B 10 (Official Form 10) (12/08) PROOF OF CLAIM Southern District of New York UNITED STATES BANKRUPTCY COURT Case Number: 10-13779 (ALG) Name of Debtor: JENNIFER CONVERTIBLES, INC. 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): MACOMB MALL, LLC ☐ Check this box to indicate that this claim amends a previously filed claim. Name and address where notices should be sent: Court Claim Number:_ David M. Blau, Esq. Kupelian Ormond & Magy, P.C., 25800 Northwestern Hwy., Ste. 950, Southfield, MI 48075 (If known) Telephone number: Filed on:_ (248) 357-0000 ☐ Check this box if you are aware that Name and address where payment should be sent (if different from above): anyone else has filed a proof of claim SEP 20 2010 relating to your claim. Attach copy of statement giving particulars. ☐ Check this box if you are the debtor **BMC GROUP** Telephone number: or trustee in this case. 5. Amount of Claim Entitled to 1. Amount of Claim as of Date Case Filed: Priority under 11 U.S.C. §507(a). If any portion of your claim falls in If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete one of the following categories, check the box and state the amount. If all or part of your claim is entitled to priority, complete item 5. Specify the priority of the claim. ☐ 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. ☐ Domestic support obligations under 2. Basis for Claim: PREPETITION AND POST-PETITION RENT AND OTHER CHARGES 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). (See instruction #2 on reverse side.) ☐ Wages, salaries, or commissions (up 3. Last four digits of any number by which creditor identifies debtor: to \$10.950*) earned within 180 days before filing of the bankruptcy 3a. Debtor may have scheduled account as: _ petition or cessation of the debtor's (See instruction #3a on reverse side.) business, whichever is earlier - 11 4. Secured Claim (See instruction #4 on reverse side.) U.S.C. §507 (a)(4). Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. ☐ Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5). ☐ Motor Vehicle □ Other Nature of property or right of setoff: ☐ Real Estate Describe: ☐ Up to \$2,425* of deposits toward purchase, lease, or rental of property _____ Annual Interest Rate___% Value of Property:\$____ or services for personal, family, or household use - 11 U.S.C. §507 Amount of arrearage and other charges as of time case filed included in secured claim, (a)(7). Basis for perfection: ____ if any: \$ ☐ Taxes or penalties owed to governmental units - 11 U.S.C. §507 ____ Amount Unsecured: \$___ Amount of Secured Claim: \$____ (a)(8).6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. ☐ Other – Specify applicable paragraph of 11 U.S.C. §507 (a)(__). 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. Amount entitled to priority: 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 *Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with SCANNING. respect to cases commenced on or after If the documents are not available, please explain: the date of adjustment.

Date: 09/16/2010 **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.

David M. Blau, Attorney/Authorized Agent

FOR COURT USE ONLY

Jennifer Convertibles

Supporting Schedule

JENNIFER CONVERTIBLES, INC. Chapter 11 Case No. Case No. 10-13779 (ALG) United States Bankruptcy Court Southern District of New York

Landlord:

Macomb Mall, LLC

Location:

32233 Gratiot Ave., Space #470, Roseville, MI 48066

Lease Rejection Date:

9/14/2010¹

Lease Ending Date:

1/31/2013

ACTUAL DAMAGES UNDER APPLICABLE STATE LAW

Rent unpaid as of Petition Date:

Balance of rent reserved from Lease Rejection Date through Lease Ending Date:

\$75,600.00

Default Damages Under Lease

\$8,051.08

CALCULATION OF DAMAGE CAP PURSUANT TO 11 U.S.C. § 502(B)(6)²

Rent reserved for one year: \$32,400.00

Total allowed damages for remaining rent reserved: \$32,400.00

PRE-PETITION INDEBTEDNESS

Rent unpaid as of the Petition Date: \$8,051.08

Total Allowed Unsecured Claim: \$40,451.08

Supporting Schedule (continued)

¹ Explanation of determination of Rejection Date [NOTICE OF PROPOSED REJECTION OF UNEXPIRED LEASES FILED SEPTEMBER 1, 2010] (Docket 211); Effective Date of Rejection was September 14, 2010.

² Landlord's actual lease rejection damages are the greater of one year's rent (\$32,400.00) or 15% of the balance of the lease term not to exceed three years (\$12,555.00), plus unpaid prepetition rent (\$8,051.08), and is subject to the statutory cap under 11 U.S.C. § 502(b)(6)(A) and (B).

³ Does not exceed three year's rent (\$97,200.00).