

## BY INDIVIDUAL TICKET HOLDERS

As you are aware, The American Basketball League (the "debtor"), filed for bankruptcy under Chapter 11 of the United States Code on December 31, 1998 in the bankruptcy court of the Northern District of California, San Jose Division. Under Chapter 11, a debtor is required to submit for approval to the court, a Plan in which the debtor describes how and when it will repay its debts. The amount it is required to pay is dependent upon several factors, the most important of which, are the total amount of assets it has, and the priority to which the creditor seeking payment is entitled.



It is the position of the Attorney General that ticketholders (including season ticketholders and advance parking ticket holders) should be entitled to priority in payment of their claims under the provision of the Bankruptcy Code which gives priority to individual claimants with claims not in excess of \$1,800 relating to "the deposit, before the commencement of the case, of money in connection with the purchase, lease, or rental of property, or the purchase of services, for the personal, family or household use of such individuals, that were not delivered or provided."

Thus, the partially completed proof of claim enclosed herein for your use, asserts a priority. This priority is of course, subject to objection by the debtor and final determination by the court. If you wish to use the enclosed proof of claim form, please complete the areas checked and sign it. Include the total amount due on Line 4. Up to \$1800 can be listed on Line 6. The remainder, if any, is a general unsecured claim.

Attach to the completed proof of claim, a copy of any evidence you may have related to your claim, such as photocopies of unused tickets, cash receipts, both sides of canceled checks, etc. Mail the proof of claim to the following address: **United States Bankruptcy Court, Northern District of California, San Jose Division, 28 South First Street, Room 3035, San Jose, CA 95113.** If you wish to be certain of the court's receipt of your proof of claim, enclose in the envelope an extra copy of the claim along with a self-addressed, stamped envelope so that a file-stamped copy may be returned to you. **ALL CLAIMS MUST BE RECEIVED BY THE COURT BY MAY 4, 1999, IN ORDER TO BE CONSIDERED TIMELY.**

Name of Debtor <b>The American Basketball League Inc.</b>	Case Number 98-60354	<b>THIS SPACE IS FOR COURT USE ONLY</b>
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (The person or other entity to whom the debtor owes money or property)	<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach a copy of statement giving particulars.  <input checked="" type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case.  <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court	
Name and address where notices should be sent:	Telephone number:	

Account or other number by which creditor identifies debtor:	Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated:
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**1. Basis for Claim**

<input type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other	<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries and compensation (Fill out below) Your SS #: _____ Unpaid compensation for services performed from _____ to _____ <div style="text-align: center;">(date) (date)</div>
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<b>2. Date debt was incurred:</b>	<b>3. If court judgment, date obtained:</b>
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**4. Total Amount of Claim at Time Case Filed:** \$ \_\_\_\_\_

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

**5. Secured Claim.**

Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:  
 Real Estate     Motor Vehicle  
 Other \_\_\_\_\_

Value of Collateral: \$ \_\_\_\_\_

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ \_\_\_\_\_

**6. Unsecured Priority Claim.**

Check this box if you have an unsecured priority claim

Amount entitled to priority \$ \_\_\_\_\_

Specify the priority of the claim:

Wages, salaries, or commissions (up to \$4000),\* earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).

Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).

Up to \$1,800\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).

Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).

Taxes or penalties of governmental units - 11 U.S.C. § 507(a)(8).

Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(\_\_\_\_\_).

\*Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

**7. Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

**8. Supporting Documents:** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

**9. Date-Stamped Copy:** To receive an acknowledgment of the filing of your claim, enclose a stamped, self addressed envelope and copy of this proof of claim.

**THIS SPACE IS FOR COURT USE ONLY**

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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