RSM! Richter Inc.

(Attach a copy of sales agreement and delivery receipts).

RSM Richter Inc.

2, Place Alexis Nihon, Suite 1820 Montréal (Québec) H3Z 3C2 Téléphone / Telephone : 514.934.3497 Télécopieur / Facsimile : 514.934.8603 Courriel / E-mail : claims@rsmrichter.com

PROOF OF CLAIM

(Section 50.1, Subsections 65.2(4), 81.2(1), 81.3(8), 81.4(8), 81.5, 81.6, 102(2), 124(2), 128(1), and Paragraphs 51(1)(*e*) and 66.14(*b*) of the Act)

| AII | notices or correspondence regarding this claim must be forwarded to the following address: | | | |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | | | | |
| In t of | he Matter of the Bankruptcy of Power Battery (Iberville) Ltd. of the City of Saint-Léonard, Province of Quebec, and the claim | | | |
| | , creditor. | | | |
| | (name of creditor or representative of | | | |
| the | creditor), of(city and province), do hereby certify: | | | |
| 1. title | That I am a creditor of the above-named debtor (or that I am (state position or or (name of creditor or representative of the creditor)). | | | |
| 2. | That I have knowledge of all of the circumstances connected with the claim referred to below. | | | |
| 3. \$ | That the debtor was, at the date of the bankruptcy, namely January 20, 2011, and still is, indebted to the creditor in the sum of, as specified in the statement of account (<i>or</i> affidavit) attached and marked Schedule "A," after | | | |
| | ucting any counterclaims to which the debtor is entitled. (<i>The attached statement of account or affidavit must specify the vouchers or evidence in support of the claim.</i>) | | | |
| 4. | Check and complete appropriate category | | | |
| | A. UNSECURED CLAIM OF \$ | | | |
| | (Other than as a customer contemplated by Section 262 of the Act) | | | |
| Tha | it in respect of this debt, I do not hold any assets of the debtor as security and | | | |
| | (Check appropriate description) | | | |
| | Regarding the amount of \$, I do not claim a right to a priority. (Ordinary Creditor) | | | |
| | Regarding the amount of \$, I claim a right to a priority under section 136 of the Act. (Preferred Creditor) | | | |
| | (Set out on an attached sheet details to support priority claim) | | | |
| | B. CLAIM OF LESSOR FOR DISCLAIMER OF A LEASE \$ | | | |
| Tha | nat I hereby make a claim under subsection 65.2(4) of the Act, particulars of which are as follows: (Give full particulars of the claim, including the calculations upon which the claim is based) | | | |
| | C. SECURED CLAIM OF \$ | | | |
| | t in respect of this debt, I hold assets of the debtor valued at \$ as security, particulars of which as follows: (Give full particulars of the security, including the date on which the security was given and the value at which you assess the security and attach a copy of the security documents.) | | | |
| | D. CLAIM BY FARMER, FISHERMAN OR AQUACULTURIST OF \$ | | | |
| Tha | t I hereby make a claim under subsection 81.2(1) of the Act for the unpaid amount of \$ | | | |

FORM 31 (Continued)

| | E. C | CLAIM BY WAGE EARNER OF \$ | | | |
|-------------------|--------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | That I hereby make a claim under subsection 81.3(8) of the That I hereby make a claim under subsection 81.4(8) of the transfer of the subsection 81.4(8) of the transfer of th | | | |
| | F. C | CLAIM BY EMPLOYEE FOR UNPAID AMOUNT REGARD | ING PENSION PLAN OF \$ | | |
| | | That I hereby make a claim under subsection 81.5 of the | | | |
| | | That I hereby make a claim under subsection 81.6 of the | | | |
| | | | | | |
| | (To | be completed when a proposal provides for the compromi | ise of claims against directors.) | | |
| Tha | | reby make a claim under subsection 50(13) of the Act, partic are full particulars of the claim, including the calculations up | | | |
| That follo | t I her | CLAIM OF A CUSTOMER OF A BANKRUPT SECURITIES reby make a claim as a customer for net equity as contempla | | | |
| | (Giv | e full particulars of the claim, including the calculations up | on which the claim is based.) | | |
| 5. sect | | t, to the best of my knowledge, I am (<i>or</i> the above-named cre of the Act, and have (<i>or</i> has) (<i>or</i> have not <i>or</i> has not) dealt v | editor is) (<i>or</i> am not <i>or</i> is not) related to the debtor within the meaning of with the debtor in a non-arm's-length manner. | | |
| <i>the</i> imm | mean <i>debto</i> iediat | ning of subsection 2(1) of the Act that I have been privy to or or are related within the meaning of section 4 of the Act or | the credits that I have allowed to, and the transfers at undervalue within a party to with the debtor within the three months (<i>or, if the creditor and were not dealing with each other at arm's length,</i> within the 12 months) meaning of subsection 2(1) of the Act: (<i>provide details of payments,</i> | | |
| Date | ed at | , this day | of | | |
| Cre | ditor | | Witness | | |
| Tele | phor | ne number: | Fax number: | | |
| | • | ddress: | | | |
| WAR of the | NINGS e secu | r an affidavit is attached, it must have been made before a person qualifies. A trustee may, pursuant to subsection 128(3) of the Act, redeem a secrity as assessed, in a proof of security, by the secured creditor. 201(1) of the Act provides severe penalties for making any false claim, p | curity on payment to the secured creditor of the debt or the value | | |
| | | | ROXY ohs 51(1)e) and 66.15(3)b) of the Act) | | |
| In th | | atter of the Bankruptcy of Power Battery (Iberville) Ltd. | | | |
| l, | | (nome of any disp) | , of (name of town or city) | | |
| | | | | | |
| | editor e my er pla | | of, of dividends, with (or without) power to appoint another proxyholder in his | | |
| Date | ed at | , this day of | | | |
| Cre | ditor | | - | | |
| Per: | | ne and Title of Signing Officer | | | |
| | Nan | me and Title of Signing Officer | Witness | | |