

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

PROOF OF CLAIM

YOUR CLAIM IS SCHEDULED AS

In re
Oxford Automotive, Inc

Case Number
04-74377

Schedule/Claim ID s3731
Amount/Classification
Priority Unliquidated

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 and Address
08111832008895
KINGSLEY TERRANCE
11520 PIERCE RD
SUMNER MI 48889-9710

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

Creditor Telephone Number **(989) 584-6730**
Creditor Federal Tax ID
Account Or Other Number By Which Creditor Identifies Debtor

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

1 BASIS FOR CLAIM
 Goods sold Personal injury/wrongful death Retiree benefits as defined in 11 U.S.C. § 1114(a)
 Services performed Taxes Wages, salaries, and compensation (Fill out below)
 Money loaned Other (describe briefly) **401K Retirement Plan**
 Last four digits of SS # _____
 Unpaid compensation for services performed from _____ to _____ (date) (date)

2 DATE DEBT WAS INCURRED **6-5-03** **3 IF COURT JUDGMENT, DATE OBTAINED**

4 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED
 \$ _____ (unsecured) \$ _____ (secured) \$ **140.59** (unsecured priority) \$ _____ (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. Attach itemized statement of all interest or additional charges.

5 SECURED 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 \$ _____

7 UNSECURED PRIORITY CLAIM
 Check this box if you have an unsecured priority claim.
 Amount entitled to priority \$ **140.59**
 Specify the priority of the claim:
 Wages, salaries, or commissions (up to \$4,925)* earned within 90 days before filing of the bankruptcy petition or cessation of the Debtor's business, whichever is earlier. 11 U.S.C. § 507(a)(3).
 Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(4).
 Up to \$2,225* of deposits toward purchase, lease, or rental of property or services for personal family or household use. 11 U.S.C. § 507(a)(6).
 Alimony, maintenance, or support owed to a spouse, former spouse, or child. 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) (____).
* Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

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 USE ONLY
FILED
JAN 28 2005
BMC
 Oxford Automotive, Inc
 01521

DATE SIGNED
12-24-04

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).
Terrance Edward Kingsley Terrance Edward Kingsley

INSTRUCTIONS FOR FILING PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In particular types of cases or circumstances such as bankruptcy cases that are not filed voluntarily by a debtor there may be exceptions to the general rules

DEFINITIONS

DEBTOR

The person corporation or other entity that has filed a bankruptcy case is called the debtor

CREDITOR

A creditor is any person corporation or other entity to whom the debtor owed a debt on the date that the bankruptcy case was filed

PROOF OF CLAIM

A form telling the bankruptcy court how much the debtor owed a creditor at the time the bankruptcy case was filed (the amount of the creditor's claim). This form must be filed with the court appointed Claims Agent The BMC Group Inc at the address listed on the reverse side of this page

SECURED CLAIM

A claim is a secured claim to the extent that the creditor has a lien on the property of the debtor (collateral) that gives the creditor the right to be paid from that property before creditors who do not have liens on the property

Examples of liens are a mortgage on real estate and a security interest in a car truck boat television set or other item of property. A lien may have been obtained through a court proceeding before a bankruptcy case began. In some states a court judgment is a lien. In addition to the extent a creditor also owes money to the debtor (has a right of setoff) the creditor's claim may be a secured claim. (See also Unsecured Claim)

UNSECURED CLAIM

If a claim is not a secured claim it is an unsecured claim. A claim may be partly secured and partly unsecured if the property on which a creditor has a lien is not worth enough to pay the creditor in full

UNSECURED PRIORITY CLAIM

Certain types of unsecured claims are given priority so they are to be paid in bankruptcy cases before most other unsecured claims (if there is sufficient money or property available to pay these claims). The most common types of priority claims are listed on the proof of claim form. Unsecured claims that are not specifically given priority status by the bankruptcy laws are classified as Unsecured Nonpriority Claims

ITEMS TO BE COMPLETED IN PROOF OF CLAIM FORM (IF NOT ALREADY PROPERLY FILLED IN)

Name of Debtor, and Case Number

Fill in the name of the debtor in the bankruptcy case against whom you wish to assert a claim and the relevant bankruptcy case number. Debtor names and case numbers are as follows

Debtor Name	Case No
Oxford Automotive, Inc	04-74377
Oxford Automotive Alabama, Inc	04-74387
Lobdell Emery Corporation	04-74386
Howell Industries, Inc	04-74381
Oxford Suspension, Inc	04-74390
RPI Holdings, Inc	04-74391
Prudenville Manufacturing, Inc	04-74389
RPI Inc	04-74392
OASP, Inc	04-74388
OASP II, Inc	04-74380
CE Technologies, Inc	04-74379
Tool and Engineering Company	04-74393

