

United States Bankruptcy Court of : SOUTHERN DISTRICT OF NEW YORK

PROOF OF CLAIM

Name of Debtor: JENNIFER CONVERTIBLES, INC

Case Number: 10-13779

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

Name and address where notices should be sent:

SOUTHERN CONNECTICUT GAS CO
855 MAIN STREET
BRIDGEPORT, CT 06605

RECEIVED
OCT 28 2010
BMC GROUP

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

Court claim Number: (if known)

Filed on:

Telephone numl 203-795-7851--MARCIA FANTANO

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

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

Telephone number:

1. Amount of Claims as of Date Case Filed: SEE ATTACHED \$105.66

If all are 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

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

2 Basis for Claim: GAS SERVICE: SEE ATTACHED (see instruction #2 on reverse side)

3 Last four digits of any number by which creditor identifies debtor: 250490

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).

3a. Debtor may have scheduled account as: (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: Describe: Real Estate Motor Vehicle Other

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: \$

Contributions to an employee benefit plan - 11 U.S.C.(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 this claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgements, mortgages, and security agreements.

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

If the documents are not available, please explain:

Date: 9/15/10 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.

Amount entitled to priority: \$

Jennifer Convertibles



\*Amount 00340

4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of enactment.

RECEIVED OCT 22 2010



Service Address:  
**JENNIFER CONVERTIBLE, INC**  
 1770 BOSTON POST RD  
 MILFORD, CT

Account #	250490-204009
Customer Information	1-800-659-8299

Rate	Meter Number		Next Read Date	Bill Date
Residential				

**Current Gas Charge Information**

BillingDays
Reading
Reading
Total CCF Used

**Account Activity**

Previous Balance	\$35.13
Balance Forward	\$35.13
Account Balance	\$35.13

Messages

**GAS SERVICE 6/19/2010 TO 7/18/2010**

CT LIC.#S1-303125,MEC.1111

Please Return Bottom Portion With Your Payment

Account #	250490-204009
Balance	\$35.13
Please Pay	\$35.13
Payable on Presentation	

Southern Connecticut Gas Co.  
 P.O. Box 1999  
 Augusta, ME 04332-1999

**JENNIFER CONVERTIBLE, INC**  
 1770 BOSTON POST RD  
 MILFORD, CT

Make checks payable to: SCG

### Gas Emergencies or Leaks – 24 hours

**Toll Free 1-800-513-8898**

If you smell gas, please call our gas leak emergency phone number immediately. Do not switch lights on or off, but leave the area and call us from a phone safely away from the suspected leak.

### Corporate Office

**Toll Free 1-866-268-2887**

855 Main Street, Bridgeport 06604

[www.soconngas.com](http://www.soconngas.com)

### Operations Center

Service/Marketing/Sales

60 Marsh Hill Road, Orange 06477

### Bill Payment Address

Southern Connecticut Gas Co.

PO Box 1999

Augusta, ME 04332-1999

### Customer Service Hours & Telephone

7:30 am – 6:30 pm, Monday-Friday

**Toll Free 1-800-659-8299**



### Call Before You Dig – 24 Hours

**Toll Free 1-800-922-4455**

If you're digging or excavating in Connecticut, state law requires that you notify the Call Before You Dig (CBYD) Center to have all underground utilities located and marked to avoid damage.

### Payment Agent Site Locations

Call **Toll Free 1-800-659-8299** through SCG's Automated Self Service Billing System or Web site access at [www.soconngas.com](http://www.soconngas.com)

### After Hours Automated Self Service Billing System

**Toll Free 1-800-659-8299** (*disponible en español*)

Tip: To enter your account number in the automated self service billing system, be sure to press the "star" (\*) key in place of the dash (-) and before the last digit. Example: 123456\*78910\*6

### E-bill Service

Allows customers to view and pay their gas bills on line. To participate, please enroll by accessing SCG's web site at [www.soconngas.com](http://www.soconngas.com) and follow the prompts. If you elect the E-Bill option, paper bills will no longer be mailed.

### Before You Move

**Toll Free 1-800-659-8299**

Call us a few days in advance to allow for scheduling.



### Customer Rights

A detailed explanation of your rights is available upon request.

### Employee Identification

Company employees carry an official identification card with their name, signature and photograph. Please ask to see it.

### Payment Plans

• **Budget Payment Plan** Heating customers can avoid high winter gas bills by requesting to go on the budget plan. Your account balance must be current to participate. Your yearly usage is divided into equal monthly installments.

• **Monthly Payment Arrangements** on past due balances are also available.

• **Matching Payment Plan** Hardship, residential heating customers may inquire to see if they qualify.

### BILLING GLOSSARY

#### Next Read Date

The approximate date we will read your meter.



#### Meter Readings

We make every effort to read your meter each month. Bad weather or other circumstances may require that we estimate your bill. Estimated readings are clearly shown on your bill. To ensure proper billing and to avoid estimated bills, please provide access to the meter and/or provide an actual meter reading to the company. Call 1-800-659-8299 for details.

