 0.00  
\* WITH THIS RECEIPT. 0.00 0.00

1 22836249 BATTERY, DH INTERNATL GRP 49 106.99 106.99  
1 56 TRADE IN ALLOWANCE -7.00 -7.00  
1 55 ALLOWANCE -15.00 -15.00

ORIGINAL (EXPLODED) BATTERY  
PURCHASE  
06/24/96

BATTERY PACKAGE INCLUDES  
We will check for proper installation of battery, perform a PASS or FAIL electrical test, clean cable ends, spray all parts

MARKS  
WHEEL LOCK POSITION TIRES AS SHOWN  
RF RR  
LF LR

Handwritten notes and signatures. Includes a large signature 'W Beer' and a date '06/24/96'. There is also a barcode on the right side.

# SEARS

## Auto Center

visit sears.com

<b>CUSTOMER INFORMATION</b>		<b>TAG #</b> 1	<b>VEHICLE INFORMATION</b> YEAR MAKE MODEL		<b>INITIAL ESTIMATE</b>	<b>REVISED ESTIMATE</b>	<b>CREATED BY</b>
NAME ADDRESS CITY/ST/ZIP HOME PHONE			VEHICLE # LICENSE # VIN LOCATION TIME IN TIME OUT ODOMETER IN ODOMETER OUT		PARTS LABOR OTHER TAX TOTAL		INVOICED BY
<b>STORE INFORMATION</b>					DATE/TIME OF ESTIMATE	DATE/TIME OF REVISED	PAYMENT TYPE
WAITING DROP OFF PROMISED TIME			TIRE INSTALLATION INSTRUCTIONS LF RF SP BW WW Y LR RR SAVE OLD TIRES Y ROWL N		PHONE AUTHORIZATION <input type="checkbox"/>	PHONE NUMBER CAL	CASH <input type="checkbox"/> CREDIT <input type="checkbox"/> CHECK <input type="checkbox"/>
<b>REFERENCE NUMBER</b> PRINTED ON					CONTACTED BY DATE TIME		
<b>CUSTOMER COMMENTS</b> VEHICLE USED BIGGER SIZE TIRE		<b>AIR PRESSURE FRONT / REAR</b> <b>WHL TORQUE SPECIFICATION</b>				<b>See reverse for important warranty terms and other information</b>	
						<b>CUSTOMER WORK AUTHORIZATION</b> X	
QTY	ITEM #	DESCRIPTION OF MERCHANDISE	PRICE EA	EXTENSION	TECH		
1	22831249	BATTERY 12V 45AH	\$60.00	\$60.00			
<b>REPLACEMENT FOR EXPLODED BATTERY</b> <b>06/10/03</b>							
<b>ALL NEW NON OEM PARTS UNLESS OTHERWISE SPECIFIED</b>							
<b>ITEM / WARRANTY INFORMATION / CSA COMMENTS / TECHNICIAN COMMENTS</b>							
27/05/03 28/04/03 ALL LOC NOTE ON CUSTOMER AND ALL WHEELS MUST BE RE-TORQUED AFTER 25 MILES AND CHECKED PERIODICALLY TECH COMMENTS 22831249 BATT'S and PC'S are determined in accordance with industry standards at the time of manufacture. BATT'S INCLUDE A COPE VALUE AND ARE ASSIGNED TO BE USED ON STATE REG. VEHICLES 22831249 18 Months Full Replacement Warranty - 72 Months Prorated Warranty							

*[Signature]*

# SEARS

HIEP PHAM  
AUTO CENTER MANAGER

SEARS ROEBUCK AND CO  
Sears Auto Center  
1552 Azusa Ave  
City Of Industry CA 91748

SEARS AUTOMOTIVE GROUP

626 839 7228  
626 839 7247  
Pager  
Email



*Thank you for the opportunity to serve you*  
Our goal is to provide Fast, Expert Service  
Please keep us in mind for your future automotive need  
We are America's #1 Tire Store

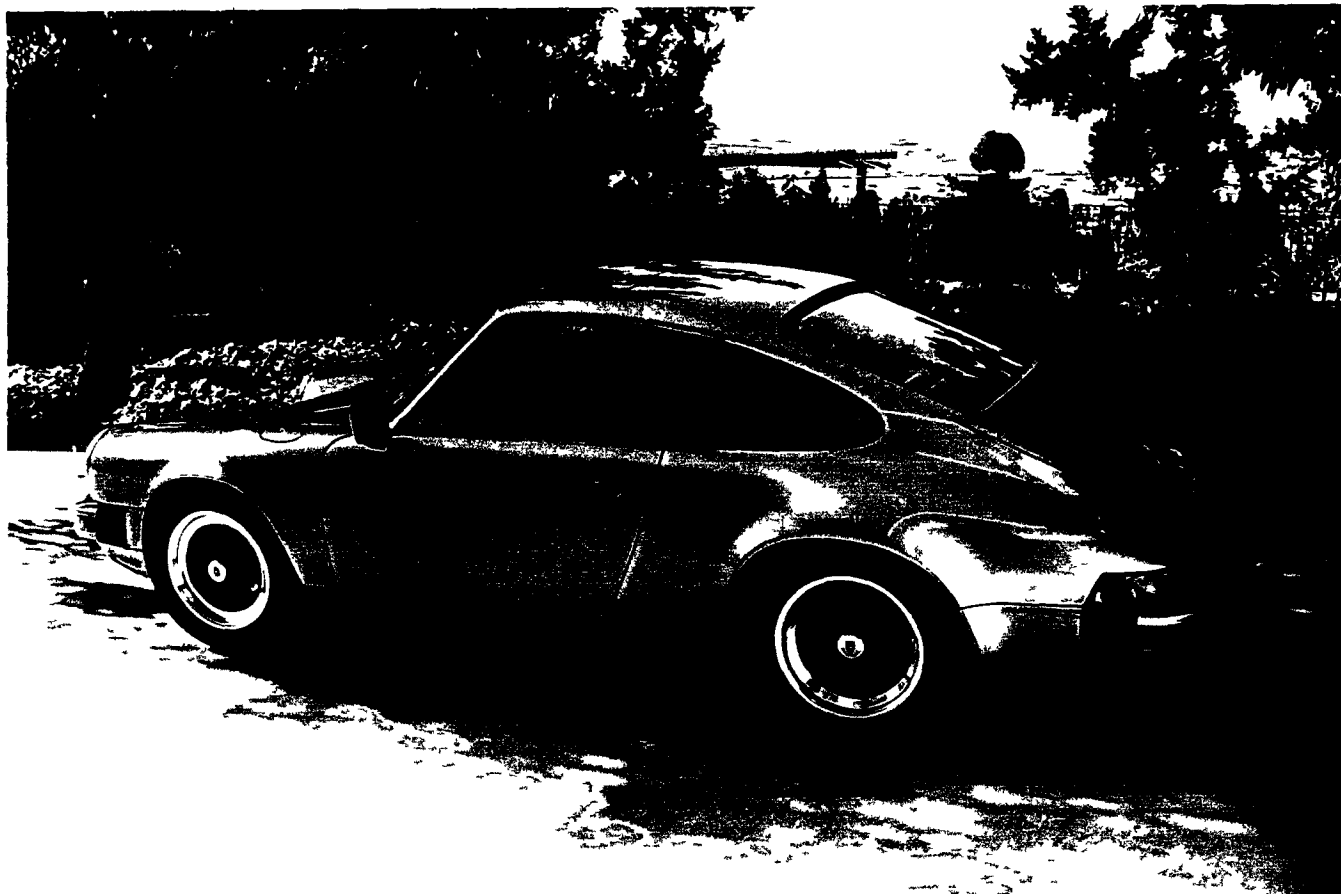
RETURN OLD PARTS TO CUSTOMER ☒ Y ☐ N

YOU ARE ENTITLED TO RECEIVE REPLACED AND REMOVED PARTS, OTHER THAN EXCHANGED OR WARRANTED PARTS WHICH WILL BE AVAILABLE FOR YOUR INSPECT TO OBTAIN FULL WARRANTY BENEFITS, YOU MUST PRESENT YOUR RECEIPT AND THE DEFECTIVE PRODUCT OR THE VEHICLE ON WHICH THE SERVICE WAS PERFORM

