

PROOF OF CLAIM

YOUR CLAIM IS SCHEDULED AS

In re
Oxford Automotive, Inc

Case Number
04-74377

Schedule/Claim ID s1548
Amount/Classification
\$1 066 05 Unsecured

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

Check 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 box if you have never received any notices from the bankruptcy court in this case

Check box if this address differs from the address on the envelope sent to you by the court

The amounts reflected above constitute your claim as scheduled by the Debtor or pursuant to a filed claim If you agree with the amounts set forth herein and have no other claim against the Debtor you do not need to file this proof of claim EXCEPT as stated below

If the amounts shown above are listed as Contingent, Unliquidated or Disputed you must file a proof of claim

If you have already filed a proof of claim with the Bankruptcy Court or BMC you do not need to file again THIS SPACE IS FOR COURT USE ONLY

Name of Creditor and Address
PROS SERVICES INC
PATRICK LAEDER
PO BOX 610548
2425 PETIT ST
PORT HURON MI 48060-4735

Creditor Telephone Number (810) - 982-7271

Creditor Federal Tax ID
38-2273967

Account Or Other Number By Which Creditor Identifies Debtor
N/A

Check here if this claim replaces or amends a previously filed claim dated

1 BASIS FOR CLAIM

- Goods sold, Services performed, Money loaned, Personal injury/wrongful death, Taxes, Other, Retiree benefits, Wages salaries and compensation, Unpaid compensation for services performed

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED \$ (unsecured) \$ (secured) \$ 2417 24 \$ 2417 24 (Total)

If all or part of your claim is secured or entitled to priority, also complete item 5 or 7 below
Check this box if claim includes interest or other charges in addition to the principal amount of the claim

5 SECURED CLAIM

7 UNSECURED PRIORITY CLAIM

Check this box if your claim is secured by collateral (including a right of setoff)
Brief description of collateral
Real Estate, Motor Vehicle, Other
Value of Collateral \$
Amount of arrearage and other charges at time case filed included in secured claim if any \$

Check this box if you have an unsecured priority claim
Amount entitled to priority \$
Specify the priority of the claim
Wages salaries or commissions, Contributions to an employee benefit plan, Up to \$2 225* of deposits toward purchase lease or rental of property or services for personal family or household use, Alimony maintenance or support owed to a spouse former spouse or child, Taxes or penalties owed to governmental units, Other

6 UNSECURED NONPRIORITY CLAIM \$ 2417 24

Check this box if a) there is no collateral or lien securing your claim or b) your claim exceeds the value of the property securing it or c) none or only part of your claim is entitled to priority

8 CREDITS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim

9 SUPPORTING DOCUMENTS Attach copies of supporting documents, such as promissory notes purchase orders invoices itemized statements of running accounts contracts court judgments mortgages security agreements and evidence of perfection of lien DO NOT SEND ORIGINAL DOCUMENTS If the documents are not available explain If the documents are voluminous attach a summary

10 DATE-STAMPED COPY To receive an acknowledgment of your claim, please enclose a self-addressed, stamped envelope and an additional copy of this proof of claim

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before 5 00 pm, on January 18, 2005 for Non-Government Claimants OR on or before April 7, 2005 for Governmental Units
BY MAIL TO
Oxford Automotive Inc
c/o BMC Group
PO Box 977
El Segundo CA 90245-0977
BY HAND OR OVERNIGHT DELIVERY TO
Oxford Automotive Inc
c/o BMC Group
1330 East Franklin Ave
El Segundo CA 90245

THIS SPACE FOR COURT
FILED
JAN 13 2005
BMC

DATE SIGNED 1/18/05
SIGN and print the name and title if any of the creditor or other person authorized to file this claim (attach copy of power of attorney if any)
WILLIAM DOSTERN PRESIDENT

Oxford Automotive Inc
00329

Pros Services Inc

CASE NO 04-74377, Oxford Automotive, Inc

INVOICE DETAIL REPORT - INVOICES THAT MAKE UP THE SCHEDULED AMOUNT

PROS SERVICES INC
PATRICK LAEDER
PO BOX 610548
2425 PETIT ST
PORT HURON MI 48060-4735

SCHEDULED AMOUNT \$1 066 05

SCHEDULE ID 1548

CREDITOR ID 5693

VENDOR CODE 6669

<i>VENDOR CODE</i>	<i>INVC NUMBER</i>	<i>INVC DATE</i>	<i>BUSINESS UNIT</i>	<i>INVOICE STATUS</i>	<i>INVC AMT</i>
6669	14964	11/05/2004	Lapeer		\$1 066 05
					<hr/> \$1 066 05

11 32 AM
01/10/05

PROS SERVICES, INC
Open Invoices
As of January 10, 2005

<u>Type</u>	<u>Date</u>	<u>Num</u>	<u>P O #</u>	<u>Terms</u>	<u>Due Date</u>	<u>Class</u>	<u>Aging</u>	<u>Open Balance</u>
OXFORD AUTOMOTIVE								
Invoice	11/5/2004	14964		30 Days	12/5/2004	Transpo	36	1,066 05
Invoice	11/22/2004	15053		30 Days	12/22/2004	Transpo	19	1,351 19
Total OXFORD AUTOMOTIVE								2,417 24
TOTAL								2,417 24

INVOICE

DATE	INVOICE #
11/5/2004	14964

BILL TO
OXFORD AUTOMOTIVE 100 E. FAIR ST. LAPEER MI 48446

SHIP TO
OXFORD AUTOMOTIVE 100 E. FAIR STREET LAPEER MI 48446

P O NUMBER	TERMS	REP	SHIP	VIA	FOB	PROJECT
	30 Days	MS	11/4/2004			
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
8	186-57	11-4 DFR T-19260 Vac tanks, Manifest # 9693778				
		3500 Gal Vacuum Tanker			85.00	680.00
680	Transportation	Fuel Surcharge - 10%			0.10	68.00
2,245	Disposal	Disposal Fee oil/water			0.14	314.30
1	Nitrile Glove	Nitrile Gloves (per pair)			3.75	3.75

Thank you for your business.	Total	\$1,066.05
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INVOICE

DATE	INVOICE #
11/22/2004	15953

BILL TO
OXFORD AUTOMOTIVE 100 E. FAIR ST. LAPEER MI 48446

SHIP TO
OXFORD AUTOMOTIVE 100 E. FAIR STREET LAPEER MI 48446

P O NUMBER	TERMS	REP	SHIP	VIA	F O B	PROJECT
	30 Days	MS	11/17/2004			
QUANTITY	ITEM CODE	DESCRIPTION			PRICE EACH	AMOUNT
3.75	186-53	11-17 DFR T-19399 Pickup drums of aerosol cans and light bulbs				
		One Ton Stake Truck			85.00	318.75
318.75	Transportation	Fuel Surcharge - 9%			0.09	28.69
2	Disposal	Disposal Fee of Aerosol Cans			220.00	440.00
1	Disposal	Disposal Fee of Light Bulbs			220.00	220.00
1	Nitrile Glove	Nitrile Gloves (per pair)			3.75	3.75
		11-22 Transportation to EQ				
4	186-53	One Ton Stake Truck			85.00	340.00

We Appreciate Your Business !	Total	\$1,351.19
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