Information about Creditor

If not already accurately pre-printed, complete the section giving the name, address, and telephone number of the creditor to whom the debtor owes money or property, and the debtor's account number, if any. If (a) anyone else has already filed a proof of claim relating to this debt, (b) if you never received notices from the Claims Agent, BMC Group, about this case, (c) if your address differs from that to which the Claims Agent sent this notice, or (d) if this proof of claim replaces or amends a proof of claim that was already filed, check the appropriate boxes on the form

1 Basis for Claim

Check the type of debt for which the proof of claim is being filed. If the type of debt is not listed check "Other" and briefly describe the type of debt. If you were an employee of the debtor, fill in your social security number and the dates of work for which you were not paid

2 Date Debt Incurred

Fill in the date when the debt first was owed by the debtor

3 Court Judgments

If you have a court judgment for this debt, state the date the court entered the judgment

4 Total Amount of Claim at Time Case Filed

Fill in the applicable amounts including the total amount of the entire claim. If interest or other charges in addition to the principal amount of the claim are included, check the appropriate place on the form and attach an itemization of the interest and charges

5 Secured Claim

If your claim is a secured claim, check the appropriate boxes in this section. You must state the type and value of property that is collateral for the claim, attach copies of the documentation of your lien, and state the amount past due on the claim as of the date the bankruptcy case was filed. A claim may be partly secured and partly unsecured. (See DEFINITIONS, above)

6 Unsecured Nonpriority Claim

If your claim is an unsecured nonpriority claim, sometimes referred to as a "general unsecured claim" (See DEFINITIONS, above) check the appropriate box in this section. If your claim is partly secured and partly unsecured, state here the amount that is unsecured. If part of your claim is entitled to priority, state here the amount not entitled to priority

7 Unsecured Priority Claim

If your claim is an unsecured priority claim (See DEFINITIONS, above), check the appropriate boxes in this section, and state the amount entitled to priority. A claim may be partly priority and partly nonpriority if, for example, the claim is for more than the amount given priority by the law. Check the appropriate place to specify the type of priority claim

8 Credits

By signing this proof of claim, you are stating under oath that in calculating the amount of your claim you have given the debtor credit for all payments received from the debtor

9 Supporting Documents

You must attach to this proof of claim form copies of documents that show the debtor owes the debt claimed or, if the documents are too lengthy a summary of those documents. If documents are not available you must attach an explanation of why they are not available

Please read – important information upon completion of this claim form, you are certifying that the statements herein are true.

Be sure to date the claim and place original signature of claimant or person making the claim for creditor where indicated at the bottom of the claim form. Please type or print name of individual under the signature. Be sure all items are answered on the claim form. If not applicable, insert "Not Applicable"

Return claim form and attachments, if any. If you wish to receive an acknowledgement of your claim, please enclose a self-addressed stamped envelope and a second copy with any attachments to the Claims Agent, The BMC Group, Inc at the address on the front of this form



0000697 034-000-0000557630



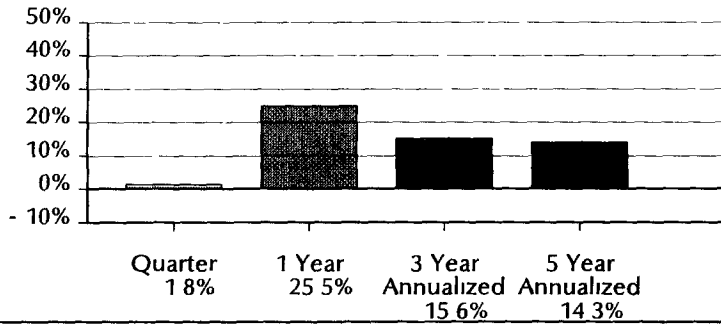
TERRANCE E KINGSLEY
11520 W Pierce Road
SUMNER MI 48889-9710

Important Carefully review your statement to ensure its accuracy If you believe there is a discrepancy you must report it to your company's plan representative within 5 business days

INVESTMENT PERFORMANCE ** (continued)

