

# EXHIBIT K

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Chicago Fire Brick Company, and WFB Liquidating  
Corporation f/k/a Wellsville Fire Brick Company, Joint  
Debtors in Possession*

**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**

**MASTER BALLOT FOR ACCEPTING OR 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.**

**Please note that this Master Ballot is only to be used with respect to Class 4 Supplemental Bar Date Asbestos Personal Injury Claims. If your firm represents Claimants holding Class 3 Bar Date Asbestos Personal Injury Claims, the votes of those Claimants should be set forth on a separate Master Ballot for Class 3 Bar Date Asbestos Personal Injury Claims.**

**PLEASE COMPLETE THE FOLLOWING:**

**Item 1. TABULATION OF VOTES WITH RESPECT TO THE PLAN.** Please note that each holder of a Class 4 Supplemental Bar Date Asbestos Personal Injury Claim that votes must vote its entire claim to accept or reject the Plan and may not split such vote. Accordingly, the vote of any holder of an Asbestos Personal Injury Claim who attempts partially to reject and partially to accept the Plan shall not be counted. If this Master Ballot is signed and timely sent to the Debtor's counsel, FrankGecker LLP, but does not designate either acceptance or rejection of the Plan for any particular claim, such claim shall not be counted as either an acceptance or rejection of the Plan.

**Please mark one of the boxes below:**

<input type="checkbox"/>	All claimants listed on the exhibit accompanying this Ballot <b>ACCEPT</b> the Plan.
<input type="checkbox"/>	All claimants listed on the exhibit accompanying this Ballot <b>REJECT</b> the Plan.
<input type="checkbox"/>	All claimants listed on the exhibit accompanying this Ballot <b>ACCEPT</b> the Plan, <i>except</i> as marked on such exhibit.
<input type="checkbox"/>	All claimants listed on the exhibit accompanying this Ballot <b>REJECT</b> the Plan, <i>except</i> as marked on such exhibit.

**Item 2. SUMMARY OF HOLDERS OF SUPPLEMENTAL BAR DATE ASBESTOS PERSONAL INJURY CLAIMS REPRESENTED BY ATTORNEY.** Please prepare a summary sheet, to be attached to this Master Ballot as an exhibit, listing each holder of a Supplemental Bar Date Asbestos Personal Injury Claim you represent in substantially the same form as the table below. Please note that if all holders of Supplemental Bar Date Asbestos Personal Injury Claims represented by you vote to either accept or reject the Plan, you need not include the last column indicating whether each holder of a Supplemental Bar Date Asbestos Personal Injury Claim accepts or rejects the Plan.

Name of Holder of a Bar Date Asbestos Personal Injury Claim	Last Four Digits of Social Security Number	Accept or Reject (complete if applicable)

**Item 3. CERTIFICATIONS.** By signing this Master Ballot, the undersigned certifies as follows:

- I have been provided with the Solicitation Package.
- I have the full power and authority to vote to accept or reject the Plan on behalf of each of the holders of Supplemental Bar Date Asbestos Personal Injury Claims listed on the exhibit accompanying this Master Ballot.
- I acknowledge that I am obligated to furnish counsel to the Debtor, within ten (10) business days after the mailing of this Master Ballot, with the names and addresses of all holders of Supplemental Bar Date Asbestos Personal Injury Claims for whom I do not have the authority to vote to accept or reject the Plan.

**Item 4. RETURN OF EXHIBIT.** The entire exhibit accompanying this Master Ballot must be prepared and returned with this completed Master Ballot to the Debtor's counsel so that it is received by August 23, 2012 at 4:00 p.m. Pacific Time at the following address:

FrankGecker LLP  
 325 N. LaSalle Street, Suite 625  
 Chicago, IL 60654  
 Attn: CFB/WFB Balloting

Print or Type Name of Attorney:

\_\_\_\_\_

Name of Law Firm:

\_\_\_\_\_

Signature:

\_\_\_\_\_

Street Address:

\_\_\_\_\_

City, State, and Zip Code:

\_\_\_\_\_

Telephone Number:

\_\_\_\_\_

Date Completed:

\_\_\_\_\_