

UNITED STATES BANKRUPTCY COURT for the District of Delaware

PROOF OF CLAIM

Name of Debtor: ANDERSON NEWS, LLC

Case Number: 09-10695 (CCS)

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): KENZOMO, INC dba MOORE'S FOOD PRIDE

Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent: MOORE'S FOOD PRIDE P.O. Box 1238 Boise City, OK 73933

Court Claim Number: (If known)

Telephone number: 580-544-3131 CONTACT PERSON: Galen Smith

Filed on:

Name and address where payment should be sent (if different from above): RECEIVED MAY 17 2010

Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Telephone number: BMC GROUP

Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 1577.74

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

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

Specify the priority of the claim.

2. Basis for Claim: Goods Sold (See instruction #2 on reverse side.)

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

3. Last four digits of any number by which creditor identifies debtor: 3636

Wages, salaries, or commissions (up to \$11,725\*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).

3a. Debtor may have scheduled account as (See instruction #3a on reverse side.)

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Up to \$2,600\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).

Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe:

Value of Property: \$ Annual Interest Rate %

Amount of arrearage and other charges as of time case filed included in secured claim,

if any: \$ Basis for perfection:

Amount of Secured Claim: \$ Amount Unsecured: \$

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

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

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

7. 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. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)

Amount entitled to priority:

\$

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

\*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

If the documents are not available, please explain:

Date: 05/11/2010

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

FOR COURT USE ONLY

Anderson News LLC



00108

Galen Smith Galen Smith office manager

**INSTRUCTIONS FOR PROOF OF CLAIM FORM**

*The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.*

**Items to be completed in Proof of Claim form****Court, Name of Debtor, and Case Number:**

Fill in the federal judicial district where the bankruptcy case was filed (for example, Central District of California), the bankruptcy debtor's name, and the bankruptcy case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is located at the top of the notice.

**Creditor's Name and Address:**

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

**1. Amount of Claim as of Date Case Filed:**

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

**2. Basis for Claim:**

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if the trustee or another party in interest files an objection to your claim.

**3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:**

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

**3a. Debtor May Have Scheduled Account As:**

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

**4. Secured Claim:**

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

**5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).**

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

**6. Credits:**

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.

**7. Documents:**

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d). If the claim is based on the delivery of health care goods or services, see instruction 2. Do not send original documents, as attachments may be destroyed after scanning.

**Date and Signature:**

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

**DEFINITIONS****Debtor**

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

**Creditor**

A creditor is a person, corporation, or other entity owed a debt by the debtor that arose on or before the date of the bankruptcy filing. See 11 U.S.C. §101 (10)

**Claim**

A claim is the creditor's right to receive payment on a debt owed by the debtor that arose on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

**Proof of Claim**

A proof of claim is a form used by the creditor to indicate the amount of the debt owed by the debtor on the date of the bankruptcy filing. The creditor must file the form with the clerk of the same bankruptcy court in which the bankruptcy case was filed.

**Secured Claim Under 11 U.S.C. §506(a)**

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors. The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

**Unsecured Claim**

An unsecured claim is one that does not meet the requirements of a secured claim. A claim may be partly unsecured if the amount of the claim exceeds the value of the property on which the creditor has a lien.

**Claim Entitled to Priority Under 11 U.S.C. §507(a)**

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

**Redacted**

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

**Evidence of Perfection**

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other document showing that the lien has been filed or recorded.

**INFORMATION****Acknowledgment of Filing of Claim**

To receive acknowledgment of your filing, you may either enclose a stamped self-addressed envelope and a copy of this proof of claim or you may access the court's PACER system ([www.pacer.psc.uscourts.gov](http://www.pacer.psc.uscourts.gov)) for a small fee to view the claims register.

**Offers to Purchase a Claim**

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 *et seq.*), and any applicable orders of the bankruptcy court.



**KENZOMO, INC.**  
**DBA MOORE'S FOOD**  
**PRIDE**

P. O. Box 1238  
 Boise City, OK 73933  
 580-544-3131

Fax: 580-544-2237

Anderson News Account numbers BT029570/ 063797 and BT029570/ 063636

Unsold Magazines at Retail: (covers are available)

Wrestle Mania Calendar 2009	1@ 9.99	9.99
Small Business Opportunities Winter 2009	1@ 3.50	3.50
Reader's Digest 02/09	4@ 3.99	15.96
NewsMax Magazine 01/09	2@ 4.95	9.90
Ebony 02/09	6@ 4.99	29.94
2009 Inauguration Special	2@ 5.99	11.98
XXL Magazine	1@ 4.99	4.99
WW Magazine	3@ 9.99	29.97
Farmer's Almanac 2009	9@ 5.99	53.91
Blum's Farmer's and Planter's Almanac	1@ 4.99	4.99
Prevention 03/09	4@ 3.59	14.36
The Old Farmer's Almanac 2009	33@ 5.99	197.67
Harris' Farmer's Almanac 2009	19@ 5.95	113.05
Harris' F. A. Gardening Guide	9@ 5.95	53.55
Your Personal Guide to the Future J,F, M 2009	38@ 1.39	52.82

Total Retail 606.58

Calculated Wholesale  $606.58 \times .8 = 485.26$

Many of the magazines were sold at 50% and others at \$1.00 each for which we are unable to calculate our loss