17451 National (Rev 11/02)

CUSTOMER COPY

#1



A

EARLIER PHOTOS OF UNDAMAGED PORSCHE



B

S

#2



A

CONDITIONS UPON DISCOVERY



B

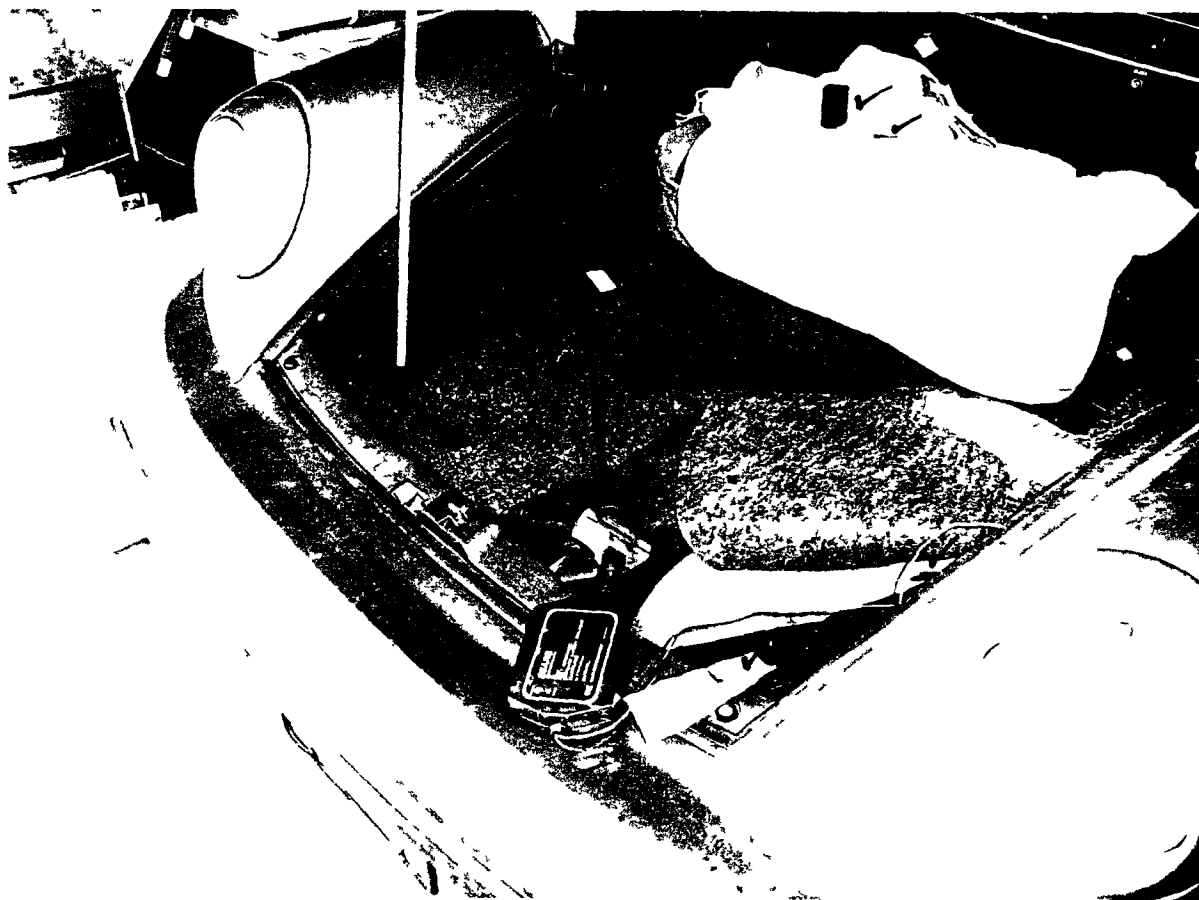
S



#3



A

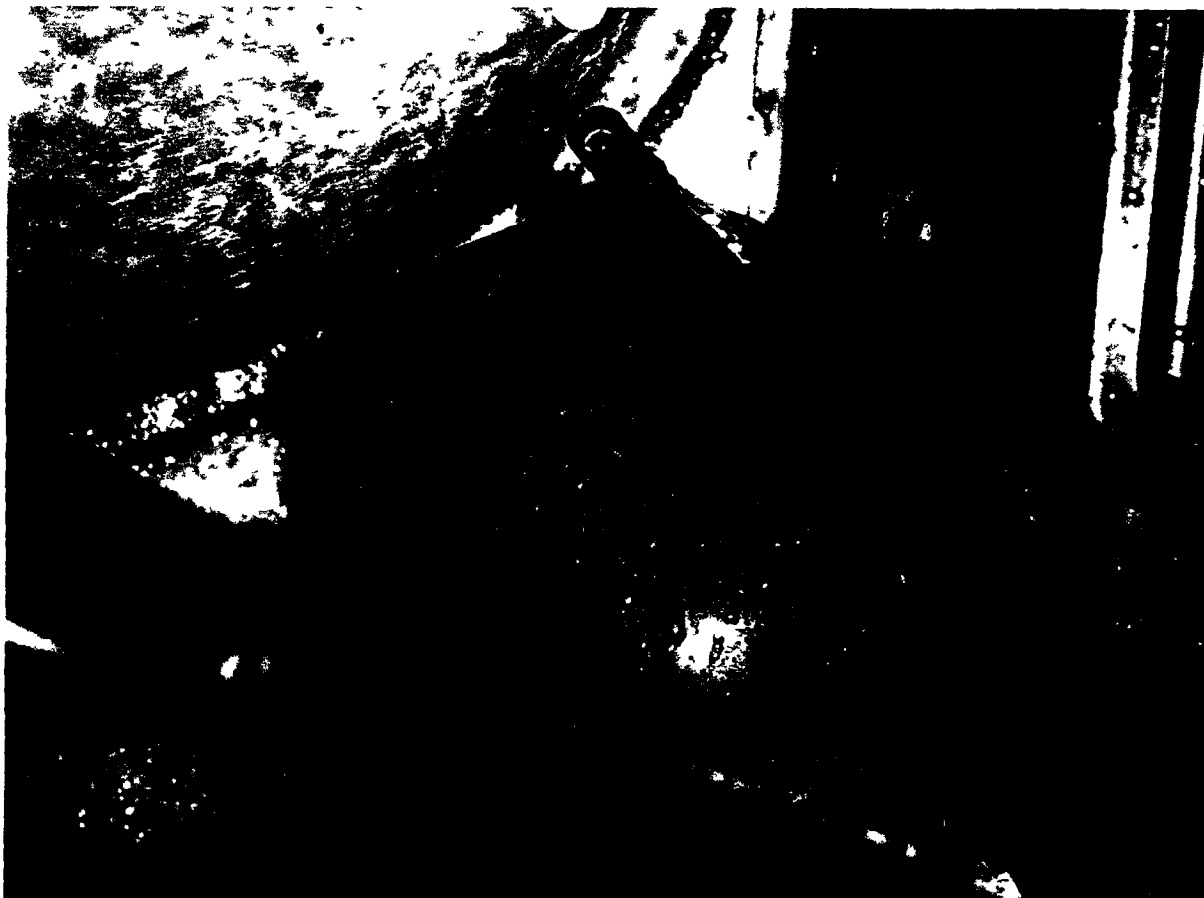


SCATTERED  
BATTERY  
PIECES ✓

B

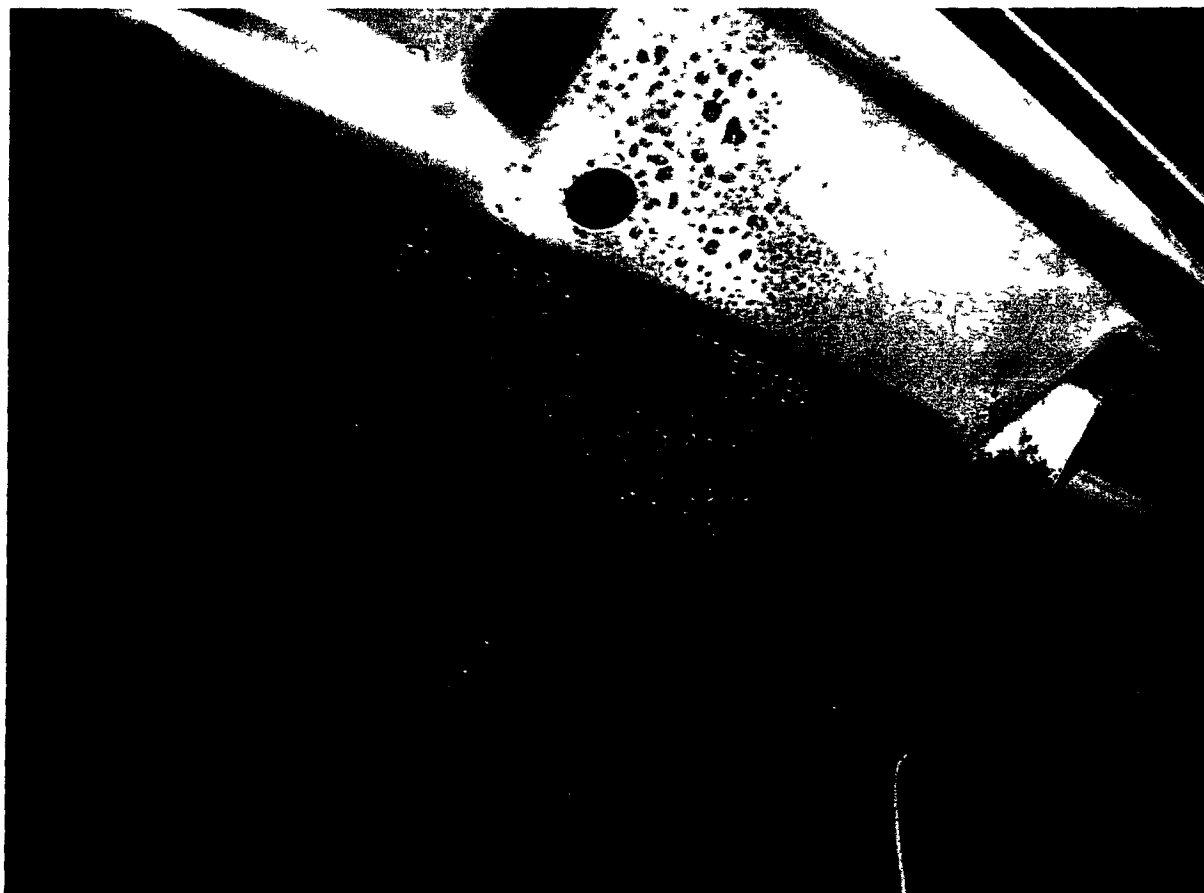
S

#4



A

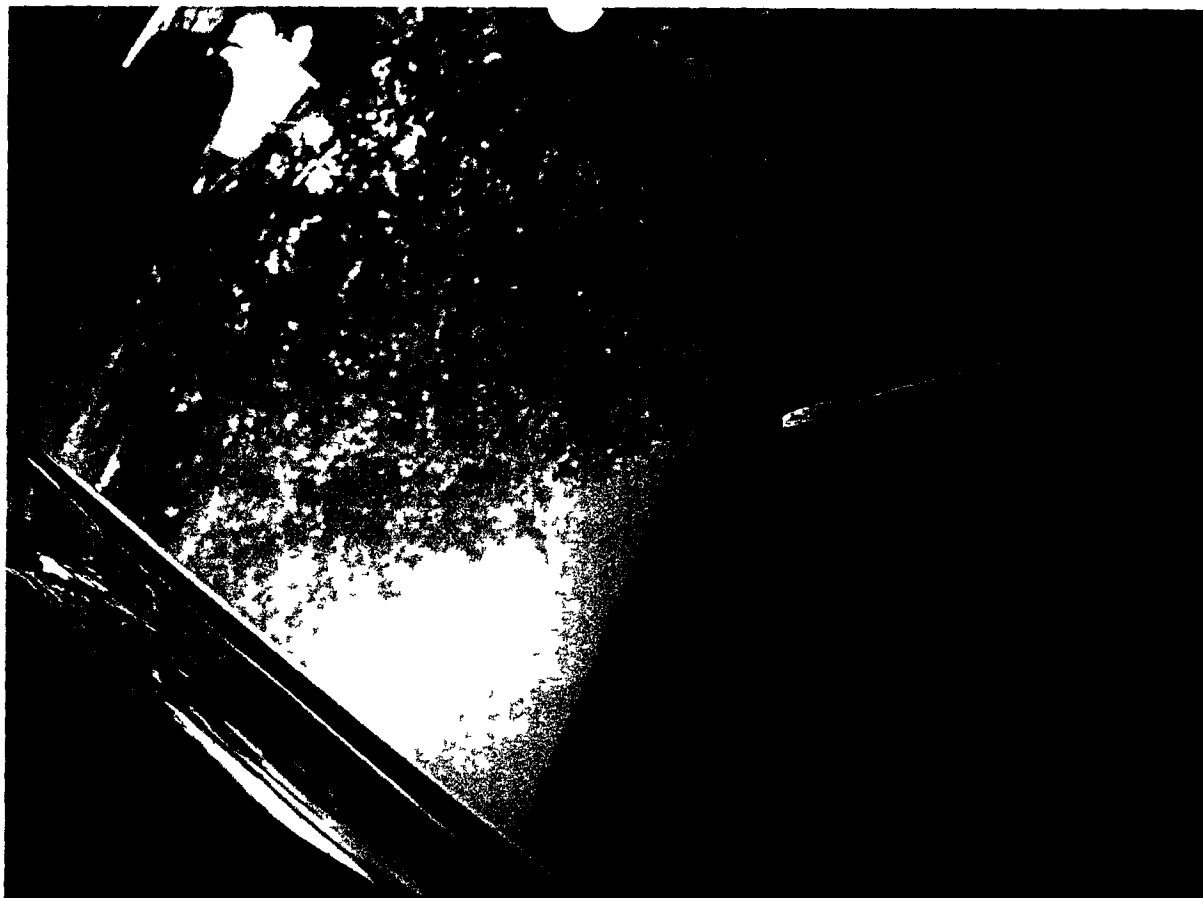
PARTIAL DISTRIBUTION OF ACID



B

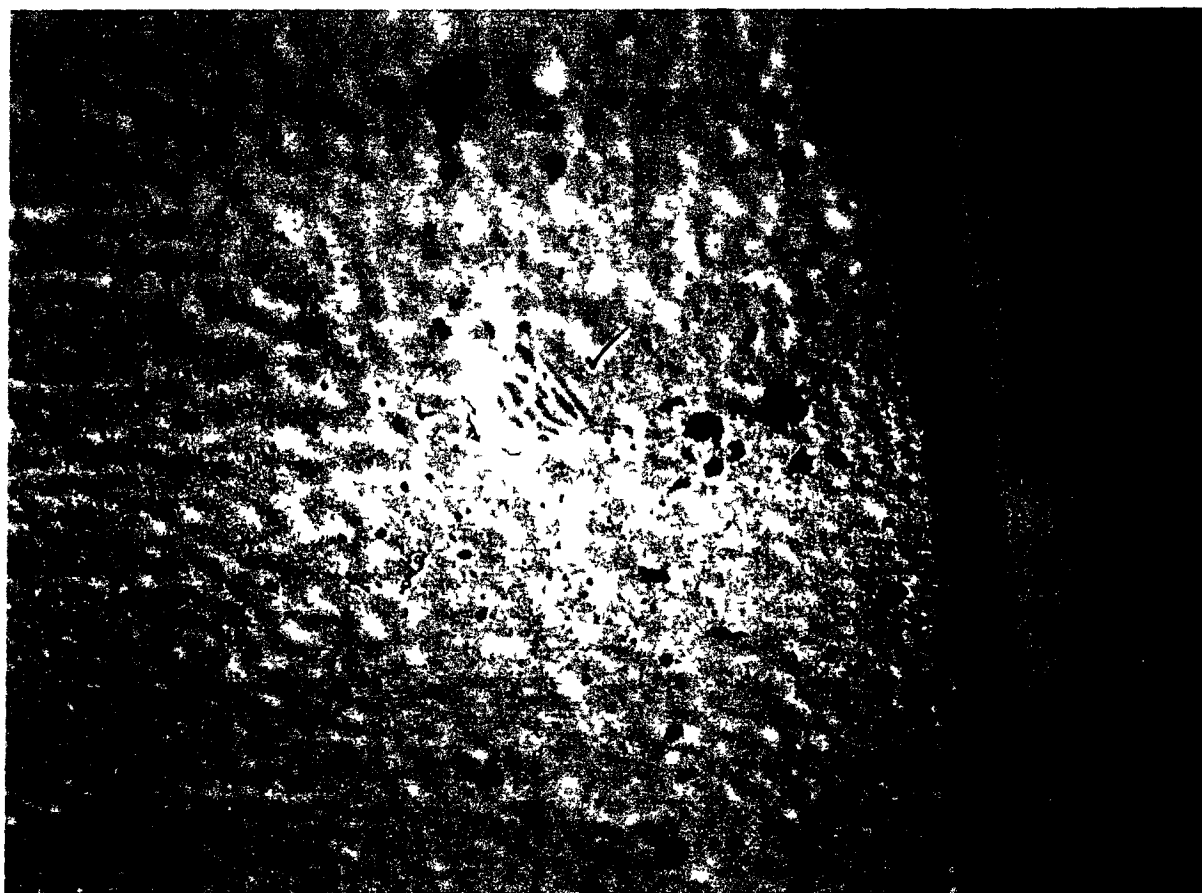
S

#5



DENT IN  
TRUNK LID  
✓

A

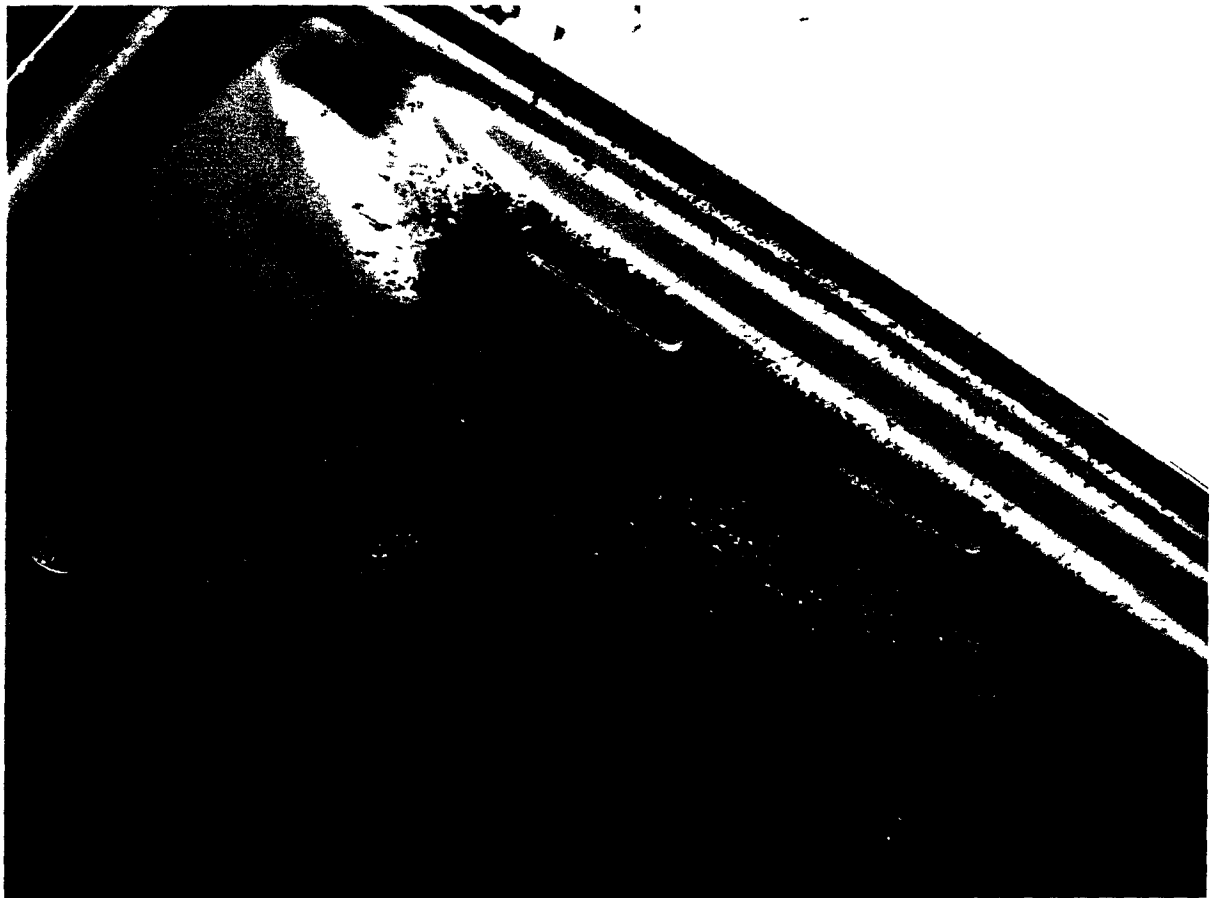


CORRESPOND-  
ING DENT  
IN UNDERSIDE  
OF LID

B

S

#6



ACID  
DAMAGE  
TO UNDER-  
SIDE OF  
TRUNK LID

A