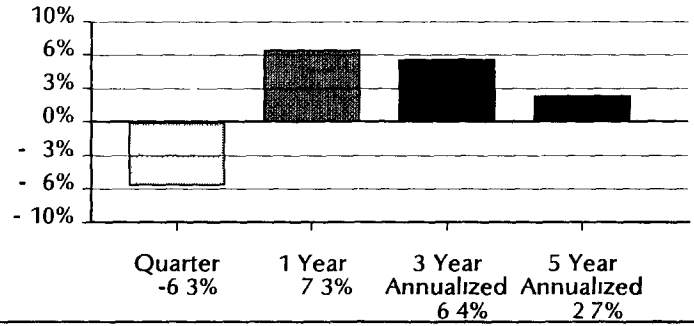
FRANKLIN BALANCE SHEET INV

Fund Type **STOCK**
 Description **GROWTH & INCOME**



FIFTH THIRD SMALL CAP GROWTH

Fund Type **STOCK**
 Description **SMALL CAP**



** This information was provided by Wiesenberger a division of Thomson Financial Inc or by the Fund's Investment Manager and other sources and has not been independently reviewed by Fifth Third Bank



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OXFORD AUTOMOTIVE, INC HOURLY SAVINGS PLAN

TERRANCE E KINGSLEY

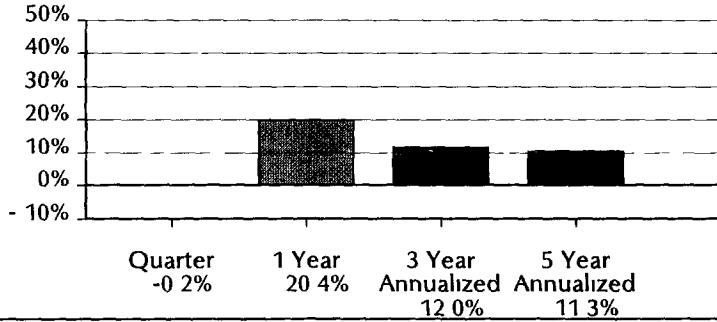
Account Statement

For Period 07/01/2004 through 09/30/2004

INVESTMENT PERFORMANCE ** (continued)

