
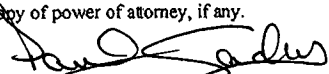



UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		PROOF OF CLAIM
Name of Debtor: Urban Brands, Inc.		Case Number: 10-13005-KJC
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): KANSAS CITY POWER & LIGHT(377)		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (if known) Filed on: _____
Name and address where notices should be sent: 25641042026529 KANSAS CITY POWER & LIGHT(377) PO Box 418679 K.C.Mo 64141-8679		
 YOUR CLAIM IS SCHEDULED AS: SCHEDULE ID: s1712 AMOUNT/CLASSIFICATION: \$2,113.63 UNSECURED		
Name and address where payment should be sent (if different from above):		<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 this box if you are the debtor or trustee in this case.
RECEIVED DEC 13 2010 BMC GROUP Telephone No.		
1. Amount of Claim as of Date Case Filed: <u>\$ 1714.88</u> If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> 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 charges		5. Amount of claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commission (up to \$11,725*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, which ever is earlier -- 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5). <input type="checkbox"/> Up to \$2,600* of deposits toward purchase lease, or rental of property or services for personal, family, or household use -- 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units -- 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Section 503(b)(9) Claim -- check this box if your claim is for the value of goods received by the Debtor within 20 days before the commencement of the case -- 11 U.S.C. § 503(b)(9). <input type="checkbox"/> Other -- Specify applicable paragraph of 11 U.S.C. § 507(a)(____). Amount entitled to priority: \$ _____ * Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
2. Basis for Claim: <u>UTILITY</u> (See instruction #2 on reverse side.)		
3. Last four digits of any number by which creditor identifies debtor: _____ 3a. Debtor may have scheduled account as: _____ (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate: _____ % Amount of arrearage and other charges as of time case filed included in secured claim, if any: \$ _____ Basis for Perfection: _____ Amount of Secured Claim: \$ _____ Amount Unsecured: <u>\$ 1714.18</u>		
6. Amount of Claim that qualifies as an Administrative Expense under 11 U.S.C. § 503(b)(9): \$ _____ (See instruction #6 on reverse side.)		
7. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 8. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENT MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:		
Date: <u>12.7.10</u>	Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. <u>PAUL SANDERS</u>  SR. CLERK	
		FOR COURT USE ONLY Urban Brands  00304

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

In re:)	Chapter 11
)	
UBI Liquidating Corp., et al., ¹)	Case No. 10-13005 (KJC)
)	
Debtors.)	Jointly Administered
)	

**NOTICE OF DEADLINES FOR FILING PROOFS OF CLAIM AGAINST DEBTOR
[INCLUDING ANY CLAIMS PURSUANT TO 11 U.S.C. § 503(B)(9)]**

TO: ALL ENTITIES WHO MAY HAVE CLAIMS AGAINST THE DEBTOR LISTED BELOW:

PLEASE TAKE NOTICE THAT:

1. On September 21, 2010 (the "Petition Date"), the Debtors filed voluntary petitions for relief under chapter 11 of title 11 of the United States Code (the "Bankruptcy Code") in the United States Bankruptcy Court for the District of Delaware (the "Court"). Set forth below are the name, federal tax identification number, and the case number for each of the Debtors:

DEBTOR	EIN	CASE NO.
UBI Liquidating Corp. f/k/a Urban Brands, Inc.	51-0373678	10-13005
100% Girls Ltd.	22-3614150	10-13022
100% Girls of Georgia, Inc.	22-3614159	10-13009
100% Girls of New York, Inc.	22-3572149	10-13012
100% Girls of New Jersey, Inc.	22-3614167	10-13034
A.S. Interactive, Inc.	26-1793472	10-13015
ASL Liquidating Corp. f/k/a Ashley Stewart, Ltd.	13-3614541	10-13027
Ashley Stewart Apparel Corporation	22-3494049	10-13057
Ashley Stewart Clothing Company, Inc.	22-3494051	10-13016
ASMCI Liquidating Corp. f/k/a Ashley Stewart Management Co.	22-3494053	10-13006
ASWL Liquidating Corp. f/k/a Ashley Stewart Woman Ltd.	22-3614152	10-13021
ASIL 6, Inc.	22-3493996	10-13004
ASNJ 10, Inc.	22-3494004	10-13056
Carraizo Alto Apparel Corporation	22-2234651	10-13007
Church Street Retail, Inc.	13-3665954	10-13040
Kid Spot Ltd.	22-3612585	10-13024
Kidspot of Delaware, Inc.	22-3612596	10-13008
Kidspot of Illinois, Inc.	22-3612606	10-13033
Kidspot of Michigan, Inc.	22-3612603	10-13053
Kidspot of New Jersey, Inc.	22-3612601	10-13020
Kidspot of Ohio, Inc.	22-3664705	10-13051
Kidspot of Pennsylvania, Inc.	22-3612599	10-13028
Kidspot of Texas, Inc.	22-3623809	10-13047
Large Apparel of Alabama, Inc.	22-3760624	10-13031
Large Apparel of California, Inc.	22-3592129	10-13032

¹ The Debtors' corporate offices are located at 100 Metro Way, Secaucus, New Jersey 07094.



Customer Name : **APPAREL OF MISSOURI**
 Service Address : **3105 PROSPECT APT 3**
 Account Number : **1432-32-2988**

Due upon receipt : **\$ 1,714.88**

Message Board

Call before you dig. Anytime you plan to dig, whether as part of a construction job or homeowner project, you are required by law in Missouri to call, **1-800-DIG-RITE**. You can also call **811**. This national one-call hotline automatically connects you with your state service.

Account Summary

for service from 08/19/2010 to 09/21/2010

Previously Billed	\$ 2,113.63
Current Charges <i>(details on back)</i>	
3105 PROSPECT APT 3	938.94
Adjustments <i>(details on back)</i>	<u>- 1,337.69</u>
Due upon receipt	\$ 1,714.88
Late charge if received after October 29, 2010	<u>12.66</u>
Amount due with late charge	\$ 1,727.54

FINAL BILL

Please return this portion with your payment. Thank you.

Customer Name : **APPAREL OF MISSOURI**
 Service Address : **3105 PROSPECT APT 3**
 Account Number : **1432-32-2988**
 Billing Date : 10/08/2010

Due upon receipt : **\$ 1,714.88**
 Payment must be received by : **October 29, 2010**

Amount Enclosed : \$ _____

CHECK HERE
 to indicate address or phone
 changes on back of stub



L1 APPAREL OF MISSOURI
 ASHLEY STEWART, STORE 377
 C/O COLLECTION DEPT
 PO BOX 418679
 KANSAS CITY MO 64141-9679

Please return payment to:

KCP&L
 PO BOX 219330
 KANSAS CITY MO 64121-9330



TIER3



December 7, 2010

BMC Group, Inc.
Attn: Urban Brands Claims Processing
PO Box 3020
Chanhassen, MN 55317

RE: PROOF OF CLAIM

Dear Sir:

Enclosed, in duplicate, is our Proof of Claim, for electric service as shown below:

<u>Name/Address</u>	<u>Account#</u>	<u>Case#</u>	<u>Amount</u>
Apparel of Missouri 3105 Prospect, Apt.	1432322988	10-13005	\$1714.88
		Total	\$1714.88

Please return a copy of the claim stamped with your file date. A self-addressed stamped envelope is enclosed for your convenience.

Sincerely,
Paul Sanders

Credit & Collection Department