

UNITED STATES BANKRUPTCY COURT - WILMINGTON District of DELAWARE

PROOF OF CLAIM

Name of Debtor: J.L. French Corp

Case Number: 09-12449 Ch11

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request of payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property): Ford Motor Credit Company, LLC

Name and address where notices should be sent: Ford Motor Credit Company, LLC P.O. Box 537901 Livonia, MI 48153-9905

Telephone Number: 1-800-955-8532

Check this box to indicate that this claim amends a previously filed claim.

Court Claim #: (if known)

Filed on:

RECEIVED

Name and address where payment should be sent (if different from above):

Ford Motor Credit Company, LLC Dept 55953 P.O. Box 55000 Detroit, MI 48255-0953

JUL 29 2009

BMC GROUP

Check this 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 this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$0.00

Total remaining lease payments: Contractual payment amount: \$309.96 Lease Termination Date: 08/10/2009

Creditor Remarks:

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of interest or charges.

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories check the box and state the amount.

Specify the priority of the claim.

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filings of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507(a)(4).

Contributions to an employee benefit plan - 11 U.S.C. §507(a)(5).

Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 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)().

2. Basis for Claim: Pre-paid Lease

This is a true lease agreement; an executory contract / title indicates Lessor as the legal and registered owner of the collateral. Monthly payments in the amount of \$309.96

3. Last four digits of any number by which creditor identifies debtor: 8486

3a. Debtor may have scheduled account as:

4. Secured Claim

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: Real Property Motor Vehicle Other

Describe: VIN #: 1FMYU03186KA17469

Value of Property: Annual Interest Rate:

Amount of arrearage and other charges as of time case filed included in secured claim, if any: Basis for perfection: *see attached

Amount of Secured Claim: Amount Unsecured: \$

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary.

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

Amount entitled to priority:

\$

* Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

Date: July 20, 2009

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of po

A. Bloetscher

/s/ A Bloetscher

FOR COURT USE ONLY

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

JL French Automotive Castings




00016

BMC

Motor Vehicle Lease Agreement Wisconsin


1-800-727-7000
Lease On 08/10/2006



Lessor: Name and Address (including County):
 J. FRENCH COMPANY
 6101 S TAYLOR DR
 SHEBOYGAN WI 53081 SHEBOYGAN

Lessor - Name and Address:
 DICK BRANTHEIER FORD INC
 8624 KOHLER MEMORIAL DR
 SHEBOYGAN WI 53082

AUG 14 2006



"Ford Credit" is Ford Motor Credit Company. The "Holder" is CAB EAST LLC and its agents.

By signing "You" (Lessor and Co-Lessor) agree to lease this Vehicle according to the terms on the front and back of this lease.

Year/Make/Model <u>2006</u> <u>FORD</u> <u>ESCAPE</u>	Year/Make/Model <u>N/A</u> <u>N/A</u> <u>N/A</u>	Vehicle ID# <u>1FMYU03186KA17469</u>	Vehicle Use <u>PERSONAL</u>
TRADE-IN <u>N/A</u>	Gross Allowance <u>N/A</u>	Amount Owning <u>N/A</u>	

1. Amount Due At Lease Signing or Delivery (Itemized Below) *

\$ 3328.46

2. Monthly Payments

Your first monthly payment of \$ 309.96 is due 08/10/06 followed by 35 payments of \$ 309.96 on the 31st day of each month. The total of Your monthly payments is \$ 11158.56

3. Other Charges (not part of Your monthly payment)

Disposition fee (if You do purchase the Vehicle) N/A

Total N/A

4. Total of Payments (The amount You will have paid by the end of the lease)

\$ 13852.06

* Itemization of Amount Due at Lease Signing or Delivery

5. Amounts Due At Lease Signing or Delivery:		6. How the Amount Due At Lease Signing or Delivery will be paid:	
a. Capitalized cost reduction	\$ 2500.00	a. Net trade-in allowance	\$ N/A
b. First monthly payment	\$ 309.96	b. Rebates and noncash credits	\$ 2500.00
c. Refundable security deposit	\$ 325.00	c. Amount to be paid in cash	\$ 828.16
d. Title fees	\$ 45.00	d. N/A	\$ N/A
e. Registration fees	\$ 125.00		
f. TAX ON CAP RED	\$ N/A		
g. N/A	\$ N/A		
h. N/A	\$ N/A		
i. N/A	\$ N/A		
Total	\$ 3328.46	Total	\$ 3328.46