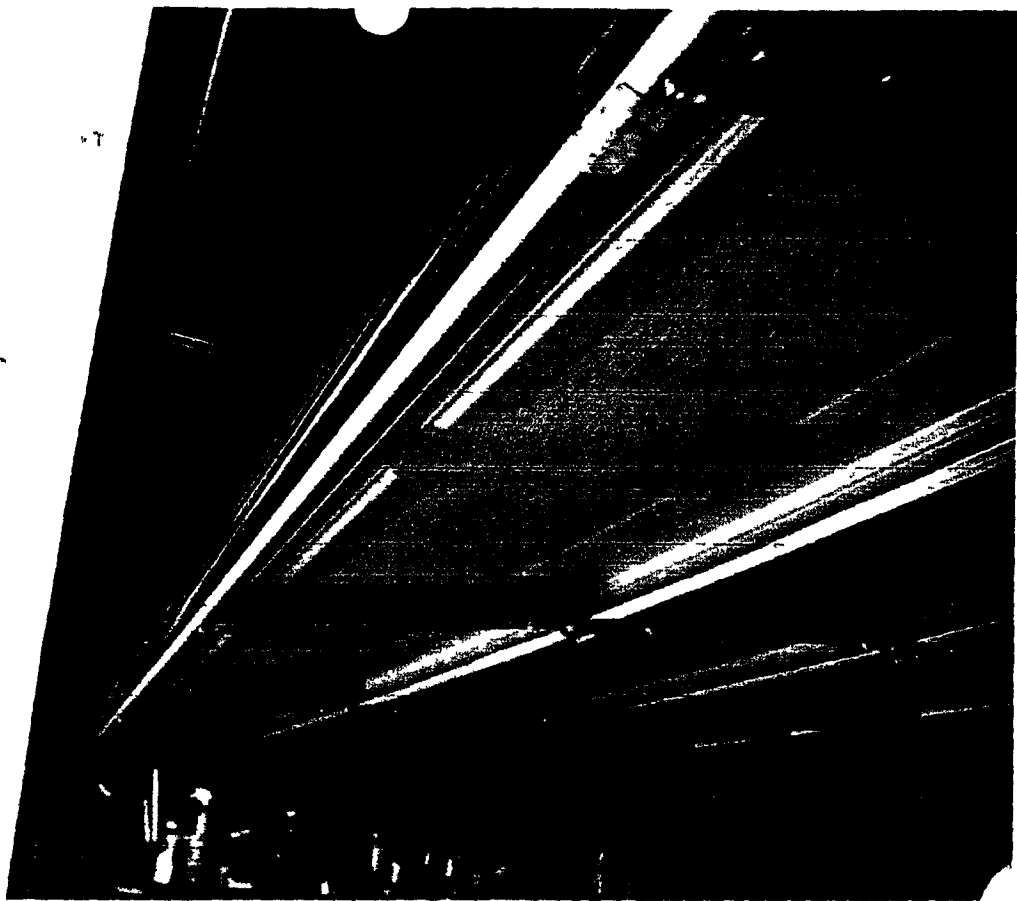
ACID  
DAMAGE TO  
LEFT FENDER

✓

S

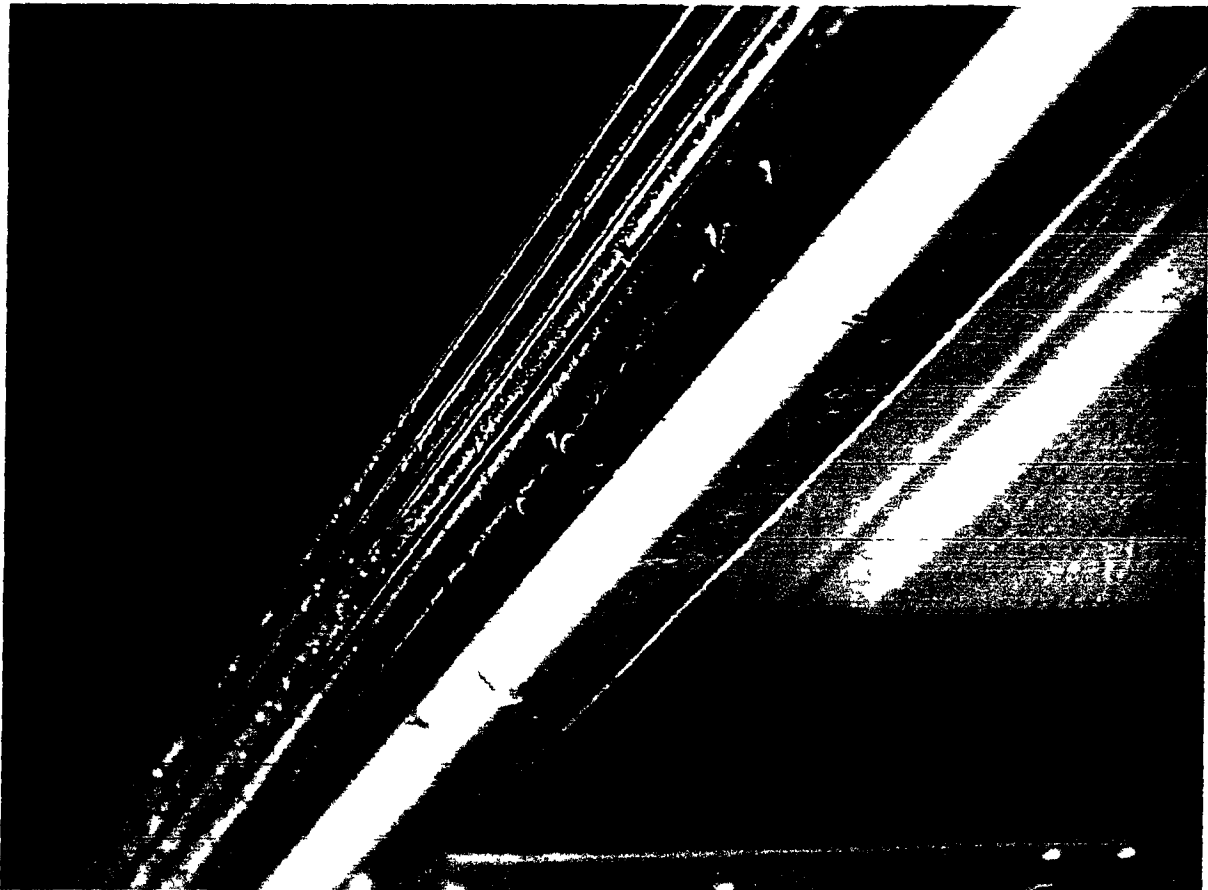
B

#7



UNDERSIDE  
OF GARAGE  
DOOR - ACID  
DRIPPING

A

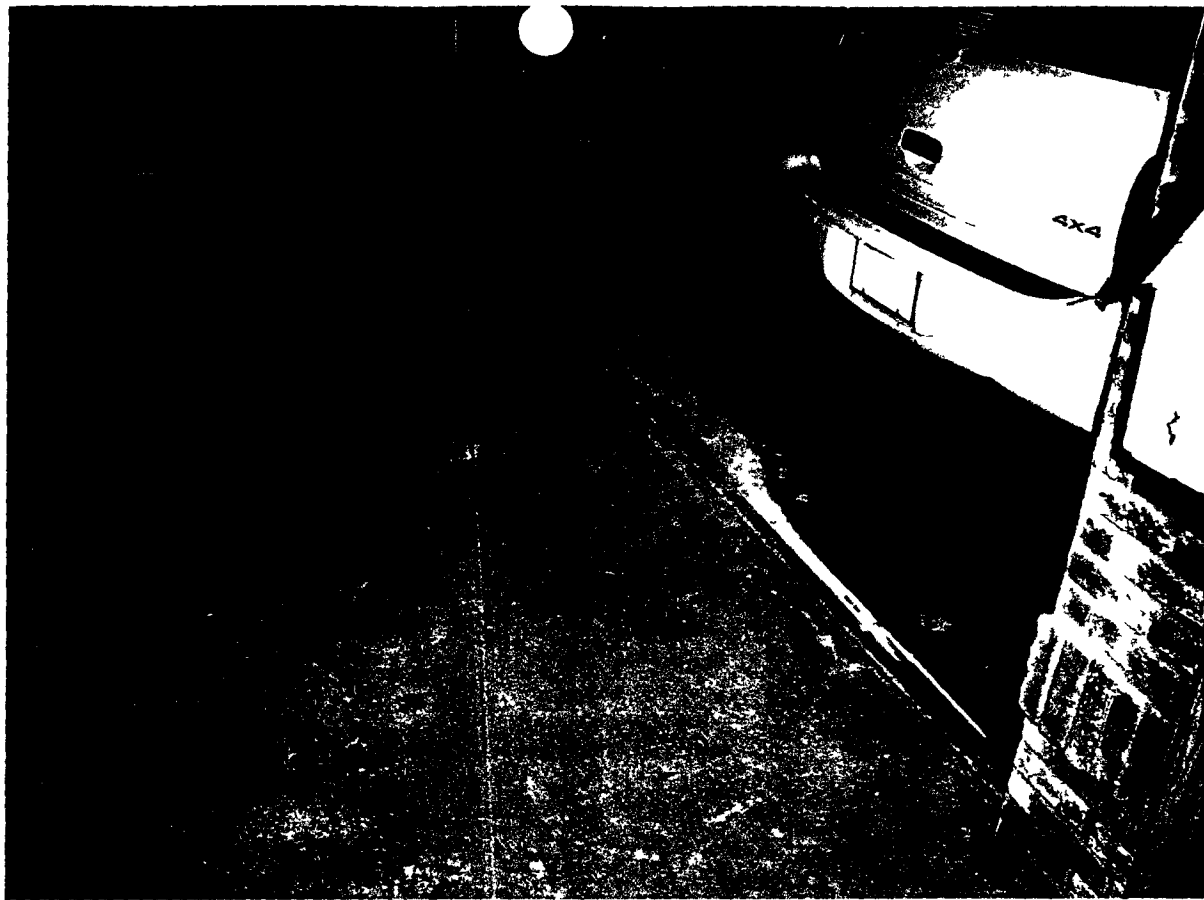


CLOSEUP  
OF #7A

B

S

#8



FLOOR  
DURING  
WIRE BRUSH  
CLEANING

A

S

E-MAIL stuttgartsvc@earthlink.net  
**STUTTGART**  
 Automobile Service

06/25/2003

\*\*\*\* R.O #2600 of Estimate #2908 - Original \*\*\*\*

Page 1 of 1

Customer	NICK BEERS	License Number	1EDV045
Address	20579 MISSIONARY RIDGE	Current Mileage	18757
City/State/Zip		VIN	91A0142284
Home Phone	909 3985379	Engine	
Work Phone		Prod Date	03/80
