



Date	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):	
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*Penalty for presenting fraudulent claim:* Fine up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

## INSTRUCTIONS FOR ADMINISTRATIVE CLAIM REQUEST FORM

*The instructions and definitions below are general explanations of the law. In particular types of cases or circumstances, such as bankruptcy cases that are not filed voluntarily by a debtor, there may be exceptions to these general rules.*

### ----DEFINITIONS----

<p><b><u>DEBTOR</u></b> The person, corporation, or other entity that has filed a bankruptcy case is called the debtor.</p> <p><b><u>CREDITOR</u></b> A creditor is any person, corporation, or other entity to whom the debtor owes a debt.</p>	<p><b><u>ADMINISTRATIVE CLAIM</u></b> Any right to payment constituting a cost or expense of administration of the Chapter 11 Cases arising under 11 U.S.C. § 503(b) of the Bankruptcy Code for the period from the commencement of this case through April 30, 2015, <u>provided, however,</u> that Holders of (i) a DIP Facility Claim, (ii) a Professional Claim, (iii) an Administrative Claim Allowed by an order of the Bankruptcy Court on or before the Effective Date, or (iv) an Administrative Claim that is not Disputed and arose in the ordinary course of business and was paid or is to be paid in accordance with the terms and conditions of the particular transaction giving rise to such Administrative Claim do not need to file an Administrative Claim Request Form.</p>	<p><b><u>ADMINISTRATIVE CLAIMS BAR DATE</u></b> Pursuant to Article 2.1 of the Plan, , all requests for payment of an Administrative Claim that has arisen between June 10, 2013 and April 30, 2015 must be filed no later than <b>June 1, 2015</b>.</p>
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### Items to be completed in Administrative Claim Request Form (if not already filled in)

**Name of Debtor and Case Number:**

If your claim form is not preprinted with the name of the debtor and the case number, fill in the name of the debtor in the bankruptcy case and the bankruptcy case number. If you previously received a notice of the case from the Court, your name and address is near the top of the notice.

**Information about Creditor:**

Complete the section giving the name, address, and telephone number of the creditor to whom the debtor owes money or property, and the debtor's account number, if any. If anyone else has already filed an administrative proof of claim relating to this debt, if you never received notices from the bankruptcy court about this case, if your address differs from that to which the court sent notice, or if this administrative proof of claim replaces or changes an administrative proof of claim that was already filed, check the appropriate box on the form.

**1. Basis for Claim:**

Check the type of debt for which the proof of claim is being filed. If the type of debt is not listed, check "Other" and briefly describe the type of debt. If you were an employee of the debtor, fill in the last four digits of your social security number and the dates of work for which you were not paid.

**2. Date Debt Incurred:**

Fill in the date when the debt first was owed by the debtor.

**3. Court Judgments:**

If you have a court judgment for this debt, state the date the court entered the judgment.

**4. Total Amount of Claim:**

Fill in the total amount of the entire administrative claim. If interest or other charges in addition to the principal amount of the claim are included, check the appropriate boxes on the form and attach an itemization of the interest and charges.

**5. Brief Description of Administrative Claim:**

Describe the Administrative Claim including, but not limited to, the actual and necessary costs and expenses of operating the Debtor's Estate or any actual and necessary costs and expenses of operating the Debtor's businesses.

**6. Offsets, Credits and Setoffs:**

By signing this administrative proof of claim, you are stating under oath that in calculating the amount of your claim you have given the debtor credit for all payments received from the debtor.

**7. Supporting Documents:**

You must attach to this administrative proof of claim form copies of documents that show the debtor owes the debt claimed or, if the documents are too lengthy, a summary of those documents. If documents are not available, you must attach an explanation of why they are not available.

**8. Date-Stamped Copy:**

To receive an acknowledgement of the filing of your Administrative Claim, enclose a stamped, self-addressed envelope and copy of this Administrative Claim Request Form.

Please send original, completed administrative proof of claim as follows:

**By Mail: Garden City Group, LLC, Attn: EXIDE CASE ADMINISTRATION, C/O GCG, P.O. BOX 9985, DUBLIN, OH 43017-5985**

**By Hand or Overnight Courier: EXIDE CASE ADMINISTRATION, C/O GCG, 5151 BLAZER PARKWAY, SUITE A, DUBLIN, OH 43017**

Any proof of claim submitted by facsimile or email will not be accepted.

**All claims must be received on or before June 1, 2015 at 4:00 p.m. Prevailing Eastern Time.**