#### Correction Factor

Some meters require a correction factor based on the pressure at your location. This factor converts your readings to actual CCF used.

#### Billing Days

The number of days in the billing period. Bills less than 28 days or more than 34 days will be prorated.

#### Customer Charge

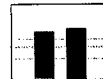
The basic charge for providing gas service to you.

#### Degree Days

The established method to measure cold weather, the colder the weather, the higher number of heating degree days.

#### Usage Comparison

This graph compares your gas usage with your previous 12-month period.



#### Sales Tax

The company is required to charge state sales tax on certain services. Exemption forms are available upon request.

### CODES & ABBREVIATIONS

CR	Credit
ACT	Actual Meter Read
EST	Estimated Meter Read
CCF	One hundred cubic feet, a standard measurement of gas quantity.
PGA	Purchased Gas Adjustment. This amount reflects the total unit cost of gas purchased.
WNA	Weather Normalization Adjustment. This amount is determined based on the difference between actual and normal degree days.
DEL	Delivery charge is what customers pay to have natural gas transported to their homes and businesses through SCG's distribution system.
PEAK	A charge applied to a customer's highest daily (one day) usage for system capacity made available for that customer.
Meter Charge	Meter Charge is the monthly fee for a daily demand meter device at the site.
CAM	Conservation Adjustment Mechanism
TSC	Transportation Services Charge
SSC	Sales Services Charge

“Thank you for using Natural Gas!”



**Service Address:**  
**JENNIFER CONVERTIBLE, INC**  
**1770 BOSTON POST RD**  
**MILFORD, CT**

Account #	250490-132556
Customer Information	1-800-659-8299

Rate	Meter Number		Next Read Date	Bill Date
Residential				

**Current Gas Charge Information**

BillingDays
Reading
Reading
Total CCF Used

**Account Activity**

Previous Balance	\$33.40
Balance Forward	\$33.40
Account Balance	\$33.40

Messages

**GAS SERVICE 6/22/2010 TO 7/18/2010**

CT LIC.#S1-303125,MEC.11111

Please Return Bottom Portion With Your Payment

Account #	250490-132556
Balance	\$33.40
Please Pay	\$33.40
Payable on Presentation	

Southern Connecticut Gas Co.  
 P.O. Box 1999  
 Augusta, ME 04332-1999

**JENNIFER CONVERTIBLE, INC**  
**1770 BOSTON POST RD**  
**MILFORD, CT**

Make checks payable to: SCG

### Gas Emergencies or Leaks – 24 hours

**Toll Free 1-800-513-8898**

If you smell gas, please call our gas leak emergency phone number immediately. Do not switch lights on or off, but leave the area and call us from a phone safely away from the suspected leak.

### Corporate Office

**Toll Free 1-866-268-2887**

855 Main Street, Bridgeport 06604

[www.socnngas.com](http://www.socnngas.com)

### Operations Center

Service/Marketing/Sales

60 Marsh Hill Road, Orange 06477

### Bill Payment Address

Southern Connecticut Gas Co.

PO Box 1999

Augusta, ME 04332-1999

### Customer Service Hours & Telephone

7:30 am – 6:30 pm, Monday-Friday

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### Payment Agent Site Locations

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### After Hours Automated Self Service Billing System

**Toll Free 1-800-659-8299** (*disponible en español*)

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**123456\*78910\*6**

### E-bill Service

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### Before You Move

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### Customer Rights

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### Employee Identification

Company employees carry an official identification card with their name, signature and photograph. Please ask to see it.

### Payment Plans

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#### Correction Factor

Some meters require a correction factor based on the pressure at your location. This factor converts your readings to actual CCF used.

#### Billing Days

The number of days in the billing period. Bills less than 28 days or more than 34 days will be prorated.

#### Customer Charge

The basic charge for providing gas service to you.

#### Degree Days

The established method to measure cold weather, the colder the weather, the higher number of heating degree days.

#### Usage Comparison

This graph compares your gas usage with your previous 12-month period.



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“Thank you for using Natural Gas!”



Service Address:  
**JENNIFER CONVERTIBLE, INC**  
 1807 POST RD E #RS-152  
 WESTPORT, CT

Account #	250489-73709
Customer Information	1-800-659-8299

Rate	Meter Number		Next Read Date	Bill Date
Residential				

**Current Gas Charge Information**

BillingDays
Reading
Reading
Total CCF Used

**Account Activity**

Previous Balance	\$37.13
Balance Forward	\$37.13
Late Charge	(\$0.37)
Account Balance	\$36.76

Messages

**GAS SERVICE 6/15/2010 TO 7/18/2010**

CT LIC.#S1-303125,MEC.1111

Please Return Bottom Portion With Your Payment

Account #	250489-73709
Balance	\$36.76
Please Pay	\$36.76
Payable on Presentation	

Southern Connecticut Gas Co.  
 P.O. Box 1999  
 Augusta, ME 04332-1999

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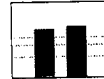
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