UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

PROOF OF CLAIM

In re

Case Number

YOUR CLAIM IS SCHEDULED AS

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

05708375030116
RF INTERNATIONAL LTD
STE E - 100
1981 MARCUS AVE
NEW HYDE PARK, NY 11042-1038

Creditor Telephone Number (516 616-2402

☐ 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

If you have already filed a proof of claim with the Bankruptcy Court or BMC you do not need to file again

CREDITOR TAX I D # 13-2637752

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR 1WICINT

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 (describe briefly)
☐ Retiree benefits as defined in 11 U S C § 1114(a)
☐ Wages salaries, and compensation (Fill out below)

Your social security number _____

Unpaid compensation for services performed from _____ (date) to _____ (date)

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE $ 656 56 (unsecured) $ _____ (secured) $ _____ (unsecured priority)

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 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 above if any $ _____

6 UNSECURED PRIORITY CLAIM

☐ Check this box if you have an unsecured priority claim

Specify the priority of the claim

☐ Wages salaries or commissions (up to $4 650*) 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 $2 100* 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 4/1/01 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment

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

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 documents are not available explain If the documents are voluminous attach a summary

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

An original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is received on or before the Deadline to File a Proof of Claim as set forth in the "NOTICE OF COMMENCEMENT OF CASE UNDER CHAPTER 11 OF THE BANKRUPTCY CODE, MEETING OF CREDITORS FIXING OF CERTAIN DATES AND SETTING OF CERTAIN CASE MANAGEMENT AND ADMINISTRATIVE PROCEDURES "

BY MAIL TO
Wickes Inc c/o Bankruptcy Management Corporation
P O BOX 1016
El Segundo CA 90245-1016

BY HAND OR OVERNIGHT DELIVERY TO
Wickes Inc c/o Bankruptcy Management Corporation
1330 East Franklin Avenue
El Segundo CA 90245

THIS SPACE FOR COURT USE ONLY

FILED

APR 2 2 2004

BMC
Wickes Inc
00544

SIGNED 19-04

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)

AIR SUPERVISOR

Penalty for presenting fraudulent claim is a fine of up to $500 000 or imprisonment for up to 5 years or both 18 U S C §§ 152 AND 3571

Statement

RF International Ltd
1981 MARCUS AVENUE
SUITE E100
Lake Success NY 11042
Voice (516)616-2400 Ext
Fax (516)437-8916 Ext

Page	
Statement Date	4/19/200
Credit Limit	99 999 0(
Available Credit	99 342 3:
Currency	USD

Customer Wickes International
706 North Deerpath Drive
Vernon Hills IL 60061 USA

Telephone Ext
Fax Ext

ATTENTION MATT RICHARD JIMMY CINDY STEVE MARIELLE FROM A

Contact

Salesperson MATTHEW FLEISIG

Date	Date Due	Invoice No.		Description	Amount	Balance
10/7/2002	10/7/2002	185192-1-IN	185192	CL- A/BILL--INV 69133	380 00	380 00
10/7/2002	10/7/2002	185192-2-IN	185192-2	CL- 599-TRI-007	276 65	276 65

Balance Due USD 656 65

Current	Over 30 Days	Over 60 Days	Over 90 Days	Over 120 Days
0 00	0 00	0 00	0 00	656 65