Cellular Phone	909 9644001	Color	BLUE
Year/Make/Model	1980 PORSCHE 911	Next Service	06/25/2003 - 22757
Service Writer			

State License CA

**LABOR COMPLETED**

DESCRIPTION	TECH.	TOTAL
BATTERY EXPLODED IN TRUNK	CMG	61 89
ELECTRIC SISTEM TEST,,, THERE IS NO FOULT WITH CHARGING SISTEM OF CAR,,RECOMEND TO		
REMOVE GAS TANK AND ACCESORIES UNDER HOOD TO NEUTRALIZE BATTERY ACID		
REMOVE GAS TANK AND TRUNK ACCESSORIES	GON	371 34
NEUTRALISE BATTERY ACID		

Original Estimate \$0 00

PAYMENTS	TOTAL
TOTAL Parts	0 00
TOTAL Labor	433 23
TOTAL Fluids	0 00
TOTAL Sublet	0 00
TOTAL Misc Parts	0 00
TOTAL Other	0 00
TOTAL Haz Waste	3 00
TOTAL Var 1	0 00
TOTAL Var 2	0 00
SUBTOTAL	436 23
TAX	0 00
<b>** TOTAL DUE **</b>	<b>436 23</b>

SIGNATURE ACKNOWLEDGES RECEIPT OF VEHICLE X \_\_\_\_\_

8000 Haskell Avenue, Van Nuys, California 91406

The Direct Source for  
Restoration Maintenance  
and Enhancement Since 1964

2234 : 3

**TOLL FREE 1-800-752-6268 • FAX 1-818-787-2396 (24 HOURS)**  
**FOREIGN AND LOCAL 1-818-787-7500**

SH ☐ CHARGE ☐ DATE 07/22/02

JOHN BEEPS

20579 MISSIONARY RIDGE

WALNUT, CA 91789

17642

**L Legal in CA ONLY for racing vehicles which may NEVER be used upon the highway**  
**N Non returnable**  
**O - May not be legal in some states Sold for off road use only**

**S**

JOHN PEEKS

1

20579 MISSIONARY RIDGE

P

WALNUT, CA 91789

T

9097596-5379

0

## ATTENTION

EN BY JAN	CUSTOMER ORDER NO & DATE	SHIPPED VIA FL	FOB	INVOICE NO E297915
--------------	--------------------------	-------------------	-----	-----------------------

SUB TOTAL	175 90
TAX	14 50
TOTAL	190 40

THANK YOU

**PLEASE KEEP THIS RECEIPT THIS IS YOUR ONLY RECORD FOR PRESENTING PROOF OF PURCHASE FOR WARRANTY AND RETURNS**

RECEIVED BY

DATE \_\_\_\_\_



CD LOG NO 7874-1 DATE 07/09/03

SHOP AUTOBAHN AUTOBODY INSP DATE 07/09/03  
ADDRESS 1107 BAKER STREET CONTACT GREG GAMBOA  
CITY STATE COSTA MESA, CA PHONE 1 (714) 641-1107  
ZIP 92626- FAX (714) 557-3712

