

<b>UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE</b>	<b>PROOF OF CLAIM</b>
In re	Case Number



544476

Bar Date Ref # 2-NVM-2449

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 and Address**

Lyman Printing & Stamp Co. Inc.  
1345 S Main St  
Salt Lake City UT 84115

0354653544476

☐ 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.

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 ID #

87-0261483

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

Check here if this claim

☐ replaces or amends

a previously filed claim dated

**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

(date)

to (date)

**2 DATE DEBT WAS INCURRED** Feb. 4 Mar 2003

**3 IF COURT JUDGMENT, DATE OBTAINED**
**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE**

\$ 99.97

(unsecured)

\$

(secured)

\$

(unsecured priority)

\$

99.97

(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

DATE SIGNED

8/5/03

**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).

Barbara N. Lyman

BARBARA N. LYMAN

THIS SPACE FOR COURT USE ONLY

FILED  
AUG 08 2003  
BMC

Fleming Companies Claim



02751

Penalty for presenting fraudulent claim is a fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 AND 3571.

See Other Side For Instructions

Lyman Printing & Stamp Co , Inc  
 1345 South Main Street  
 Salt Lake City, UT 84115

Voice 801-486-6172  
 Fax 801-486-6463

# Statement

Statement Date  
 Jul 31, 2003

Customer ID  
 Fleming Companies

## Account Of

Fleming Salt Lake City Div  
 Expense Payables  
 P O Box 268821  
 Oklahoma, OK 73126-8821

Amount Enclosed

\$

Date	Date Due	Reference	Paid	Purchase Order	Amount	Balance
2/24/03	3/26/03	76311		Karen W	61 75	61 75
3/11/03	4/10/03	76562		Tom F/Bakery	5 25	67 00
3/18/03	4/17/03	76677		Kristi/Cat Mkt	32 97	99 97
TOTAL						99 97

0 - 30	31 - 60	61 - 90	Over 90 days
0 00	0 00	0 00	99 97

**INVOICE****LYMAN PRINTING  
& STAMP Co., Inc.**

1345 SOUTH MAIN STREET  
SALT LAKE CITY, UTAH 84115  
Phone (801) 486-6172 Fax (801) 486-6463  
Toll Free 800-420-6172 Toll Free Fax 800-898-0463

INVOICE NUMBER 76311

INVOICE DATE 2/24/03

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D TO

Fleming Salt Lake City Div  
Expense Payables  
P O Box 268821  
Oklahoma, OK 73126-8821

Ship To  
Fleming Salt Lake Division  
2455 West 1500 South  
Salt Lake City, UT 84126

CUSTOMER ID		CUSTOMER PO		PAYMENT TERMS	
Fleming Companies		Karen W		Net 30 Days	
SALES REP ID		SHIPPING METHOD		SHIP DATE	DUE DATE
RL		Our Truck		2/24/03	3/26/03
QUANTITY	ITEM NUMBER	DESCRIPTION		UNIT PRICE	EXTENSION
2 00	2	Self-inking Stamps / Paul's & Ridley's		18 00	36 00
1 00	2	Self-inking Stamps / Fleming - SLC		21 00	21 00

**COPY**  
of original

TERMS NET 30 DAYS A FINANCE CHARGE OF 1  
1/2% PER MONTH (18% ANNUAL RATE) will be  
charged to all past due accounts. Customer agrees to  
pay all costs of collection and reasonable attorneys  
fees should collection become necessary. PRICE  
INCLUDES CHARGES FOR ANY REUSABLE

MATERIALS

Subtotal	57 00
Sales Tax	3 76
Freight	0 99
Total Invoice Amount	\$61 75
Payment Received	0 00
	\$61 75

X Shole Christensen

# **LYMAN PRINTING & STAMP Co., Inc.**

1345 SOUTH MAIN STREET  
SALT LAKE CITY, UTAH 84115  
Phone (801) 486-6172 Fax (801) 486-6463  
Toll Free 800-420-6172 Toll Free Fax 800-898-0463

## **INVOICE**

INVOICE NUMBER 76462  
INVOICE DATE 3/11/03  
PAGE 1

D TO

Fleming Salt Lake City Div  
Expense Payables  
P O Box 268821  
Oklahoma, OK 73126 8821

Ship To

Fleming Salt Lake Division  
2455 West 1500 South  
Salt Lake City, UT 84116

CUSTOMER ID		CUSTOMER PO		PAYMENT TERMS	
Fleming Companies		Lynn F/Hakery		Net 30 Days	
SALES REP ID		SHIPPING METHOD		SHIP DATE	DUE DATE
RI		Our Truck		3/11/03	4/10/03
QUANTITY	ITEM NUMBER	DESCRIPTION		UNIT PRICE	EXTENSION
1.00	3	Signs / Nameplate for Ken Fultz		4.00	4.00

**COPY**  
of original

TERMS NET 30 DAYS A FINANCE CHARGE OF 1  
12% PER MONTH (18% ANNUAL RATE) will be  
charged to all past due accounts. Customer agrees to  
pay all costs of collection and reasonable attorneys  
fees should collection become necessary. PRICE

INCLUDES CHARGES FOR ANY REUSABLE

MATERIALS

Subtotal	4.00
Sales Tax	0.26
Freight	0.00
Total Invoice Amount	4.26
Payment Received	0.00
	\$4.26

X Phoebe Christensen

# INVOICE

## LYMAN PRINTING & STAMP Co., Inc.

1345 SOUTH MAIN STREET  
SALT LAKE CITY, UTAH 84115  
Phone (801) 486-6172 Fax (801) 486-6463  
Toll Free 800-420-6172 Toll Free Fax 800 898-0463

INVOICE NUMBER 76677

INVOICE DATE 3/10/03

PAGE 1

SOLD TO

Fleming Salt Lake City Div  
Expense Payables  
P O Box 2600 Y  
Oklahoma, OK 73126-8821

Ship To

Fleming Salt Lake Division  
2425 West 1500 South  
Salt Lake City, UT 84126

CUSTOMER ID		CUSTOMER PO		PAYMENT TERMS	
Fleming Companies		Kush/ at Mkt		Net 30 Days	
SALES REP ID		SHIPPING METHOD		SHIP DATE	DUE DATE
RI		Our Truck		3/18/03	4/17/03
QUANTITY	ITEM NUMBER	DESCRIPTION		UNIT PRICE	EXTENSION
1.00	2	Self Inking Stamp / Signature Stamp for Julian		10.00	10.00

**COPY**  
of original

TERMS NET 30 DAYS A LATE CHARGE OF 1  
1.0% PER MONTH (18% ANNUAL RATE) will be  
charged to all past due accounts. Customer agrees to  
pay all costs of collection and reasonable attorneys  
fees should collection become necessary. PRICE  
INCLUDES CHARGES FOR ANY REUSABLE

Subtotal  
Sales Tax  
Freight  
Total Invoice Amount  
Payment Received

20.00  
1.00  
0.00  
\$21.00  
\$21.00

RECEIVED BY

*[Signature]*