

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE	PROOF OF CLAIM
Name of Debtor: Urban Brands Case No. Select Debtor from Attachment A (List of Debtors) to complete this section. 10-13005-K. NOTE: This form should not be used to make a claim for an administrative expense arising after the compressional of the case but we	<u>JC</u>
for purposes of asserting a claim under 11 U.S.C. § 503(b)(9) (see Item # 6). All other requests for payment of an administrative expense filed pursuant to 11 U.S.C. § 503.	e may be
Name of Creditor (the person of other entity to whom the debtor owes money or property): R - Pac International Corp. Name and address where notices should be sent: R - Pac International Corp. 132 kl. 36 th St. 7th Fl. New York NY 10018 Telephone number: 212 - 465 - 1818 Email Address: evelyn.cortes or-pac.com Name and address where payment should be sent (if different from above): RECEIVED AN 12 2011 Check this box to indicate that claim amends a previously file claim. Court Claim Number: (If known) Filed on: Check this box if you are aware anyone else has filed a proof of relating to your claim. Attach of statement giving particulars.	e that claim
Telephone number: BMC GROUP or trustee in this case.	
1. Amount of Claim as of Date Case Filed: 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. Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges. 2. Basis for Claim: (See instruction #2 on rewise side.) 3. Last four digits of any number by which creditor identifies debtor: 3a. Debtor may have scheduled account as: (See instruction #3 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: Real Estate Motor Vehicle Equipment 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: \$ Amount Of Secured Claim: \$	U.S.C. § 507(a)(4). Contributions to an employee benefit plan ~ 11 U.S.C. § 507(a)(5). 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). Taxes or penalties owed to governmental units ~ 11 U.S.C. § 507 (a)(8).
7. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 8. Decuments: Attach reducted copies of any documents that support the support that support the support of the s	Amount entitled to priority:
orders, invoices, itemized statements or 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 # 8 and 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 in an attachment. Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the other person authorized to file this claim and state address and telephone number if different from address above. Attach copy of power of attorney, if any. John Fitzgeral	*Amounts are subject to adjustment on 4/12/13-and every 3-years thereafter with respect to cases commenced on or after the date of adjustment. FOR COURTUSE ONLY the notice
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 a Modified B10 (GCG)	1

INVOICE NUMBER	INVOICE DATE
0461228-IN	9/8/2010



SOLD TO:

URBAN BRANDS 100 METRO WAY Secaucus, NJ 07094

SHIP TO:

DDS CHAMBERSBURG 155 KRINER ROAD TEL# 717-321-3441 ATTN: RECEIVING DEPT CHAMBERSURG 17202, PA



ACCOUNT NO.	CUSTOMER P.O. NUMBER	TERMS	SALESPERSON	NO.CASES
URB070	DDS678199	NET 30	SR	

QUANTITY	DESCRIPTION	\$ PER / M	AMOUNT
25.000	ASHLEY STEWART MEDIUM GIFT BOX ITEM# URB 6067 (143199) RE: DELIVERY NOTE# DND10004914 DATED 7/29/10 RE: FREIGHT CHARGES BEING BILLED ON THIS SHIPMENT IS FROM CLIFTON, NEW JERSEY TO CHAMBERSURG, PA TOTAL WEIGHT: 7,100 KGS (15,600 LBS)	710.00	17,750.00
	TOTAL WEIGHT: 7,100 ROS (15,000 LBS)		
		NET INVOICE	17,750.00
	WE APPRECIATE YOUR BUSINESS	NEWAY-WEST INVOICE TOTAL	1,978.01 19,728.01

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ARR-1035

575 Avenue P, Newark, NJ 07105 TEL: (973) 344-4224 FAX: (973) 344-43

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CUSTOMER NEWAY LOGISTICS INC. 9841 AIRPORT BLVD.SUITE 808	yare	1-7 10	AM	PRO NUMBER H1008101	
LOS ANGELES, CA 90045 T:310-665-9033 F:				08/26/10	
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	EISU3620807/2				
PICK UP FROM	440000077	DELIVER TO		/20	
MAHER TERMINAL	DDS CHAMBERS		•	FREIGHT BILL NO. EGLV010001079899	
FLEET STREET BERTH 64	155 KRINER RO	AD	\$ 7.		
	CHAMBERSBURG, T:717-261-022	PA 17201		CUSTOMER REFERENCE NO.	
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	Fran -		j	P/U OR BOOKING NO.	
	1				
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THIS FREIGHT BILL IS DESIGNED TO MEET THE REQUIREMENTS OF THE IN AS REQUIRED BY SECTION 223 OF PAR	TERSTATE COMMERCE COMMISION RT 11 OF THE INTERSTATE COMME	N AND THE FREIGHT-CHAI RCE ACT.	RGES MUST BE PAID		
	DESCRIPT	NO		4.	
PAPER BOX		· ·		PACKAGES: 500 PCS	
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10120				<u>.</u> .	
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714 Rahara Sus		SHOW COMPL		ND SIGNATURE - INITIALS NOT ACCEPTED	
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EL yes 9/2		. /	~ ~	17	,
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