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Attorneys for CFB Liquidating Corporation,  
f/k/a Chicago Fire Brick Company, Debtor in Possession and  
WFB Liquidating Corporation, f/k/a Wellsville Fire Brick Company

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF CALIFORNIA  
OAKLAND DIVISION**

**In re**

**CFB LIQUIDATING CORPORATION,  
f/k/a Chicago Fire Brick Company,  
an Illinois corporation,**

**In re**

**WFB LIQUIDATING CORPORATION,  
f/k/a Wellsville Fire Brick Company,  
an Illinois corporation,**

**Debtors.**

**Case No. 01-45483  
Case No. 01-45484**

**Chapter 11**

**Honorable Roger L. Efremsky**

**Voting Deadline: August 23, 2012  
Confirmation Hearing: September 6, 2012  
Time: 11:00 a.m.  
Place: 1300 Clay Street,  
Oakland, California,  
Courtroom 201**

**INDIVIDUAL BALLOT FOR ACCEPTING OR REJECTING THE JOINT CHAPTER 11  
PLAN OF CFB LIQUIDATING CORPORATION, F/K/A CHICAGO FIRE BRICK  
COMPANY, AND WFB LIQUIDATING CORPORATION, F/K/A WELLSVILLE FIRE  
BRICK COMPANY- CLASS 4: SUPPLEMENTAL BAR DATE ASBESTOS  
PERSONAL INJURY CLAIMS**

On April 20, 2012, CFB Liquidating Corp., f/k/a Chicago Fire Brick Company and WFB Liquidating Corp., (collectively, the “Debtors”), the debtors in possession in these chapter 11 case filed the Joint Chapter 11 Plan of CFB Liquidating Corporation f/k/a Chicago Fire Brick Company and WFB Liquidating Corporation, f/k/a Wellsville Fire Brick Company (the “Plan”) and a disclosure statement with respect to the Plan (the “Disclosure Statement”). The Plan and the Disclosure Statement provide information to assist you in deciding how to vote your ballot. If you would like a copy of the Plan or Disclosure Statement, you may obtain a copy by written

request to Jeremy C. Kleinman, FrankGecker LLP, 325 N. LaSalle Street, Suite 625, Chicago, IL 60654, facsimile (312) 276-0035.

On June 4, 2012, the United States Bankruptcy Court for the Northern District of California entered an order that establishes certain procedures (the "Voting Procedures") for the solicitation and tabulation of votes to accept or reject the Plan. A copy of the Voting Procedures has been provided to you with this Individual Ballot.

**Pursuant to the Voting Procedures, this Ballot must be submitted to FrankGecker LLP, 325 N. LaSalle Street, Suite 625, Chicago, IL 60654, Attn: CFB/WFB Balloting, so that it is actually received on or before August 23, 2012 (the "Voting Deadline"). If this ballot is not received by the Voting Deadline, and such deadline is not extended, any and all votes contained herein will not count as either an acceptance or rejection of the Plan.**

**If the Plan is confirmed by the Bankruptcy Court it will be binding on all claimants whether or not such claimants vote to accept or reject the Plan.**

**You should review the Plan and Disclosure Statement before you vote. You may wish to seek legal advice concerning the Plan and your classification and treatment under the Plan. Your claim has been placed in Class 4 under the Plan.**

**This Ballot is to be used by individual holders of Class 4 Supplemental Bar Date Asbestos Personal Injury Claims voting of their own behalf. If you are an individual and intend for your counsel to vote your claim on your behalf on a Master Ballot, please arrange with your counsel to do so well in advance of the Voting Deadline so that your vote may be included on a Master Ballot before the Voting Deadline.**

**[Remainder of page left blank intentionally]**

**ACCEPTANCE OR REJECTION OF THE PLAN**

**IN ORDER TO VOTE TO ACCEPT OR REJECT THE PLAN, PLEASE COMPLETE THE FOLLOWING:**

**Item 1. AMOUNT OF CLAIM.** For purposes of voting to accept or reject the Plan, the undersigned holds a Class 4 Supplemental Bar Date Asbestos Personal Injury Claim against the Debtor in the amount of \$1.00.

**Item 2. VOTE ON THE PLAN.** The undersigned holder of a Class 4 Supplemental Bar Date Asbestos Personal Injury Claim in the amount set forth in Item 1 above hereby votes to:

- Check one box:  Accept the Plan  
 Reject the Plan

**Item 3. ACKNOWLEDGEMENTS AND CERTIFICATION.** By signing this Ballot, the undersigned acknowledges that the undersigned has been provided with a copy of the Plan and Disclosure Statement. The undersigned certifies that (i) it is the holder of the Class 4 Supplemental Bar Date Asbestos Personal Injury Claim and (ii) it has full power and authority to vote to accept or reject the Plan.

Print or Type Name of Claimant: \_\_\_\_\_

Social Security or Federal Tax I.D. No. of Claimant: \_\_\_\_\_

Signature: \_\_\_\_\_

Name of signatory (if different than claimant): \_\_\_\_\_

If by Authorized Agent, Title of Agent: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, and Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Date Completed: \_\_\_\_\_

**ONCE COMPLETED, PLEASE RETURN THIS BALLOT, SO THAT IT IS RECEIVED ON OR BEFORE AUGUST 23, 2012 TO:**

**FRANKGECKER LLP  
325 North LaSalle Street, Suite 625  
Chicago, IL 60654  
Attn: CFB/WFB Balloting**