OWNER BEERS, J.N WORK PHONE (714) 851-5810  
ADDRESS 20571 MISSIONARY RIDGE  
CITY STATE WALNUT, CA  
ZIP. 91780-

CLAIM# 75-A687-68901 TYPE OF LOSS LIABILITY/SERVICE  
LOSS DATE 07/09/03 FIRST  
POINT OF IMPACT 3

LIC# STATE VIN 91A0142284  
BODY COLOR BLUE MILEAGE  
CONDITION: ACCTNG CTL#

\*=USER-ENTERED VALUE E=NEW PART NG=REPLACE NAGS  
EC=QUALITY REPLACEMENT PART UC=RECONDITIONED PRT  
UM=REMAN/REBUILT PRT EU=QUALITY RECYCLED PART EP=SEE PX REPORT  
PC=PXN RECONDITIONED PM=PXN REMAN/REBUILT TE=PART/PARTIAL REPLACE  
ET=LABOR/PARTIAL REPLACE IT=LABOR/PARTIAL REPAIR I=REPAIR  
L=REFINISH BR=BLEND REFINISH TT=TWO-TONE  
CG=CHIPGUARD SB=SUBLET N=ADDITIONAL OPERATION  
RI=R&I ASSEMBLY P=CHECK AA=APPEARANCE ALLOWANCE  
RP=RELATED PRIOR DAMAGE UP=UNRELATED PRIOR DAMAGE

1980 PORSCHE 911SC STD 2DOOR COUPE 6CYL GASOLINE 3 0  
CODE 75212A/A OPTNS I/24

OPTIONS

TWO-STAGE - EXTERIOR SURFACES

TWO-STAGE - INTERIOR SURFACES

OP	GDE	MC	DESCRIPTION	MFG	PART NO.	PRICE	AJ%	B%	HOURS	R
---	---	---	-----	---	-----	-----	---	---	-----	---
N	0040		FRONT BUMPER ASSY R&I		ADDITIONAL OPERAT				0 8 1	
L	0047	13	DOOR, HEADLAMP	LT	REFINISH				1.0 4	
					0.3 SURFACE					
					0.6 TWO STAGE SETUP					
					0 1 TWO STAGE					
RI	0057		PARKLAMP ASSEMBLY	LT	R&I ASSEMBLY				0.2 1	
I	0083		PANEL, HOOD		REPAIR				4 5*1	
			INNER AND OUTER							
L	0083		PANEL, HOOD		REFINISH				4 2 4	
					3 5 SURFACE					
					0.7 TWO STAGE					

1980 PORSCHE 911SC STD 2DOOR COUPE  
CD LOG NO 7874-1

RI 0083	HOOD PANEL R & I	R&I ASSEMBLY		0 8 1
I 0103	FENDER, FRONT	LT REPAIR		1.0*1
L 0103	FENDER, FRONT	LT REFINISH		2 3 4
		1.9 SURFACE		
		0 4 TWO STAGE		
BR 0111	DOOR, FUEL FILLER	LT BLEND REFINISH		0 2 4
		0 1 BLEND		
		0 1 TWO STAGE		
E 0114	BEADING, FRONT FENDE	LT 90150339422	3 87	1 5 1
SB M14	CORROSION PROTECTION	SUBLET REPAIR	3 00*	0.3*1*
N M15	COLOR TINT	ADDITIONAL OPERAT		0 5*1*
SB M17	COVER CAR EXTERIOR	SUBLET REPAIR	10 00*	0.5*1*
N M58	CLEAN FOR DELIVERY	ADDITIONAL OPERAT		0 3*1
SB M60	HAZARD, WSTE. REM.	SUBLET REPAIR	3.00*	1
N M66	COLOR, SAND & BUFF	ADDITIONAL OPERAT		1 0*1*
N	DETRIM FRT TRUNK	ADDITIONAL OPERAT		4 0*1*
L	DETRIM FRT TRUNK	REFINISH		3 5*4*
	INNER SPARE TIRE WELL			

18 ITEMS

MC MESSAGE(S)

13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

FINAL CALCULATIONS & ENTRIES

GROSS PARTS				3.87
PAINT MATERIAL				268 80
PARTS TOTAL				272.67
TAX ON PARTS & MATERIAL @			7 750%	21.13
LABOR	RATE	REPLACE HRS	REPAIR HRS	
1-SHEET METAL	36 00	2 5	12.9	554.40
2-MECH/ELEC	55.00			
3-FRAME	45 00			
4-REFINISH	36 00	11 2		403 20
5-PAINT MATERIAL	24 00			
LABOR TOTAL				957 60
TAX ON LABOR			0.000%	
SUBLET REPAIRS				16 00
TOWING				
STORAGE				
GROSS TOTAL				1,267 40
NET TOTAL				1,267.40

ADP SHOPLINK U0939 ES CD LOG 7874-1 DATE 07/09/03 12.00 08AM R6.3 CD 05/03  
PXN Y/00/00/00/00/00 CUM 00/00/00/00/00 GEOCODE 90626  
HOST LOG  
(C) 1998 - 2002 ADP CLAIMS SOLUTIONS GROUP, INC.

1 9 HRS WERE ADDED TO THIS EST. BASED ON ADP TWO-STAGE REFINISH FORMULA.

DATE 8/21/03 08 08 AM  
ESTIMATE ID 3080167  
ESTIMATE VERSION 0  
COMMITTED  
PROFILE ID BODY SHOP RETAIL

### Property Damage Appraisers

E MAIL PDA574@ADELPHIA NET P O BOX 2063 LA HABRA HEIGHT CA 90631  
(562) 691 4097  
FAX (562) 691-6097

\*\*\*\*\*  
\* NO SUPPLEMENTS WILL BE HONORED WITHOUT \*  
\* PRIOR INSPECTION BY PROPERTY DAMAGE APPRAISERS \*  
\*\*\*\*\*

DAMAGE ASSESSED BY AGUSTIN SILVA

APPRAISED FOR DOLORES LAUSCHKE  
(800) 811-8175 EXT 2191

CONDITION CODE	EXCELLENT	TYPE OF LOSS	OTHER
DATE OF LOSS	8/ 9/03	ACCIDENT DATE	8/ 9/03
CONTACT DATE	8/20/03	DEDUCTIBLE	UNKNOWN
PAYER	INSURANCE	CLAIM NUMBER	P268-141731-01
FILE NUMBER	3080167		
POLICY NO	N/A		
INSURED	SEARS ROEBUCK & CO		
CLAIMANT	JOHN BEERS		
ADDRESS	20579 MISSIONARY RIDGE ST WALNUT CA 91789		
TELEPHONE	HOME PHONE (909) 598-5379		

MITCHELL SERVICE 913312

DESCRIPTION	1980 PORSCHE 911 SC	VEHICLE PRODUCTION DATE	3/80
BODY STYLE	2D CPE	DRIVE TRAIN	
VIN	91A0142284	LICENSE	1EDV045 CA
MILEAGE	18 982	SEARCH CODE	NONE
OEM/ALT	A		
COLOR	BLUE ENAMEL		
OPTIONS	AIR CONDITIONING AM FM STEREO CASSETTE 2 DOOR		

