

**UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE**

**PROOF OF CLAIM**



s138619

Scheduled Claim Ref # 2-F2-26245  
**YOUR CLAIM IS SCHEDULED AS**

In re  
**Fleming Companies, Inc**

Case Number  
**03-10945**

\$184 63 UNSECURED

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.

- 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 this address differs from the address on the envelope sent to you by the court.

**Name of Creditor and Address**

0354429402702

HILLYARD KENTUCKY  
P O BOX 55376  
LEXINGTON KY 40555

The amounts reflected above constitute your claim as scheduled by the Debtor. If you agree with the amounts set forth herein and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below.

**If the amounts shown above are listed as Contingent, Unliquidated or Disputed a proof of claim must be filed.**

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

Creditor Telephone Number ( )

CREDITOR TAX I.D. #  
**440522196**

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR  
**MDAL69650**

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

**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 number \_\_\_\_\_

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

**2 DATE DEBT WAS INCURRED**

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ 184.63 (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (unsecured priority) \$ 184.63 (total)

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 above, if any \$ \_\_\_\_\_

**6 UNSECURED PRIORITY CLAIM**

Check this box if you have an unsecured priority claim.

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 4/1/01 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 your claim, please enclose a self-addressed stamped envelope and an additional copy of this proof of claim.

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is received on or before 4:00 p.m., September 15, 2003, Pacific Daylight Time.

**BY MAIL TO**  
Bankruptcy Management Corporation  
P O BOX 900  
El Segundo CA 90245-0900

**BY HAND OR OVERNIGHT DELIVERY TO**  
Bankruptcy Management Corporation  
1330 East Franklin Avenue  
El Segundo CA 90245

**THIS SPACE FOR COURT USE ONLY**

**FILED**

AUG 08 2003

DATE SIGNED **8/15/03**

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).  
**Cindy Ferguson Credit Manager**

**RMC**  
Fleming Companies Claim

02667

INVOICE

Page 1

Dept PO Box 8078  
Carol Stream, IL 60122-8078

MD1332584

Ship from  
HILLYARD KENTUCKY

Phone (800) 548-5773

Sold to	MD26F650	Ship to	MD26F650
	FLEMING-KENTUCKY DIVISION		FLEMING-KENTUCKY DIVISION
	P O BOX 218		HWY 920 E INDUSTRIAL PARK
	LETCHFIELD, KY 42754		LETCHFIELD, KY 42754

Customer#	Customer PO#	Payment Terms	Phone
MD26F650		NET 30 DAYS	270-259-9341

Invoice date	Ship via	Entered by	Sales rep
03/26/03	OUR TRUCK	NEHO	ALISA PAYNE

Product Number	Qty Ordered	Qty Ship	Qty B/O	Unit	Unit Price	Extended Price
HIL0000906	8	6	2	GAL	27 78	166 68
ARSENAL HEAVY DUTY FLOOR CLEANER						

THANK YOU . FROM THE HILLYARD TEAM!!!	Subtotal	166 68
	Tax	10 45
	Handling	7 50
	Invoice Amount	184 63

**UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE**

**In re Fleming Companies, Inc et al  
Case No 03-10945-(MFW)-11**

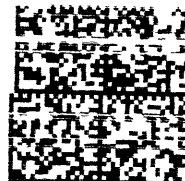
**DOCUMENTS APPENDED TO CLAIM**

On June 13, 2005, document(s) were appended to Claim Numbers **2666 and 2667** for the following reason(s)

- Stipulation and Settlement Agreement dated
- New Supporting Documents
- Change of Address mailed on 6/9/05
- Notice of Withdrawal of Claim
- Other Stipulation per Docket Number ##

FLEMING COMPANIES INC  
C/O BMC  
PO BOX 900  
EL SEGUNDO CA 90245-0900

address change



012416203745

Master

\$00 370

05 25 2005

Mailed From 90045  
US POSTAGE



HILLYARD KENTUCKY  
PO BOX 55376  
LEXINGTON KY 40555

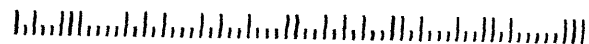


Box 11249  
Lexington, Ky 40574

403 N1 1 C04 C 34 05/07/05  
NOTIFY SENDER OF NEW ADDRESS  
HILLYARD-KY  
PO BOX 11249  
LEXINGTON KY 40574-1249

BC 40574124949 \*2770-08961-07-13

40555+5376 13  
40574%1249



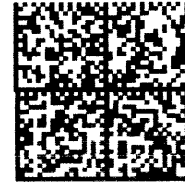
**HILLYARD, INC.**



**THE Cleaning Resource**

PO Box 11249 • LEXINGTON KY 40574 1249

REC'D JUN 13 2005



Hasler

012H16208851

\$00 370

06/09/2005

Mailed From 40511

US POSTAGE

Fleming Companies  
Box 900  
El Segundo, CA 90245-0900

30245+0900