7. Your monthly payment is determined as shown below:

a. Gross capitalized cost. The agreed upon value of the Vehicle (\$ <u>2753.68</u>) and any items You pay over the lease term (such as service contracts, insurance, and any outstanding prior credit or lease balances) (Itemized below):	\$ 23348.68
b. Capitalized cost reduction. The amount of any net trade-in allowance, rebate, noncash credit, or cash that You pay that reduces the gross capitalized cost	2500.00
c. Adjusted capitalized cost. The amount used in calculating Your base monthly payment	20848.68
d. Residual value. The value of the Vehicle at the end of the lease used in calculating Your base monthly payment	12062.50
e. Depreciation and any amortized amounts. The amount charged for the Vehicle's decline in value through normal use and for other items paid over the lease term	8786.18
f. Rent charge. The amount charged in addition to the depreciation and any amortized amounts	1841.02
g. Total of base monthly payments. The depreciation and any amortized amounts plus the rent charge	10627.20
h. Lease payments. The number of payments in Your lease	36
i. Base monthly payment	295.20
j. Monthly sales / use tax	14.76
k. N/A	N/A
l. N/A	N/A
m. Total monthly payment	\$ 309.96
n. Lease term in months	36

8. Early Termination. You may have to pay a substantial charge if You end this lease early. The charge may be up to several thousand dollars. The actual charge will depend on when the lease is terminated. The earlier You end the lease, the greater this charge is likely to be.

9. Excess Wear and Tear. You may be charged for excessive wear based on our standards for normal use. At the scheduled end of this lease, unless You purchase the Vehicle, You must pay to Lessor 15 cents per mile for each mile in excess of 11,000 miles shown on the odometer. See items 18 and 23 on back for additional excess wear and tear terms.

10. Purchase Option at End of Lease Term. 12562.50 plus official fees and taxes is Your lease end purchase option price. You have the option to purchase the Vehicle from Lessor in cash for the purchase option price at the end of the lease term if You are not in default.

11. WARRANTY The Vehicle is covered by any warranty, extended warranty or service contract indicated below:

Standard new Vehicle warranty provided by the manufacturer or distributor of the Vehicle.

N/A

N/A

If the Vehicle is of a type normally used for personal use and the Lessor, or the Vehicle's manufacturer, extends a written warranty or service contract covering the Vehicle within 90 days from the date of the lease, You get implied warranties of merchantability and fitness for a particular purpose covering the Vehicle. Otherwise, You understand and agree that there are no such implied warranties except as otherwise required by state law.

12. OFFICIAL FEES AND TAXES 724.85

The estimated total amount You will pay for official and license fees, registration, title and taxes over the term of Your lease, whether included with Your monthly payments or assessed otherwise. The actual total of fees and taxes may be higher or lower depending on the tax rates in effect or the value of the leased property at the time a fee or tax is assessed.

13. LESSOR SERVICES N/A

(See item 18 on back) N/A

14. LATE PAYMENTS You will pay a late charge on the portion of each payment that is not received within 10 days after it is due. The charge is 5 percent of the late amount or \$10.00 whichever is less.

15. LIFE, DISABILITY AND OTHER INSURANCE These coverages are not required to enter into this lease and will not be provided unless You sign below. If insurance is to be obtained by Lessor, the coverages are shown in a notice given to You this date and are for the term of this lease. You have the right to cancel the insurance and obtain a full refund of the premium(s) by returning the notice or agreement to Lessor within 30 days of the date of this lease. Any refund will be applied to Your obligations under this lease.

Life Insurance	Insured	N/A	\$	Initial Coverage Amount	N/A
	Insured(s)	N/A	\$	Premium	N/A
	Insured's Signature(s)	N/A	\$	Monthly Coverage	N/A
Disability Insurance	Insured	N/A	\$	Premium	N/A
	Insured's Signature	N/A	\$	Monthly Coverage	N/A
	Insured(s)	N/A	\$	Premium	N/A
	Insured's Signature(s)	N/A	\$	Monthly Coverage	N/A
	Insured(s)	N/A	\$	Premium	N/A
	Insured's Signature(s)	N/A	\$	Total Premiums	N/A

