

1 Name of the Debtor
U. S. Steel Canada Inc.

2 Original Creditor Identification (the "Creditor")

| | | | |
|------------------------|--------------|-----------------|-----------------|
| Legal Name of Creditor | | | Name of Contact |
| Address | | | Phone # |
| | | | Fax # |
| City | Prov / State | Postal/Zip code | e-mail |

3 Assignee, if claim has been assigned

| | | | |
|-----------------------------|--------------|-----------------|-----------------|
| Full Legal Name of Assignee | | | Name of Contact |
| Address | | | Phone # |
| | | | Fax # |
| City | Prov / State | Postal/Zip code | e-mail |

4 Amount of Claim

U. S. Steel Canada Inc. was and still is indebted to the Creditor as follows:

| Claims will be recorded as "Unsecured" unless the "Secured" box is checked | | | (Check only if applicable) | |
|--|--------------------------|--------------------------|----------------------------|--|
| Currency (e.g. CAD,USD) | Original Currency Amount | Secured | Restructuring | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | |

5 Documentation

Provide all particulars of the Claim and supporting documentation, including amount, description of transaction(s) or agreement(s) giving rise to the Claim, amount of invoices, particulars of all credits, discounts, etc. claimed, name of any guarantor which has guaranteed the Claim, description of the security, if any, granted by the Debtor to the Creditor and estimated value of such security, and any other supporting documentation.

6 Certification

I hereby certify that:

- I am the Creditor, or authorized Representative of the Creditor.
- I have knowledge of all the circumstances connected with this Claim.
- The Creditor asserts this claim against U. S. Steel Canada Inc.
- Complete documentation in support of this claim is attached.

| | |
|-----------|-----------|
| Signature | Name |
| | Title |
| Dated | Signed at |

This space reserved for use by the Monitor

7 Filing of Claim

This Proof of Claim must be received by the Monitor by no later than 5:00 p.m. (prevailing time in Toronto, Ontario, Canada) on December 22, 2014, by ordinary mail, courier, personal delivery or electronic or digital transmission at the following address:

| | |
|---|--|
| Ernst & Young Inc., Monitor of USSC 222 Bay St., P.O.Box 251 Toronto-Dominion Centre Toronto, ON M5K 1J7 Attention: Mr. David Saldanha | Fax: 1-416-943-2887 Tel: 1-844-941-7764 e-mail: ussc.monitor@ca.ey.com |
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