

UNITED STATES BANKRUPTCY COURT
For the District of Delaware

PROOF OF CLAIM

In re: *FLEMING COMPANIES, INC ET AL*

Case Number *03-10945*

NOTE: This claim 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.

Creditor Name (Person or entity debtor owes) *VAL-U INN MOTEL*
Address Line 1 *805 LAKEWAY DR.*
Address Line 2
Address Line 3
City, ST ZIP *Bellingham, WA 98829*

- Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach Copy of statement giving particulars.
- Check box if you have never received any notices from the bankruptcy court in this case.
- Check box if the address differs from the address on the envelope sent to you by the court.

REC'D JUN 01 2003

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ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR.

Coac-Mark International, Inc

Check here if this claim replaces a previously filed claim dated: _____ amends

- 1. BASIS FOR CLAIM**
- Goods sold
 - Personal injury/wrongful death
 - Retiree benefits as defined in 11 U.S.C. § 1114(a)
 - Services performed
 - Taxes
 - Wages, salaries, and compensation (Fill out below)
 - Money loaned
 - Other (Describe Briefly)
- Your social security No. _____
Unpaid compensation for services performed from _____ (date) to _____ (date)

2. Date Debt Incurred: (MMDDYY)
02 05 02

3. If Court Judgment, Date Obtained

4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following. (1) Unsecured nonpriority (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED

- SECURED CLAIM**
Attach evidence of perfection of security interest
Brief Description of Collateral:
 Real Estate Motor Vehicle Other (Describe briefly)
- Amount of mortgage and other charges at time case filed included in secured claim above, if any \$ _____
- UNSECURED NONPRIORITY CLAIM**
A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.

- UNSECURED PRIORITY CLAIM - Specify the priority of the claim.**
- Wages, salaries, or commissions (up to \$4,650), 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 \$2,100 of deposits toward purchase, lease, or rental of property or services for personal family, or household use - 11 U.S.C. § 507(a)(6)
 - Taxes or penalties of governmental units - 11 U.S.C. § 507(a)(7)
 - Other - Specify applicable paragraph of 11 U.S.C. § 507(a) _____

5. AMOUNT OF CLAIM AT TIME CASE FILED

(Secured)	<i>5510</i>	(Unsecured Priority)
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Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

- 6. CREDITS AND SETOFFS** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.
- 7. SUPPORTING DOCUMENTS** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.
- 8. TIME-STAMPED COPY** To receive an acknowledgment of the filing of your claim, enclosed a stamped, self-addressed envelope and copy of this proof of claim.

Date *4-25-03*

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)
Janet L Coarik General Manager

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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FILED
JUN 03 2003
CLERK OF COURT
DELAWARE

JANET L COARIK

Fleming Companies Claim
00375

VAL-U INN MOTEL
805 LAKEWAY DR
BELLINGHAM, WA 98229
(360) 671-9600
(800) 443-7777

4-23-03

3-5-03

CORE MARK
ATTN: ACCOUNTS PAYABLE
13351 SE JOHNSON
PORTLAND, OR 97222
BARB
ATTN: BARB

ACCOUNT: COREMARK
INVOICE NUMBER: 1436
INVOICE DATE: 03/05/03
INVOICE AMOUNT: \$55.10
BALANCE DUE: \$55.10
PAGE: 1

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C U S T O M E R			I N V O I C E		
ROOM NO.	FOLIO	DATE	GUEST NAME		AMOUNT BILLED
=====					
112	69387	03/04/03	LANDON	KAREN	55.10

COMMENTS:



VAL-U INN HOTEL
 805 LAKEWAY DRIVE
 BELLINGHAM WA 98229
 (360) 671-9600
 (800) 443-7777

KAREN LANDON
 3324 LOCUST AVE W
 UNIVERSITY PLACE WA 98466

Room 112
 Rate 50 00
 Adults 1
 Folio 69387
 Arrival 03/03/03 (Mon)
 Departure 03/04/03 (Tue)
 Deposit Amt.
 Deposit Rec.
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DATE	ROOM	DESCRIPTION	COMMENT	AMOUNT
03/03	112	ROOM CHARGE	AUTOMATIC POSTING	50.00
03/03	112	SALES TAX	AUTOMATIC POSTING	4.10
03/03	112	ROOM TAX	AUTOMATIC POSTING	1.00
03/04	112	DIRECT BILL		5.10

Total Tax 5.10
 Total Charged 55.10
 Total Due 00

Billed to COREMARK CORE MARK

Guest Signature *Karen Landon*