16. Itemization of Gross Capitalized Cost

Agreed Upon Value of the Vehicle	Sales/Use Tax & Other Applicable Taxes	Title Fees	License & Registration Fees	Extended Warranty & Service Contract	Lessor Services	Acquisition Fee
\$ 2753.68	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ 595.00
Documentation Fee	Life Insurance Premium	Disability Insurance Premium	N/A	N/A	N/A	Total Gross Capitalized Cost
\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ N/A	\$ 23348.68

NOTICE OF ASSIGNMENT

To: Lessor at address on this Lease:

This Lease between You and Lessor is assigned by Lessor to Holder, at One American Road, Dearborn, Michigan 48123. Under this assignment, You are required to make all payments coming due under the Lease directly to Holder through Ford Motor Credit Company.

If You have any complaints, claims or defenses against Lessor, You must notify Holder of them in writing within 12 months of the date of this Lease. If You do not, Holder will have the right to enforce this Lease, free of Your claims or defenses against Lessor. See Section 412.467 of the Wisconsin Consumer Act.

SIGNATURES AND IMPORTANT NOTICES

Modification: This lease sets forth all of the agreements of Lessor and You for the lease of the Vehicle. There is no other agreement. Any change in this lease must be in writing and signed by You and Ford Credit.

Lessor: JL FRENCH COMPANY By: X [Signature] Title: Treasurer

Co-Lessor: By: X Title:

YOU ACKNOWLEDGE THAT YOU HAVE READ AND AGREE TO BE BOUND BY THE ARBITRATION PROVISION ON THE REVERSE SIDE OF THIS CONTRACT.

You state that You have been given a filled-in copy of this lease at the time You sign it and notice of an assignment of this lease by the Lessor to Holder.

Lessor: By: X [Signature] Title: Treasurer

Co-Lessor: By: X Title:

NOTICE TO LESSEE

(a) THIS IS A MOTOR VEHICLE LEASE AGREEMENT. YOU HAVE NO OWNERSHIP RIGHTS IN THE MOTOR VEHICLE UNLESS THIS LEASE CONTAINS A PURCHASE OPTION AND YOU EXERCISE YOUR OPTION TO PURCHASE THE MOTOR VEHICLE.

(b) DO NOT SIGN THIS LEASE BEFORE YOU READ IT, INCLUDING ANY WRITING ON THE REVERSE SIDE.

(c) DO NOT SIGN THIS IF IT CONTAINS ANY BLANK SPACES.

(d) EARLY TERMINATION OF THIS LEASE MAY REQUIRE YOU TO PAY A SUBSTANTIAL AMOUNT.

(e) YOU ARE ENTITLED TO A COMPLETED COPY OF THIS LEASE WHEN YOU SIGN IT.

Lessor: JL FRENCH COMPANY By: X [Signature] Title: Treasurer

Co-Lessor: By: X Title:

Lessor is hereby notified that Holder has assigned to "Intermediary," as defined in the Red Carpet Lease Assignment, its rights (but not its obligations) with respect to the purchase of this Vehicle and the sale of this Vehicle at lease termination.

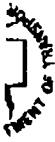
Lessor agrees to this lease and assigns it to Holder under the terms of the Red Carpet Lease - WDR Plan Agreement between Lessor and Holder unless otherwise indicated here.

Lessor: DICK BRANTHEIER FORD INC By: X [Signature] Title:

FC: 18718 P JAN 03 Questions?? Contact Ford Credit at 1-800-727-7000 or www.fordcredit.com

For-AU-04 editions may NOT be used. NOTICE: SEE OTHER SIDE FOR IMPORTANT INFORMATION Program No.

ORIGINAL



CONFIRMATION OF SECURITY INTEREST (LIEN) PERF

DEBTOR NAME AND ADDRESS This lien has been recorded with the Wisconsin.

CAB EAST LLC
260 INTERSTATE N CIRCLE NW
ATLANTA GA 30339

Year	Make	Body Style	Vehicle Identification Number	County of Debtor Residence	Secured Party No.	Date Printed
2006	FORD	UT	1FMYU03186KA17469		105674	08/19/06

SECURED PARTY (LIENHOLDER) NAME AND ADDRESS

HTD LEASING LLC
260 INTERSTATE N CIR NW
ATLANTA GA 30339-2111

Lending Agency: Retain this document until the lien has been satisfied. See reverse side of this form for removing this lien.
Valid lien release only if signed on reverse side.