

In re: HomeLife Corporation
OMNIBUS 15: EXHIBIT C - RECLASSIFY, REDUCE & ALLOW CLAIMS

Creditor Name / Address	Claim Number	Total Claim Dollars*	Claim Class**	Modified Claim Amount*	Claim Class**	Reason For Modification
1 PIFER, JOANN 1375 SIBLEY LOWELL MI 49331	11961	\$800.00	(P)	\$220.11 \$107.25	(P) (U)	EMPLOYEE CLAIMS THEY WERE SHORTED WAGES 6/29 TO 7/8/01 OF 25 HRS. EMPLOYEE WAS PAID 65 HRS IN WK 23, 71.9 HRS IN WK 25, 71.2 HRS IN WK 27 AND 56 HRS IN WK 28 (STORE CLOSED IN THE MIDDLE OF THE PAY PERIOD). EMPLOYEE IS ONLY OWED FOR VACATION NOT TAKEN
totals:		\$800.00	(P)	\$220.11 \$107.25	(P) (U)	

*Plus, in certain instances, additional contingencies, unliquidated amounts, interest, penalties and/or fees.

****(A)** - Administrative **(S)** - Secured
(P) - Priority **(U)** - Unsecured