**CUSTOMER STATEMENT**



P.O. BOX 52570  
KNOXVILLE, TN 37950-2570  
800-338-1392

**Remittance Address:**  
ANDERSON NEWS, LLC  
P.O. BOX 116427  
ATLANTA, GA 30368-6427

02/27/2009

Customer #	Date
BT029570/ 063636	02/27/2009



\*\*\*\*\*MIXED AADC 442  
BT029570/ 063636 AG059 1545  
MOORE S FOODS PRIDE  
PO BOX 1238  
BOISE CITY OK 73933-1238

MOORE S FOODS PRIDE  
PO BOX 1238  
BOISE CITY OK 73933-1238

Reference		Transaction Explanation	Amount	Balance Due	Reference	Amount
Number	Date					
2106774059	1/08/09	MAGAZINE	227.90	-22.30	2106774059	-22.30
6606665059	1/15/09	MAGAZINE	-629.21	-629.21	6606665059	-629.21
6608366059	1/22/09	MAGAZINE	-499.76	-499.76	6608366059	-499.76
2110565059	1/29/09	PAPERBACK BOOKS	115.56	115.56	2110565059	115.56
2113292059	1/29/09	PAPERBACK BOOKS	43.11	43.11	2113292059	43.11
2113555059	1/29/09	MAGAZINE	348.74	348.74	2113555059	348.74
2114085059	1/29/09	MAGAZINE	82.94	82.94	2114085059	82.94
2114514059	1/29/09	MAGAZINE	124.11	124.11	2114514059	124.11
2115243059	1/29/09	MAGAZINE	82.94	82.94	2115243059	82.94
6610006059	1/29/09	MAGAZINE	-445.35	-445.35	6610006059	-445.35
2114917059	2/05/09	PAPERBACK BOOKS	23.95	23.95	2114917059	23.95
2115599059	2/05/09	MAGAZINE	78.62	78.62	2115599059	78.62
2117157059	2/05/09	MAGAZINE	327.15	327.15	2117157059	327.15
2118148059	2/05/09	MAGAZINE	11.95	11.95	2118148059	11.95
2118323059	2/05/09	MAGAZINE	58.70	58.70	2118323059	58.70
2119479059	2/12/09	MAGAZINE	15.22	15.22	2119479059	15.22
6612829059	2/05/09	**MAGAZINE	-453.62	-453.62	**6612829059	-453.62

**Terms - Net Weekly**

**If you prefer to receive your statements in**

an electronic format, via e-mail, please  
contact our Customer Support @ 800-338-1392.

ew Billing Activity This Period	-453.62	<b>New Billing Activity This Period</b>	-453.62
al Payments This Period	0.00		
st Payment Received	147.69	2/12/2009	

<b>ast Due Aging</b>					Balance Due	-737.25	Balance Due	-737.25
Current	Over 7	Over 14	Over 21	Over 28	<b>Return This Portion With Payment</b>			
0.00	15.22	46.75	352.05	-1151.27				

**CUSTOMER STATEMENT**



P.O. BOX 52570  
KNOXVILLE, TN 37950-2570  
800-338-1392

**Remittance Address:**  
ANDERSON NEWS, LLC  
P.O. BOX 116427  
ATLANTA, GA 30368-6427

02/27/2009



\*\*\*\*\*MIXED AADC 442  
BT029570/063797 AG059 1544  
MOORE S FOOD PRIDE 304  
P O BOX 1238  
PO Box 112  
BOISE CITY OK 73933-0112

Customer #	Date
BT029570/ 063797	02/27/2009

MOORE S FOOD PRIDE 304  
P O BOX 1238  
PO Box 112  
BOISE CITY OK 73933-0112

Reference		Transaction	Amount	Balance	Reference	Amount
Number	Date	Explanation		Due		
6606666059	1/15/09	MAGAZINE	-523.89	-523.89	6606666059	-523.89
6608999059	1/22/09	MAGAZINE	-616.89	-616.89	6608999059	-616.89
2110566059	1/29/09	PAPERBACK BOOKS	200.57	200.57	2110566059	200.57
2113293059	1/29/09	PAPERBACK BOOKS	65.84	65.84	2113293059	65.84
2113556059	1/29/09	MAGAZINE	696.46	696.46	2113556059	696.46
2114086059	1/29/09	MAGAZINE	113.65	113.65	2114086059	113.65
2114515059	1/29/09	MAGAZINE	155.83	155.83	2114515059	155.83
2115244059	1/29/09	MAGAZINE	113.65	113.65	2115244059	113.65
6609629059	1/29/09	MAGAZINE	-611.14	-611.14	6609629059	-611.14
2114918059	2/05/09	PAPERBACK BOOKS	96.99	96.99	2114918059	96.99
2115600059	2/05/09	MAGAZINE	184.05	184.05	2115600059	184.05
2117158059	2/05/09	MAGAZINE	502.60	502.60	2117158059	502.60
2118149059	2/05/09	MAGAZINE	7.17	7.17	2118149059	7.17
2118324059	2/05/09	MAGAZINE	92.54	92.54	2118324059	92.54
2119480059	2/12/09	MAGAZINE	19.78	19.78	2119480059	19.78
6612830059	2/05/09	**MAGAZINE	-852.44	-852.44	**6612830059	-852.44

**Terms - Net Weekly**

If you prefer to receive your statements in  
an electronic format, via e-mail, please  
contact our Customer Support @ 800-338-1392.

New Billing Activity This Period	-852.44
Total Payments This Period	0.00
Last Payment Received	173.63    2/12/2009

<b>New Billing Activity This Period</b>	<b>-852.44</b>
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Past Due Aging					Balance Due
Current	Over 7	Over 14	Over 21	Over 28	
0.00	19.78	30.91	734.86	-1140.78	-355.23

<b>Balance Due</b>	<b>-355.23</b>
<b>Return This Portion With Payment</b>	