

U S Bankruptcy Court		PROOF OF CLAIM
District of DE		
In re (Name of Debtor) Women First Healthcare Inc	Case Number 04-11278 Chapter 11	

REC'D JUL 08 2004

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 U S C § 503

THIS SPACE IS FOR COURT USE ONLY

Name of Creditor (The Person or other entity to whom the debtor owes money or property) <b>Pitney Bowes Credit Corporation</b>	<input type="checkbox"/> 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 <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court
Name and Address Where Notices Should be Sent <b>Pitney Bowes Credit Corporation</b> Attn Recovery Dept 27 Waterview Dr Shelton, CT 06484-4361	
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR 3455772-002	<input type="checkbox"/> Check here if this claim replaces a previously filed claim <input type="checkbox"/> amends claim

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 \_\_\_\_\_ to \_\_\_\_\_  
 (date) (date)

2 DATE DEBT WAS INCURRED 4/30/2002	3 IF COURT JUDGMENT DATE OBTAINED
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3 CLASSIFICATION OF CLAIM Under the Bankruptcy Code all claims are classified as one or more of the following (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured It is possible for part of a claim to be in one category and part in another CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED

4 <input type="checkbox"/> SECURED CLAIM \$ Attach evidence of perfection of security interest Brief Description of Collateral <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly)	Specify the priority of the claim <input type="checkbox"/> Wages, salaries, or commissions (up to \$4000),*earned not more than 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) <input type="checkbox"/> Contributions to an employee benefit plan-11 U S C § 507 (a)(4) <input type="checkbox"/> Up to \$1,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use-11 U S C § 507 (a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child-11 U S C § 507 (a)(7) <input type="checkbox"/> Taxes or penalties of governmental units-11 U S C § 507 (a)(8) <input type="checkbox"/> Other-Specify applicable paragraph of 11 U S C 507 (a)
Amount of arrearage and other charges at time case filed included in secured claim above, if any <input checked="" type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$17,482 60 A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim <input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ <input type="checkbox"/> Arrears	*Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after date of adjustment

5 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED	Secured Claim	Unsecured Non Priority	Unsecured Priority	\$17 482 60 *
		\$17,482 60		(Total)

Check this box if claim includes charges in addition to the principal amount of the claim Attach itemized statement of all additional charges

6 CREDITS AND SETOFFS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim In filing this claim, claimant has deducted all amounts that claimant owes to debtor

7 SUPPORTING DOCUMENTS Attach copies of supporting documents, such as promissory notes purchase orders invoices itemized statements of running accounts contracts court judgments or evidence of security interests If the documents are not available explain If the documents are voluminous attach a summary

8 TIME STAMPED COPY To receive an acknowledgement of the filing of your claim, enclose a stamped self addressed envelope and copy of this proof of claim

THIS SPACE IS FOR COURT USE ONLY

Date 6/29/04	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)  <i>Eva Milanowski</i> Eva Milanowski, Bankruptcy Specialist
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11-1-04

\*If legal or collection fees are incurred, they may be added to this total



Pitney Bowes Credit Corporation  
 Bankruptcy Department

REJECTION DAMAGES CLAIM

DATE June 29, 2004

STATEMENT OF ACCOUNT

LESSEE NO# 3455772

SCHEDULE# 002

CUSTOMER NAME Women First Health Care

\*PAYMENT NOT RECEIVED 1 PAYMENTS @ \$ 762 60  
 9 \$1,488 00

LESS ESTIMATED RESALE VALUE OF  
 EQUIPMENT AFTER EXPENSES TO COVER  
 RECOVERING, REFURBISHING AND REMARKETING \$3,328 00

(INCLUDES SALES TAX WHERE APPLICABLE)

LATE CHARGE -0-

TOTAL CLAIM \$17,482 60

<u>INVOICE DATE</u>	<u>AMOUNT</u>	<u>PERIOD COVERING</u>
4/13/04	\$ 762 60	6/29/04 - 7/30/04
7/13/04 - 7/13/06	\$13,392 00	7/30/04 - 10/30/06

PREPARED BY

  
 Eva Milanowski, Bankruptcy Specialist



Pitney Bowes Credit Corporation  
27 Waterview Drive  
Shelton, CT 06484  
1-800-243-9506 x4582  
Fax (203) 922-4340  
E-mail [Eva.Milanowski@pb.com](mailto:Eva.Milanowski@pb.com)

June 29, 2004

Michael R Nestor, Esq  
Young Conaway Stargatt & Taylor  
The Brandywine Building  
1000 West St, 17th Floor  
Wilmington, DE 19899

RE Women First Healthcare Inc Case# 04-11278  
Pitney Bowes Credit Corp Lease #3455772-002

Dear Michael R Nestor, Esq

Pitney Bowes Credit Corporation is a creditor with an unsecured claim of Lease payments in the above referenced bankruptcy proceeding

Would you please advise us at your earliest convenience, of intended treatment of our claim? If treatment is unknown at this time, could you advise us of expected time frame in which this should be determined?

Your prompt response would be greatly appreciated

Very truly yours,

A handwritten signature in cursive script, appearing to read "Eva Milanowski".

Eva Milanowski  
Bankruptcy Specialist



Pitney Bowes Credit Corporation  
27 Waterview Drive  
Shelton, CT 06484  
1-800-243-9506 x4582  
Fax (203) 922-4340  
E-mail Eva.Milanowski@pb.com

June 29, 2004

Women First Health  
5355 Mira Sorrento Place  
San Diego, CA 92121

RE Women First Healthcare Inc Case# 04-11278  
Pitney Bowes Credit Corp Lease #3455772-002  
**Chapter 11**

Dear Women First Health

Pitney Bowes Credit Corporation is a creditor with an unsecured claim of Lease payments in the above referenced bankruptcy proceeding

Would you please advise us at your earliest convenience, of intended treatment of our claim? If treatment is unknown at this time, could you advise us of expected time frame in which this should be determined?

Your prompt response would be greatly appreciated

Very truly yours,

A handwritten signature in cursive script that reads "Eva Milanowski".

Eva Milanowski  
Bankruptcy Specialist