UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

PROOF OF CLAIM

In re

Wickes Inc

Case Number

04-B-02221-BWB

YOUR CLAIM IS SCHEDULED AS

$641 00 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

Name of Creditor and Address

05707908025873
OSSIPEE MOUNTAIN ELECTRONICS
832 WHITTIER HIGHWAY
PO BOX 950
MOULTONBORO, NH 03254-0950

Creditor Telephone Number (603 476-5581

The amounts reflected above constitute your claim as scheduled by the Debtor 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 a proof of claim must be filed
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 #	ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR	Check here if this claim ☐ replaces or ☐ amends a previously filed claim dated
02-0475638	WIC425	

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 12/03 Thru 01/04

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE $ 641.00 (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

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

8 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

9 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 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

MAY 03 2004

BMC

Wickes Inc

01006

DATE SIGNED	**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)
4-26-04	Stephanie Fouste, secretary of corporation

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

OSSIPEE MOUNTAIN ELECTRONICS, INC.
P O BOX 950 - 832 WHITTIER HWY
MOULTONBORO, NH 03254
603-476-5581 - FAX 603-476-5587

INVOICE

COPY

BILL TO
Wicker Lumber
PO Box 669
Meredith NH 03253

SHIP TO

33985	34128 WIC425	Net 30 Days	
01/22/04	01/15/04		46

		S/O:00100015602 Date:01/15/04 Tech:48 Dick Rohde Equ#:M44DGC9502 Ser#:164F200891		
		LABMIN MINIMUM LABOR CHARGE REPLACED BROKEN ANT		30.00
1	EA	ASP7655 A/S Conv Ant 5 dB Gain MOSAIC	38.25	38.25
		Total Labor: .00 Total Parts: 38.25 Total Other: 30.00		
		Subtotal		68.25
		Total Due On 02/21/04		68.25

If payment is not received within 30 days of the invoice date a finance charge of 2% per month will be assessed on all past due invoices If purchaser fails to pay within 60 days of invoice date purchaser shall be responsible for all reasonable Attorney s fees and collection fees incurred in the collection of all past due invoice and interest charges
WORK PERFORMED ON ALL REPAIRS WILL BE WARRANTEED 30 DAYS

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P O BOX 950 - 832 WHITTIER HWY
MOULTONBORO, NH 03254
603-476-5581 - FAX 603-476-5587

INVOICE

COPY

BILL TO
Wickes Lumber
PO Box 669
Meredith NH 03253

SHIP TO
Wickes Lumber
PO Box 669
Meredith NH 03253

32831	32921 WIC425	Net 30 Days	
12/01/03	12/01/03	For: 01/01/04 - 03/31/04	DEF

Contract#: 1	
FARAWAY TI	378.00
MT FARAWAY II REPEATER CHG	
9 UNITS	
Subtotal	378.00
Total Due On 12/31/03	378.00

If payment is not received within 30 days of the invoice date a finance charge of 2% per month will be assessed on all past due invoices If purchaser fails to pay within 60 days of invoice date purchaser shall be responsible for all reasonable Attorney's fees and collection fees incurred in the collection of all past due invoice and interest charges
WORK PERFORMED ON ALL REPAIRS WILL BE WARRANTEED 30 DAYS

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MOULTONBORO, NH 03254
603-476-5581 - FAX 603-476-5587

INVOICE

COPY

BILL TO: Wickes Lumber
PO Box 669
Meredith NH 03253

SHIP TO

33322 33467 WIC425 Net 30 Days
12/15/03 12/10/03 46

S/O:00100015290 Date:12/10/03
Tech:52 NOLAN R CRAW

1		* Hole Plug, 3/4"	0.750	.75
1	EA	MR8X 3/4 Hole RG-8X Cable No Conn	19.75	19.75
1	EA	ASP7655 A/S Conv Ant 5 dB Gain MOSAIC	38.25	38.25
1	EA	RFU600-JF Mini UHF crimp on connector	4.000	4.00
1	Hrs	LABINSDASH INSTALL BASE OUT MOBILE INSTALLED RADIO IN F PICKUP [illegible]	92.000	92.00
1	Hrs	LABSTRIP LABOR - STRIP VEHICLE STRIPPED RADIO OUT OF MITSUBISHI FLATBED, PLUGGED HOLE IN ROOF.	40.000	40.00

Total Labor: 132.00
Total Parts: 62.75
Total Other: .00

Subtotal 194.75
Total Due On 01/14/04 194.75

If payment is not received within 30 days of the invoice date, a finance charge of 2% per month will be assessed on all past due invoices. If purchaser fails to pay within 60 days of invoice date purchaser shall be responsible for all reasonable Attorney's fees and collection fees incurred in the collection of all past due invoice and interest charges
WORK PERFORMED ON ALL REPAIRS WILL BE WARRANTEED 30 DAYS