

United States Bankruptcy Court  
District of DELAWARE | PROOF OF CLAIM

Name of Debtor: PIGGLI WIGGLI Case Number: 03-10965

NOTE: This form should not be used to make a claim for an administrator's fee or 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(c).

Name of Creditor: ZOEKOR NORTH AMERICAN  
(The debtor's estate or the estate of the debtor's property)  
AKIA MARYLAND CASUALTY CO  
Name and Address Where Notices Should Be Sent:  
1400 AMERICAN LANE  
SCHAUMBURG IL 60196  
ATTENTION MARY FERLICK  
Telephone No: 847-665-1439

- Check box if you are aware that any of these notices filed a copy of claim relating to your claim. Attach copy of statement giving particulars.
- Check box if you have not 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.

THIS SPACE IS FOR COURT USE ONLY

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: WC 8239882

Check here if this claim:  amends a previously filed claim dated \_\_\_\_\_  replaces \_\_\_\_\_

- 1 BASIS FOR CLAIM
- Goods sold
  - Services performed
  - Money loaned
  - Personal injury/wrongful death
  - Taxes
  - Other (Describe briefly) \_\_\_\_\_

- Payer benefits as defined in 11 U.S.C. § 1114(a)
- Wages, salaries, and compensations (Fill out below):  
Your social security number \_\_\_\_\_  
 Unpaid compensations for services performed from \_\_\_\_\_ to \_\_\_\_\_ (date) \_\_\_\_\_ (date) \_\_\_\_\_

DATE DEBT WAS INCURRED: 5/1/02 - 5/1/04

3 IF COURT JUDGMENT DATE OBTAINED: \_\_\_\_\_

4 CLASSIFICATION OF CLAIM: Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM.

SECURED CLAIM \$ \_\_\_\_\_  
Attach evidence of perfection of security interest.  
Brief Description of Collateral:  
 Real Estate  Motor Vehicle  Other (Describe briefly) \_\_\_\_\_

Amount of arrearage and other charges included in secured claim above if any \$ \_\_\_\_\_

UNSECURED NONPRIORITY CLAIM \$ \_\_\_\_\_  
A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.

UNSECURED PRIORITY CLAIM \$ UNLIQUIDATED  
Specify the priority of the claim: \_\_\_\_\_

- Wages, salaries, or commissions (up to \$2000) earned no more than 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—U.S.C. § 507(a)(4)
- Up to \$900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use—11 U.S.C. § 507(a)(6)
- Taxes or benefits of governmental units—11 U.S.C. § 507(a)(7)
- Other—11 U.S.C. §§ 507(a)(2), (a)(5)—(Describe briefly) \_\_\_\_\_

5 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED: \$ \_\_\_\_\_ (Unsecured) \$ \_\_\_\_\_ (Secured) \$ UNLIQUIDATED (Priority)

\$ UNLIQUIDATED (Total)

Check this box if claim includes pre-petition charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6 CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.

7 SUPPORTING DOCUMENTS: Attach copies of supporting documents such as promissory notes, purchase orders, invoices, remitted statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.

8 TIME-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Date: 5/21/03

Sign and print the name and title of any of the creditor or, if the creditor is authorized to file this claim (attach copy of power of attorney, if any):  
MARY FERLICK

THIS SPACE IS FOR COURT USE ONLY

**FILED**

MAY 24 2003

**BMC**

Penalty for presenting false and fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. § 5152 and 18 U.S.C. § 771.

MARY FERLICK  
LITIGATION (CREDIT) SPECIALIST  
DIRECT CREDITORS