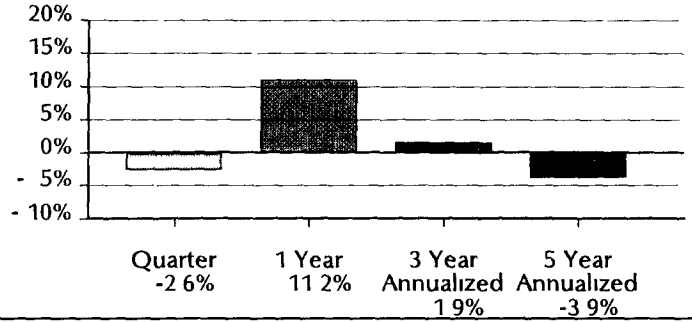
DODGE & COX STOCK FUND

Fund Type **STOCK**
Description **GROWTH & INCOME**



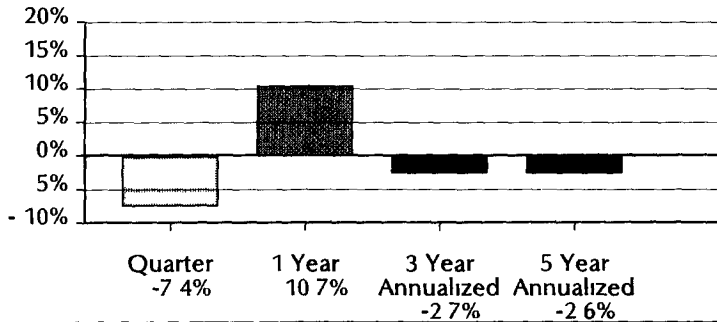
MASS FIN SERV CAPITAL OPP

Fund Type **STOCK**
Description **GROWTH - DOMESTIC**



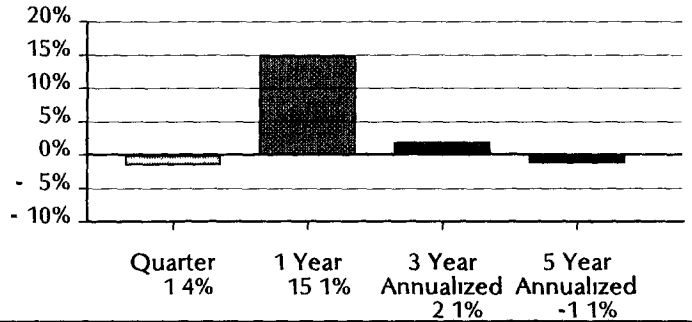
MASS FIN SERV MID CAP GRTH

Fund Type **STOCK**
Description **MID CAP**



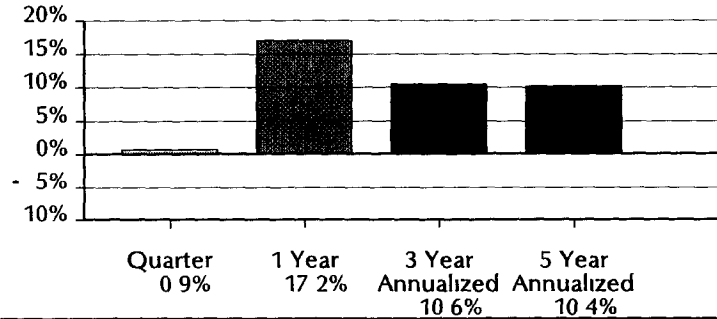
AMER CENT INTL EQTY GRTH

Fund Type **STOCK**
Description **NON-US EQUITY**



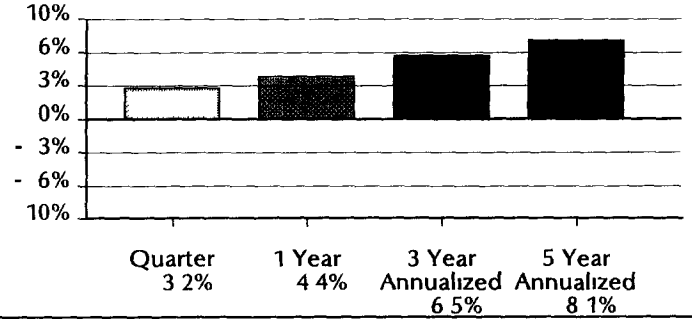
AMER CENT EQUITY INCOME

Fund Type **STOCK**
Description **EQUITY INCOME**



PIMCO TOTAL INVESTMENT

Fund Type **BOND**
Description **GENERAL BD - INVESTMENT GRADE**





0000697 034-000-0000557630



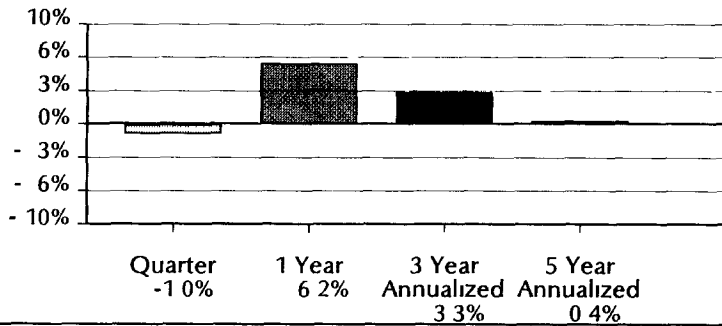
TERRANCE E KINGSLEY
 11520 W Pierce Road
 SUMNER MI 48889-9710

Important Carefully review your statement to ensure its accuracy If you believe there is a discrepancy you must report it to your company's plan representative within 5 business days

