
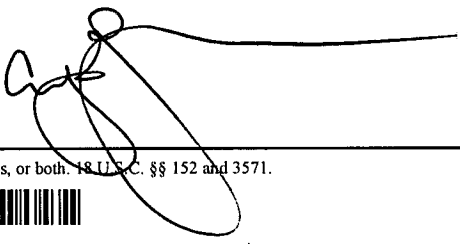


UNITED STATES BANKRUPTCY COURT - DISTRICT OF DELAWARE WILMINGTON DIVISION		PROOF OF CLAIM Chapter 11
Name of Debtor: UBI LIQUIDATING CORP AKA: URBAN BRANDS, INC.		Judge KEVIN J CAREY Case Number: 10-13005-KJC
NOTE: This form should not be used to make a claim for an administrative expense arising after 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): American Express Travel Related Services Co, Inc Corp Card		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number: _____  Filed on: _____
Name and address where notices should be sent: Becket and Lee LLP Attorneys/Agent for Creditor POB 3001 Malvern, PA 19355-0701  Telephone number: 610-644-7800		
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.
Telephone number:		
1. Amount of Claim as of Date Case Filed: \$ <u>102,616.70</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 additional 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 commissions (up to \$11,725*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever 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"/> Other - Specify applicable paragraph of 11 U.S.C. §507(a)(____).  Amount entitled to priority:  \$ _____  <i>*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.</i>
2. BASIS FOR CLAIM: <u>CREDIT CARD DEBT</u> (See instruction #2 on reverse side.)		
3. Last four digits of account or other number by which creditor identifies debtor: <u>*****1005</u>  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: \$ _____		
6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.		
7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgements, 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 definition of "redacted" on reverse side.)  DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.  If the documents are not available, please explain:		
Date: 1/10/11		FOR COURT USE ONLY
Crystal Jones Oswald, Esquire Michelle L. McGowan, Esquire Becket & Lee LLP, Attorneys/Agent for Creditor		URBAN BRANDS  00447 Urban Brands






**Corporate Card  
Statement of Account**

**Sign-up For Online  
Statements**

[www.americanexpress.com/checkyourbill](http://www.americanexpress.com/checkyourbill)

Prepared For  
**MICHAEL ABATE  
AMEXCO COLLECTIONS**

Account Number  
**1005**

Closing Date  
**11/25/10**

Page 1 of 2

**Balance Please Pay By  
Due \$ 12/10/10**

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	
102,745.98	0.00	0.00	129.28	0.00	<b>102,616.70</b>

For important information regarding your account refer to page 2.

**Account cancelled. Return all charge cards. Pay balance by 12/10/10 and avoid further delinquency charge.**

To manage your Account online or to pay your bill, please visit us at [corp.americanexpress.com](http://corp.americanexpress.com). For additional contact information, please see the reverse side of this page.

**Activity** Date reflects either transaction or posting date

Card Number	Reference Code	Amount \$
<b>1005</b>		
10/30/10 PAYMENT RECEIVED - THANK YOU	10/30 0432900000	-129.28
<b>Total for MICHAEL ABATE</b>	New Charges/Other Debits Payments/Other Credits	0.00 -129.28

↓ Please fold on the perforation below, detach and return with your payment ↓  
Do not staple or use paper clips  
**Payment Coupon**

Account Number  
**1005**

**Please Pay By  
12/10/10**

Payable upon receipt in U.S. Dollars.

Please enter account number on all checks and correspondence.

**Amount Due  
\$102,616.70**


Checks or drafts must be drawn against banks located in the U.S.

Check here if address, telephone number, or e-mail address has changed. Note changes on reverse side.

**MICHAEL ABATE  
AMEXCO COLLECTIONS  
2423 E LINCOLN DR  
PHOENIX AZ**

85016

Mail Payment to:

  
AMERICAN EXPRESS  
BOX 0001  
LOS ANGELES CA 90096-8000



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\* ALSO MEMBER NJ BAR  
\* ALSO MEMBER FL BAR  
\* ALSO MEMBER CA BAR

**Re: PROOFS OF CLAIM**

Enclosed please find Proofs of Claim for immediate filing. Please file stamp the extra copies provided and return them in the enclosed pre-addressed envelope(s). If there is an error in the bankruptcy number, or any other defect in the Proofs of Claim, please also return the erroneous document(s) in the envelope provided.

Please do not hesitate to contact our office if we may assist you in the processing of these documents. Thank you for your cooperation.

Very truly yours,  
BECKET & LEE LLP

BY:

  
Thomas A. Lee III

Encl.