

UNITED STATES BANKRUPTCY COURT District of Delaware

PROOF OF CLAIM

Name of Debtor: J.L. FRENCH AUTOMOTIVE CASTINGS, INC

Case Number: 09-12445 (KG)

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 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property): MERCURY PRODUCTS CO.

Name and address where notices should be sent: MERCURY PRODUCTS CO. 439 JUTRAS DRIVE SOUTH WINDSOR, ONTARIO, N8N 5C4, CANADA. Telephone number: 519-727-4050

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

Court Claim Number: (If known)

Filed on:

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

Telephone number:

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: \$ 1271.20

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 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.

2. Basis for Claim: GOODS SOLD (See instruction #2 on reverse side.)

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

3a. Debtor may have scheduled account as: MERII (See instruction #3a on reverse side.)

4. Secured Claim (See instruction #4 on reverse side.) 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 Estate Motor Vehicle Other Describe:

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:

Amount of Secured Claim: \$ Amount Unsecured: \$

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 filing 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)().

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. (See instruction 7 and definition of "redacted" on reverse side.)

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

If the documents are not available, please explain:

Date: 24 July 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 power of attorney, if any.

Donna ROSLYN CORNAH (CONTROLLER)

FOR COURT USE ONLY

27 AM 10

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years

JL French Automotive Castings



00017

JUL 29 2009

BMC GROUP

Reset

Save As...

Print

BMC

MERCURY PRODUCTS

Remit to: **Mercury Products Co.**
439 Jutras Drive South,
Windsor, ON N8N 5C4
Canada

Packing List

SID# 0154121

**THIS SAME NUMBER
 APPEARS ON INVOICE**

Sold To:

JL FRENCH AUTOMOTIVE CASTINGS INC.
 GLASGOW ACCOUNTS PAYABLES
 20 PRESTWICK DRIVE
 GLAWGOW, KY 42141
 USA

 TAX ID #: 38-2564939 JLFAUT

Ship To:

JL FRENCH AUTOMOTIVE CASTINGS INC.
 400 AMERICAN WAY
 GLASGOW, KY 42141
 USA

 TAX ID #: 38-2564939

Date Shipped 6/22/2009	Date Invoiced 6/22/2009	Freight Term FOB MERCURY WINDSOR	Ship Via COLLECT/ CCX	Terms NET 30 DAYS	Supplier Code MER11
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Customer's Order No.	Quantity Shipped	No. of Cont.	Part Number and / or Description	Net Weight	Tare Weight
P119786-00	5,600		PT# 1831027C1 - CUP PLUG 10500-16100	224.00	
		8	Expendable closed Carton 9x9x6.5 inches		5.36
		1	Small Wooden Skid 32x32x4.5 inches		18.00
Send copy of shipment details to: Karla Adams, kadams@jlfrench.com					
NET WEIGHT (lbs)				224.00	23.36
TOTAL GROSS WEIGHT (lbs)				247.36	

Comments:

Customs Broker: DANZAS
 Broker/Duty Responsibility of: BUYER
 Country/Province of Origin: CANADA, XO
 NAFTA CERTIFICATION ON FILE
 Companies are NOT RELATED

STRAIGHT BILL OF LADING on the date hereof, subject Windsor, ON, Canada from described, in apparent good unknown), marked, consignor being understood through property/goods under the if on its own authorized route destination, subject to the each carrier of all or any of property/goods over all or any portion of said route to destination, and as to each party at any time interested in all or any of the goods, that every service to be performed hereunder shall be subject to all the terms and conditions not prohibited by law and set forth in the classification or tariff which governs the transportation of this shipment and said terms and conditions are hereby agreed to by the consignee.



Driver's signature acknowledges receipt of freight only. Unless otherwise agreed to under separate contract, terms and conditions of tariff CNWY 199 apply.

MM 29002-1C EDI/SPCL # DEST SIC

[Signature] 06/20/09
 Agent of the Carrier

Pro #
 4679008

Trailer #
 This is to certify that the above named property/goods are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the governing transport authority.

FOR FREIGHT COLLECT SHIPMENTS Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

[Signature]
 Signature of Consignor