INVESTMENT PERFORMANCE **

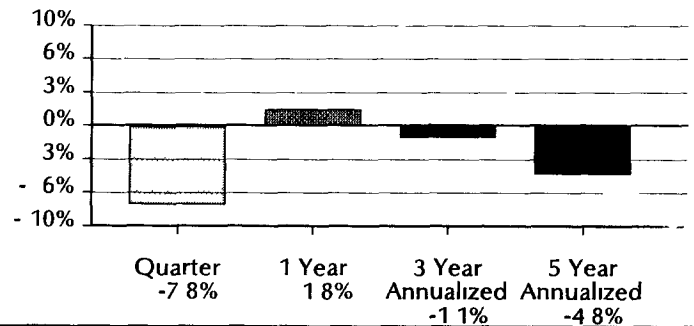
FIFTH THIRD BALANCED FUND

Fund Type **BALANCED**
 Description **BALANCED - DOMESTIC**



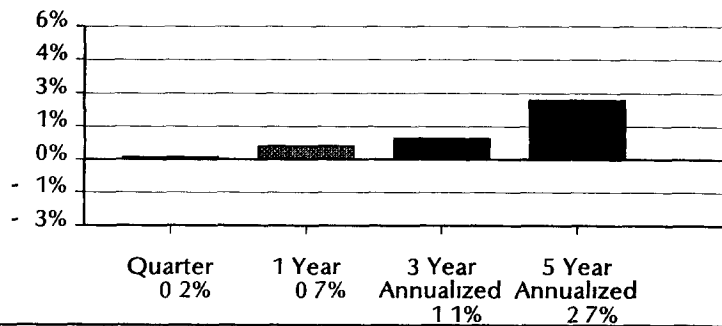
FIFTH THIRD QUALITY GROWTH FD

Fund Type **STOCK**
 Description **GROWTH - DOMESTIC**



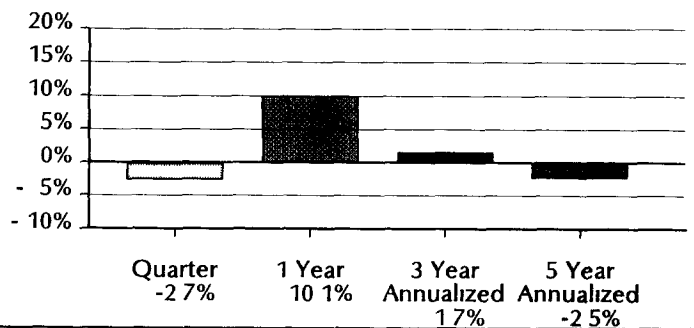
FIFTH THIRD PRIME MONEY MKT

Fund Type **CASH**
 Description



FIDELITY MAGELLAN

Fund Type **STOCK**
 Description **GROWTH - DOMESTIC**





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How do I invest? Start by being an informed investor. Look at your asset allocation - how you choose to invest your money among the different asset classes such as cash equivalents, bonds and stocks. The right asset allocation not only helps balance risk and return but also can help you decide your investing strategy. Visit Retire 53.com to learn more about asset allocation.

OXFORD AUTOMOTIVE, INC HOURLY SAVINGS PLAN

TERRANCE E KINGSLEY

Account Statement

For Period 07/01/2004 through 09/30/2004

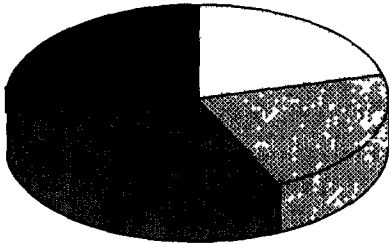
Beginning Balance	\$140 66
Contributions & Other Credits	0 00
Gains/(Losses)	(0 07)
Distributions & Other Debits	0 00
Ending Balance	\$140 59

ACTIVITY SUMMARY

SUMMARY	BEGINNING BALANCE	CONTRIBUTIONS & OTHER CREDITS	GAINS/ (LOSSES)	DISTRIBUTIONS & OTHER DEBITS	ENDING BALANCE	VESTED PERCENT	VESTED BALANCE
EMPLOYER MATCH	140 66	0 00	(0 07)	0 00	140 59	40 00%	56 23
	\$140 66	\$0 00	(\$0 07)	\$0 00	\$140 59		\$56 23

ASSET ALLOCATION SUMMARY

BALANCES AS OF 09/30/2004	FUND CLASS / NAME	BALANCES AS OF 09/30/2004	BALANCES AS % OF TOTAL	INVESTMENT ELECTIONS
	CASH (21 2%)			
	<input type="checkbox"/> FIFTH THIRD PRIME MONEY MKT	29 84	21 22%	25%
	BOND (22 3%)			
	<input checked="" type="checkbox"/> PIMCO TOTAL INVESTMENT	31 29	22 26%	25%
	STOCK (56 5%)			
	<input checked="" type="checkbox"/> DODGE & COX STOCK FUND	41 82	29 75%	25%
	<input checked="" type="checkbox"/> MASS FIN SERV CAPITAL OPP	37 64	26 77%	25%
	TOTAL	\$140 59	100 00%	100%



INVESTMENT SUMMARY

ACCOUNT ACTIVITY	BEGINNING BALANCE	CONTRIBUTIONS & OTHER CREDITS	GAINS / (LOSSES)	DISTRIBUTIONS & OTHER DEBITS	FUND TRANSFERS	ENDING BALANCE	CLOSING SHARE PRICE	NUMBER OF SHARES
FIFTH THIRD PRIME MONEY MKT	29 76	0 00	0 08	0 00	0 00	29 84	1 00	29 8400
DODGE & COX STOCK FUND	41 92	0 00	(0 10)	0 00	0 00	41 82	118 93	0 3516
MASS FIN SERV CAPITAL OPP	38 67	0 00	(1 03)	0 00	0 00	37 64	11 98	3 1416
PIMCO TOTAL INVESTMENT	30 31	0 00	0 98	0 00	0 00	31 29	10 92	2 8656
Total	\$140 66	\$0 00	(\$0 07)	\$0 00	\$0 00	\$140 59		