

United States Bankruptcy Court District of Delaware		PROOF OF CLAIM	
In re (Name of Debtor) Fleming Company - Dallas		Case Number 03-10945 (MFW)	
NOTE This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" of payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.			
Name of Creditor <i>(The person or entity to whom the debtor owes money or property)</i> Eastman Kodak Company		<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 type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input checked="" type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	
Name and Addresses Where Notices Should be Sent Eastman Kodak Company 343 State Street Rochester, NY 14650-1121 Attn: Sue Siemieniuk 6036446 Telephone No. 800-438-5451 X 51			
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR 6036446		Check here if this claim <input type="checkbox"/> replaces a previously filed claim, <input checked="" type="checkbox"/> amends dated 7/28/03	
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 (Describe briefly)		<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensations (Fill out below) Your social security number _____ Unpaid compensations for services performed from _____ (date) to _____ (date)	
2 DATE DEBT WAS INCURRED 12/17/01-3/17/03		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.			
<input type="checkbox"/> SECURED CLAIM \$ Attach evidence of perfection of security interest. Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly)		<input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$2000), 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) <input type="checkbox"/> Contributions to an employee benefit plan—U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use—11 U.S.C. § 507(a)(6) <input type="checkbox"/> Taxes or penalties of governmental units—11 U.S.C. § 507(a)(7) <input type="checkbox"/> Other—11 U.S.C. §§ 507(a)(2), (a)(5)—(Describe briefly)	
Amount of arrearage and other charges included in secured claim above if any \$ _____ <input checked="" type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$-22,898.11 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.			
5 TOTAL AMOUNT OF CLAIM AT TIME CASE FILED \$-22,148.47 (Unsecured) \$ _____ (Secured) \$ _____ (Priority) \$-22,148.47 (Total)			
<input type="checkbox"/> Check this box if claim includes prepetition 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.		THIS SPACE IS FOR COURT USE ONLY	
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 <input checked="" type="checkbox"/> TIME 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 7/31/03		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) <i>Susan Siemieniuk</i> Susan Siemieniuk Special Collections	

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Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both 18





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 FLEMING CTP/DALLAS GMD 10 of 10
 73126-8861 OKLAHOMA CITY

Doc Date	Allocation	DT	PK	R/C	Amount	Curr	PD Dis	PD Due	Due Date	M	PO#/Text
12/21/2000	105320479	DA	11	010	3,432.00-	USD	952	952	12/21/2000		*52378978
12/17/2001	DLU906839	DA	06	104	2,050.00	USD	591	591	12/17/2001		368935 4-1
01/31/2002	DL2010727	DZ	06	106	2,639.00	USD	546	546	01/31/2002		CIAPU STOR
02/10/2003	MGX844479	DA	06	106	486.61	USD	171	171	02/10/2003		CIAPU MEMP
02/13/2003	ck 2354843	DA	06	015	347.78	USD	168	168	02/13/2003		sum of 23
02/19/2003	ck 2578492	DA	06	015	518.09	USD	162	162	02/19/2003		sum of 10
02/24/2003	ck 2578798	DZ	06	015	446.00	USD	157	157	02/24/2003		sum of 8 d
03/03/2003	ck 2579031	DZ	06	015	629.76	USD	150	150	03/03/2003		sum of 24
03/17/2003	CK#2356145	DZ	06	015	565.12	USD	136	136	03/17/2003		SUM OF 33
04/25/2003	0105672336	RU	11		27,148.47-	USD	97	97	04/25/2003	Q	Rebate Cre

Selected	22,898.11- USD
Displayed	22,898.11- USD