Fill in this information to identify the case: Name of Debtor & Case Number: □ Katy Industrials, Inc (17-11101) □ TTI Holdings, Inc. (17-11108) □ Continental Commercial Products, LLC (17-11102) □ GCW Inc. (17-11109) □ FTW Holdings, Inc. (17-11103) □ Hermann Lowenstein, Inc. (17-11110) □ Fort Wayne Plastics, Inc. (17-11104) □ American Gage & Machine Company (17-11111) □ Wabash Holding Corp. (17-11105) □ WP Liquidating Corp. (17-11112) □ Katy Teweh, Inc. (17-11106) □ Ashford Holding Corp. (17-11113) □ WII, Inc. (17-11107) □ HPMI, Inc. (17-11114)

United States Bankruptcy Court for the District Delaware

Proof of Administrative Claim

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Part 1: Identify the Claim

1.	Who is the current creditor?	Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor							
2.	Has this claim been acquired from someone else?	□ No □ Yes. From wh	om?						
3.	Where should notices and payments to the creditor be sent?	Where should no	tices to the creditor be s	ent?	Where should payments to the creditor be sent? (if different)				
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Name			Name				
		Number Street			Number Street				
		City	State	ZIP Code	City	State	ZIP Code		
		Contact phone			Contact phone		_		
		Contact email			Contact email				
		Uniform claim identifier for electronic payments in chapter 13 (if you use one):							
4.	Does this claim amend one already filed?		— — — — — — — umber on court claims reg			— — Filed on MM / D	DD / YYYY		
5.	Do you know if anyone else has filed a proof of claim for this claim?	☐ No ☐ Yes. Who ma	de the earlier filing?						

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	No Yes. Last 4	ligits of the debtor's account c	or any number you use to identify	the debtor:			
7. Amount of Administrative	· Claim? \$		* * *	interest, fees, expenses, or other			
8. What is the basis of the claim?	Attach redacted	copies of any documents sup	d, lease, services performed, personal injury or wrongful death, or credit card. ents supporting the claim required by Bankruptcy Rule 3001(c). itled to privacy, such as health care information.				
Part 3: Sign Below							
The person completing this proof of claim must sign and date it. FRBP 9011(b). If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.	Check the appropriate box: am the creditor. lam the creditor's attorney or authorized agent. lam the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. lam a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. lunderstand that an authorized signature on this Proof of Claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt. lhave examined the information in this Proof of Claim and have a reasonable belief that the information is true and correct. I declare under penalty of perjury that the foregoing is true and correct. Executed on date MM / DD / YYYYY MM / DD / YYYYYY MM / DD / YYYYY MM / DD / YYYYYY MM / DD						
	Signature Print the name	of the person who is comple	ting and signing this claim:				
	Name	First name	Middle name	Last name			
	Title Company	Identify the corporate servicer a	s the company if the authorized agen	nt is a servicer.			
	Address	Number Street					
	Contact phone	City	State Email	ZIP Code			

Supporting Documents

INSTRUCTIONS FOR FILING PROOF OF ADMINISTRATIVE EXPENSE CLAIM

The instructions and definitions below are general explanations of the law. In particular types of cases or circumstances there may be exceptions to the general rules.

Debtor:

The person, corporation, or other entity that has filed a bankruptcy case is called the debtor. In these cases the Debtors are

Katy Industrials, Inc. (17-11101)
Continental Commercial Products, LLC (17-11102)
FTW Holdings, Inc. (17-11103)
Fort Wayne Plastics, Inc. (17-11104)
Wabash Holding Corp. (17-11105)
Katy Teweh, Inc. (17-11106)
WII, Inc. (17-11107)
TTI Holdings, Inc. (17-11108)
GCW Inc. (17-11109)
Hermann Lowenstein, Inc. (17-11110)
American Gage & Machine Company (17-1111)
WP Liquidating Corp. (17-11112)
Ashford Holding Corp. (17-11113)
HPMI, Inc. (17-11114)

Administrative Expense Claims Bar Date:

By Order of the United States Bankruptcy Court for the District of Delaware, all requests for the allowance of an Administrative Expense Claim, incurred on or prior to July 21, 2017 ("Initial Administrative Expense Claim") must be filed so as to be received as set forth below no later than 5:00 p.m. (EDT) on October 9, 2017.

Initial Administrative Expense Claim:

A claim for payment of an administrative expense of a kind specified in section 503(b) of the Bankruptcy Code and entitled to priority pursuant to section 507(a)(2) of the Bankruptcy Code, and as specified in the Bar Date Notice.

- 1. Please read this Proof of Administrative Expense Claim form carefully and fill it in completely and accurately.
- 2. Print legibly. Your claim may be disallowed if it cannot be read and understood.
- 3. You must specify which of the Debtors you are asserting a claim against and its appropriate case number.
- 4. This Proof of Administrative Expense Claim must be completed in English. The amount of any Initial Administrative Expense Claim must be denominated in United States currency.
- 5. Attach additional pages if more space is required to complete this Proof of Administrative Expense Claim.
- 6. This form should only be used by a claimant asserting an Initial Administrative Expense Claim. It should not be used for claims excluded by the Bar Date Notice and should not be used for any claims that are not entitled to priority in accordance with 11 U.S.C. §§ 503(b) and 507(a).
- 7. This Proof of Administrative Expense Claim must be sent to JND Corporate Restructuring (i) electronically through its website at the following address http://www.jndla.com/cases/katy or (ii) by regular mail, overnight mail, or hand delivery, addressed to

Katy Industries Claims Processing c/o JND Corporate Restructuring 8269 E 23rd Ave, Suite 275 Denver, CO 80238

NOTE: The staff of the JND Corporate Restructuring cannot give legal advice. Please also note that JND Corporate Restructuring is **not** authorized to accept proofs of claim by facsimile or email.

- 8. To receive an acknowledgment of the filing of your claim from JND Corporate Restructuring, enclose a stamped, self-addressed envelope and copy of this Proof of Administrative Expense Claim. _________
- 9. To be considered timely filed, this Proof of Administrative Expense Claim must be actually received by JND Corporate Restructuring by <u>5:00 p.m. (EDT) on October 9, 2017</u>, and must include appropriate documents/materials establishing the claimants entitlement to an allowed Initial Administrative Expense Claim and the amount of your asserted claim.