

UNITED STATES BANKRUPTCY COURT <u>Wilmington</u> DISTRICT OF <u>DELAWARE</u>		PROOF OF CLAIM
Name of Debtor <u>Fleming Companies, Inc.</u> Case Number <u>03-10945</u>		RECD JUN 01 2003
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 USC § 503.		
Name of Creditor (The person or other entity to whom the debtor owes money or property) <u>Fellner Orchards</u>	<input type="checkbox"/> 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. <input checked="" type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Name and address where notices should be sent <u>Fellner Orchards</u> <u>4219 Cherry Rd</u> <u>Sturgeon Bay, WI 54235</u> Telephone number <u>920-743-4673</u>	THIS SPACE IS FOR COURT USE ONLY	
Account or other number by which creditor identifies debtor	Check here if this claim <input type="checkbox"/> replaces a previously filed claim, dated _____ <input type="checkbox"/> amends	
1 Basis for Claim <input checked="" type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____		
<input type="checkbox"/> Retiree benefits as defined in 11 USC § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your SS # _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
2 Date debt was incurred <u>Feb -17 2003 - March 31</u>	3 If court judgment, date obtained	
4 Total Amount of Claim at Time Case Filed \$ <u>846.50</u>		
If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.		
5. Secured Claim <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____		6 Unsecured Priority Claim <input type="checkbox"/> Check this box if you have an unsecured priority claim. Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,650) * earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier. 11 USC § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan. 11 USC § 507(a)(4) <input type="checkbox"/> Up to \$2,100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 USC § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child. 11 USC § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 USC § 507(a)(8) <input type="checkbox"/> Other - Specify applicable paragraph of 11 USC § 507(a)(_____)
7 Credits The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.		THIS SPACE IS FOR COURT USE ONLY
8 Supporting Documents Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.		
9 Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		
Date <u>4-16-2003</u>	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). <u>Joe Fellner - Partner Fellner Orchards</u>	
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.		



April 16-2003

United States Bankruptcy Court, District of Delaware

To whom it may concern:

We are a small operation and these eleven invoices for a total of \$846.50 represent a very large effort on our part.

Sincerely,

**Joseph J. Fellner
Partner
Fellner Orchards**

FELLNER ORCHARDS

4219 CHERRY ROAD
STURGEON BAY, WISCONSIN 54235
JOSEPH FELLNER Phone (920) 743-4673
4531

Date Feb 17 2002

Name 29 Super Market # 306
Address Weston, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
3	14 1/2# Del	300	99 00
5	21 1/2# Del	1250	62 50
3	14 1/2# SPAC	1300	39 00
			140 50

Handwritten signature

FELLNER ORCHARDS

4219 CHERRY ROAD
STURGEON BAY, WISCONSIN 54235
JOSEPH FELLNER Phone (920) 743-4673
4530

Date Feb 17 2003

Name 29 Super Market # 303
Address Weston, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
2	14 1/2# Del	300	57 00
4	14 1/2# SPAC	22 50	91 00

Handwritten signature

FELLNER ORCHARDS

4219 CHERRY ROAD
STURGEON BAY, WISCONSIN 54235
JOSEPH FELLNER Phone (920) 743-4673
4543

Date Feb 24 2003

Name 29 Super Market # 303
Address Wausau, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
2	14 1/2# Del	1300	26 20

Handwritten signature

FELLNER ORCHARDS

4219 CHERRY ROAD
STURGEON BAY, WISCONSIN 54235
JOSEPH FELLNER Phone (920) 743-4673
4545

Date Feb 24 2003

Name 29 Super Market # 306
Address Weston, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
2	14 1/2# Del	1300	26 20
5	21 1/2# Del	55	27 50
			53 70

Handwritten signature

FELLNER ORCHARDS

4219 CHERRY ROAD
 STURGEON BAY, WISCONSIN 54235
 JOSEPH FELLNER Phone (920) 743-4673
 4565

Date March 10 2003

Name 29 Super Market # 305
 Address Waukegan, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
4	1" # Del	300	52.00

price

FELLNER ORCHARDS

4219 CHERRY ROAD
 STURGEON BAY, WISCONSIN 54235
 JOSEPH FELLNER Phone (920) 743-4673
 4582

Date March 19 2003

Name 29 Super Market # 306
 Address Waukegan WI

QUAN	DESCRIPTION	PRICE	AMOUNT
2	1 1/2 # Del	300	16
2	5" # Del	1250	51.50
			<u>76.50</u>

FELLNER ORCHARDS

4219 CHERRY ROAD
 STURGEON BAY, WISCONSIN 54235
 JOSEPH FELLNER Phone (920) 743-4673
 4567

Date March 10 2003

Name 29 Super Market # 306
 Address Waukegan, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
4	1 1/2 # Del	1300	52.00
2	5" # Del	1250	62.50
			<u>114.50</u>

price

FELLNER ORCHARDS

4219 CHERRY ROAD
 STURGEON BAY, WISCONSIN 54235
 JOSEPH FELLNER Phone (920) 743-4673
 4579

Date March 7 2003

Name 29 Super Market # 306
 Address Waukegan, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
4	1 1/2 # Del	1300	52.00
			<u>52.00</u>

price

FELLNER ORCHARDS

4219 CHERRY ROAD
STURGEON BAY, WISCONSIN 54235

JOSEPH FELLNER
No. 4592

Phone (920) 743-4673

Date March 24 2003

Name 29 Super Market # 303

Address Wintona, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
4	4/3# Del	1300	52 00

FELLNER ORCHARDS

4219 CHERRY ROAD
STURGEON BAY, WISCONSIN 54235

JOSEPH FELLNER
No. 4601

Phone (920) 743-4673

Date March 31 2003

Name 29 Super Market # 306

Address Wintona, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
3	14/3# Del	1200	39 00
5	8/5# Del	1250	62 50
			101 50

FELLNER ORCHARDS

4219 CHERRY ROAD
STURGEON BAY, WISCONSIN 54235
Phone (920) 743-4673

JOSEPH FELLNER
No. 4603

Date March 31 2003

Name 29 Super Market # 303

Address Wintona, WI

QUAN	DESCRIPTION	PRICE	AMOUNT
3	14/3# Del	1300	39 00

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