

UNITED STATES BANKRUPTCY COURT \_\_\_\_\_ DISTRICT OF \_\_\_\_\_ **PROOF OF CLAIM**

Name of Debtor Fleming Company Case Number 03-10967-MSJ

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) SCOTT'S ENTERPRISES

Name and address where notices should be sent  
Marcia Haback  
R5338 Sahara Dr  
Ringle WI 54471

Telephone number 715-359-6159

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.

THIS SPACE IS FOR COURT USE ONLY

Account or other number by which creditor identifies debtor \_\_\_\_\_

Check here if this claim  replaces a previously filed claim, dated \_\_\_\_\_  amends \_\_\_\_\_

**1. Basis for Claim**

Goods sold

Services performed

Money loaned

Personal injury/wrongful death

Taxes

Other \_\_\_\_\_

Retiree benefits as defined in 11 U.S.C. § 1114(a)

Wages, salaries, and compensation (fill out below)

Your SS # \_\_\_\_\_

Unpaid compensation for services performed from \_\_\_\_\_ (date) to \_\_\_\_\_ (date)

**2. Date debt was incurred:** 3/24/03 **3. If court judgment, date obtained:** \_\_\_\_\_

**4. Total Amount of Claim at Time Case Filed:** \$ 1,245.00

- If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below

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.**

Check this box if your claim is secured by collateral (including a right of setoff)

Brief Description of Collateral:

Real Estate  Motor Vehicle

Other \_\_\_\_\_

Value of Collateral \$ \_\_\_\_\_

Amount of arrearage and other charges at time case filed included in secured claim, if any \$ \_\_\_\_\_

**6. Unsecured Priority Claim.**

Check this box if you have an unsecured priority claim

Amount entitled to priority \$ \_\_\_\_\_

Specify the priority of the claim

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 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)

Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7)

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

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

\*Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment

**7. Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.


**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.

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Date 6/23/03 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)  
Marcia Haback - owner

**FILED**  
**JUL 01 2003**  
**BMC**

Fleming Companies Claim  
  
 01354



COMMERCIAL & RESIDENTIAL  
LAWN MAINTENANCE • LANDSCAPING  
GRASS CUTTING  
BULLDOZING • LOT CLEARING  
TRACTOR WORK

Phone 715-359-6159

Fax 715-355-0884

June 18, 2003

Flemming Company  
29 Super Foods  
2806 Schofield Av  
Weston WI 54476

Re. Lawn Maintenance at 2806 Schofield Av, Schofield WI

Spring Clean up around entire store & 3 houses adjacent to Fox St.  
Dethatch lawn areas Trim shrubbery. Clean up of garbage, leaves & debris. Fertilization.

Work Performed. 3/15/03 - 3/24/03

\$ 1245.00

Scott's Enterprises

A handwritten signature in black ink, appearing to read "Marcia Halbeck".

Marcia Halbeck