

UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ALABAMA In re Jefferson County, Alabama, Case Number 11-5736-TBB-9		11 U.S.C. § 503(b)(9) REQUEST FORM
<p>NOTE: This form is to be used ONLY to make a claim for payment of an administrative expense pursuant to 11 U.S.C. § 503(b)(9) (a "Section 503(b)(9) Claim") in accordance with the accompanying notice (the "Notice"). Section 503(b)(9) Claims are claims for the value of goods sold by a party to Jefferson County, Alabama (the "County") in the ordinary course of the County's business and received by the County within 20 days before November 9, 2011. If your claim against the County is not a Section 503(b)(9) Claim, or you have other claims against the County in addition to your Section 503(b)(9) Claim, then you may be required to file a separate proof of claim against the County. The Notice will instruct you whether you must file a proof of claim against the County, where to file the proof of claim and the deadlines for filing proofs of claim. Do NOT use this form if your claim is not a Section 503(b)(9) Claim. If you wish to assert a Section 503(b)(9) Claim against the County, complete this form and return it in accordance with the below instructions. <u>PLEASE NOTE that filing a request for allowance of a Section 503(b)(9) Claim does not ensure that your Section 503(b)(9) Claim will be allowed or paid.</u></p> <p>INSTRUCTIONS: To assert a Section 503(b)(9) Claim against the County, complete this form and send the completed form by overnight courier, hand delivery or mail to Kurtzman Carson Consultants LLC, the Claims Agent in the County's Chapter 9 Case (the "Claims Agent"), at the applicable address below so as to be received by no later than 5:00 p.m. prevailing Central Time on Monday, June 4, 2012. Request forms submitted by facsimile or e-mail will NOT be accepted.</p> <p>By Mail, Hand Delivery, or Overnight Delivery: Jefferson County Claims Processing c/o Kurtzman Carson Consultants LLC 2335 Alaska Avenue El Segundo, CA 90245</p>		
Name of creditor (the person or other entity to whom the County owes money or property):		
Any applicable business account names or numbers used by creditor and/or County:		
Name and address where notices related to this § 503(b)(9) Request should be sent:		
Telephone number:	<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 your address differs from the address on the envelope sent to you by the County.	
1. Description of Basis of § 503(b)(9) Claim (including description of goods, date(s) of delivery/receipt by County):		
2. Total Amount of asserted § 503(b)(9) Claim (attach itemization and supporting documents): \$		
3. Credits: The amount of all payments, if any, on this claim has been credited and deducted for the purpose of making this § 503(b)(9) Request.		
4. Other Supporting Documents: Attach copies of any and all supporting documents, such as purchase orders/invoices, itemized statements of running accounts, contracts, and documents evidencing delivery/receipt of goods. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, please explain. If the documents are voluminous, please attach a summary.		
5. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and a copy of this Request.		
Date	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim:	
<i>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 and 3571.</i>		