

**EXHIBIT C**

**401(K)/PENSION PLAN**

**In re: Met-Coil Systems Corporation  
OMNIBUS 5: EXHIBIT C - 401(K)/PENSION CLAIMS**

	Creditor Name / Address	Case Number	Claim Number	Docketed Claim Date	Total Claim-Dollars*	Claim Class**	Reason For Proposed Disallowance
1	CUTFORTH, LAURA 5908 SPRINGSIDE AVE DOWNERS GROVE IL 60516-1719	03-12676	278	12/23/2003	\$12,000.00	(U)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
2	DAI, ROBERT 1 PIERCE PL STE 400E ITASCA IL 60143-2673	03-12676	184	11/10/2003	\$2,158.94	(U)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
3	DAI, ROBERT 1 PIERCE PL STE 400E ITASCA IL 60143-2673	03-12676	185	11/10/2003	\$27,128.50	(U)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
4	FEELY, DONNA 95735 LEMONT RD DOWNERS GROVE IL 60516-4858	03-12676	288	12/31/2003	\$101.66	(P)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
5	LAVIGNE, WILLIAM 10817 LAWLER AVE OAK LAWN IL 60453-5115	03-12676	280	12/15/2003	BLANK	(T)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
6	MAXWELL SCHECH, K 4721 SCHWARTZ AVE LISLE IL 60532-1736	03-12676	277	12/24/2003	\$10,550.00	(U)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
7	SCHLOGEL, RAY 20199 N SHADOW MOUNTAIN DR SURPRISE AZ 85374-4939	03-12676	289	12/31/2003	BLANK	(T)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
8	SHAH, ASHOK 1188 BLACK STALLION DR NAPERVILLE IL 60540-9496	03-12676	169	11/10/2003	\$38,675.77	(U)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
9	SHAH, ASHOK M 1188 BLACK STALLION DR NAPERVILLE IL 60540-9496	03-12676	170	11/10/2003	\$270,832.98	(U)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
10	SOJKA, JAMES 8301 CONSTANCE PL MANASSAS VA 20110-6001	03-12676	279	12/23/2003	\$54,148.87	(P)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				
11	WILLIAMS, TERRY 512 WISHERD QUINCY IL 62301	03-12676	290	1/5/2004	\$344.04	(U)	EXPUNGE
			MET-COIL SYSTEMS CORPORATION				

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

\*\* (A) - Administrative  
(P) - Priority

(S) - Secured  
(U) - Unsecured

(T) - Total

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OMNIBUS 5: EXHIBIT C - 401(K)/PENSION CLAIMS**

Creditor Name / Address	Case Number	Claim Number	Docketed Claim Date	Total Claim Dollars*	Claim Class**	Reason For Proposed Disallowance
<b>Totals:</b>				\$54,248.53	(P)	
				\$381,490.23	(U)	

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

\*\* (A) - Administrative  
(P) - Priority

(S) - Secured  
(U) - Unsecured

(T) - Total