LINE ITEM	ENTRY NUMBER	LABOR TYPE	OPERATION	LINE ITEM DESCRIPTION	PART TYPE/ PART NUMBER	DOLLAR AMOUNT	LABOR UNITS
1	301100	BDY	REMOVE/INSTALL	FRT BUMPER ASSY			1 2 #
2	301690	BDY	CHECK/ADJUST	HEADLAMPS			0 4
3	301710	REF	REFINISH	L HEADLAMP DOOR			C 0 5
4	301840	BDY	REMOVE/INSTALL	L H/LAMP HOUSING	EXISTING		1 0*
5	302930	REF	REFINISH	HOOD UNDERSIDE			C 1 3
6	302960	BDY	REMOVE/INSTALL	HOOD ASSY			0 8
7	303000	BDY	REPAIR	HOOD PANEL	EXISTING		4 0* #
8	AUTO	REF	REFINISH	HOOD OUTSIDE			C 2 6
9				INCL OUTER AND INNER			
10	303020	BDY	REMOVE/REPLACE	HOOD EMBLEM	901 559 210 20	40 16	0 2
11	303440	REF	REFINISH	L LAMP HOUSING			C 0 5 #
12	900500	BDY*	REMOVE/REPLACE	L FENDER BEADING	NEW	3 87	* 0 3*
13	900500	BDY*	ADD L LABOR OP	MASK FOR JAMBS AND INTERIOR	**QUAL REPL PART	5 00	* 0 3
14	303460	REF	REFINISH	L FUEL DOOR			C 0 4
15	303620	BDY	REPAIR	L FENDER PANEL	EXISTING		1 0*

ESTIMATE RECALL NUMBER 8/21/03 08 08 43 3080167

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DATE 8/21/03 08 08 AM  
ESTIMATE ID 3080167  
ESTIMATE VERSION 0  
COMMITTED  
PROFILE ID BODY SHOP RETAIL C 1 8

16	AUTO REF	REFINISH	L FENDER OUTSIDE			
17	308670REF	REFINISH	FRONT BODY PANEL			3 5*
18	309330BDY	REMOVE/REPLACE	FRONT BODY COVER PLATE	911 504 043 01 GRV	190 40 *	
19	900500BDY*	REMOVE/REPLACE	FT INTERIOR TO CLEAN/REMOVE ACID	SUBLET	436 23 *	0 0*
20	900500BDY*	REMOVE/REPLACE	NEUTRALIZE ACID/TREAT FOR DAMAGES	SUBLET	240 00 *	0 0
21	900500BDY*	REMOVE/REPLACE	SPECIAL FREIGHT CHARGE FOR INTERIOR PA	SUBLET	90 00 *	0 0
22	900500BDY*	REMOVE/INSTALL	INTERIOR TRIM FOR PAINT ACCESS	EXISTING		3 5*
23	936012	ADD L COST	HAZARDOUS WASTE DISPOSAL		5 00 *	
24	AUTO REF	ADD L OPR	CLEAR COAT			2 2
25	933003BDY*	ADD L OPR	TINT COLOR			0 5*
26	933005BDY	ADD L OPR	RESTORE CORROSION PROTECTION		8 00 *	0 3
27	933007BDY*	ADD L OPR	FILL SAND AND FEATHER			1 0*
28	AUTO REF	ADD L OPR	COLOR SAND & BUFF			1 2*
29	933018BDY*	ADD L OPR	MASK FOR OVERSPRAY		7 00 *	0 5*
30	AUTO	ADD L COST	PAINT/MATERIALS		332 80 *	

\* JUDGEMENT ITEM  
# LABOR NOTE APPLIES  
C INCLUDED IN CLEAR COAT CALC

#### REMARKS

DAMAGES TO FRONT INNER AND EXTERIOR BODY AREA OF VEHICLE

I	LABOR SUBTOTALS	UNITS	RATE	ADD L LABOR AMOUNT	SUBLET AMOUNT	TOTALS	II	PART REPLACEMENT SUMMARY	AMOUNT
	BODY	15 0	36 00	15 00	0 00	555 00		TAXABLE PARTS	239 43
	REFINISH	14 0	36 00	0 00	0 00	504 00		SALES TAX @ 7 750%	18 56
	NON TAXABLE LABOR					1 059 00		NON TAXABLE PARTS	766 23
	LABOR SUMMARY	29 0				1 059 00		TOTAL REPLACEMENT PARTS AMOUNT	1 024 22
III	ADDITIONAL COSTS					AMOUNT	IV	ADJUSTMENTS	
	TAXABLE COSTS					332 80		CUSTOMER RESPONSIBILITY	
	SALES TAX @ 7 750%					25 79		0 00	
	NON TAXABLE COSTS					5 00			
	TOTAL ADDITIONAL COSTS					363 59			
							I	TOTAL LABOR	1 059 00
							II	TOTAL REPLACEMENT PARTS	1 024 22
							III	TOTAL ADDITIONAL COSTS	363 59
								GROSS TOTAL	2 446 81
							IV	TOTAL ADJUSTMENTS	0 00
								NET TOTAL	2 446 81

#### POINT(S) OF IMPACT

12 FRONT CENTER (P)

INSURANCE CO HELSMAN MANAGEMENT SERVICE INC  
SCHAUMBURG IL 60196-7900  
WORK PHONE (800) 811-8175  
FAX PHONE (847) 517 2540

INSPECTION SITE OWNER S RESIDENCE  
WALNUT CA  
INSPECTION DATE 8/20/03

ESTIMATE RECALL NUMBER 8/21/03 08 08 43 3080167

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1000 Plaza Dr  
Suite 600  
Schaumburg, Illinois 60173-7900

Telephone 847-413-9090  
800-811-8175  
Fax 847-517-2540



Helmsman  
Management  
Services, Inc

June 18, 2003

Exide Corporation  
Brenda or Sheila Phillips  
645 Penn Street  
Reading, PA 19601

RE John Beers- Sears, Roebuck & Co  
Claim Number P268-141731-01

Dear Sir or Madam

Helmsman Management Services, Inc is the third party administrator for Sears, Roebuck & Co. The above-captioned claim for damages has been made against Sears alleging liability arising out of the sale of your product. We hereby tender complete defense and indemnification of Sears to you and your insurance company.

Specifically, claimant alleges that on 06/09/2003, a battery, Model #36249 leaked causing unknown damage. The date of purchase is unknown. The Claimant resides at 20579 Missionary Ridge Street, Walnut, CA 91789. Home phone number is 909-598-5379. The battery is at the Sears Auto Center.

The contact at the Sears Auto Center is Jorge Duarte who can be reached at phone 626-839-7211 and the address is 1552 Azusa Avenue, City of Industry, CA 91748.

Your relationship with Sears requires that you add Sears as an additional insured on your insurance policy. You also agreed to indemnify and hold harmless Sears for any liability it has arising out of the sale of the product.

As a result, I request that you forward this tender to your insurer, and that you and your insurer agree to accept Sears' complete defense and indemnity with respect to this claim. Please confirm within thirty (30) days that you and your insurance company will accept the complete defense and indemnification of Sears.

S

Should you have any questions in this regard, please feel free to contact me at  
800/811-8175, ext 2191

Sincerely,

Dolores Lauschke  
Claims Representative

cc John Beers, Claimant  
Jorge Duarte, Sears Roebuck and Company

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