

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

PROOF OF CLAIM



619713

Bar Date Ref # 2-NVM-86215

In re Fleming Companies, INC 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" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503

Name of Creditor and Address

Nor-cal Battery
3432 Cherokee Ed Unit D
Stockton CA 95205

0354653619713

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 I D # 68-0327280 ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR FB377
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 \$ 7500 (unsecured) \$ _____ (secured) \$ _____ (unsecured priority) \$ 7500 (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

THIS SPACE FOR COURT USE ONLY

FILED
AUG 08 2003
AUG 08 2003

BMC

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
8/4/03

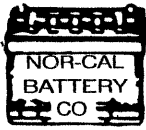
SIGN and print the name and title if any of the creditor or other person authorized to file this claim (attach copy of power of attorney if any)
Nancy L. Sansing
Bookkeeper

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



02753

See Other Side For Instructions



Nor-Cal BATTERY

3432 CHEROKEE ROAD UNIT D
STOCKTON CALIFORNIA 95205
(209) 948 1411 FAX (209) 948 5131
TID 68 0327280

INVOICE

1117/41

Page 1

SALESPERSON FLEMING FOODS	DATE OF INVOICE Mar 28.03
SHIP TO SAML	

TO

FLEMING FOODS
3771 CHANNEL DRIVE
WEST SACRAMENTO CA 95691

ACCOUNT NO	DATE SHIPPED	SHIPPED VIA	COL P P	FOB POINT	TERMS	YOUR ORDER NUMBER	
1B377	3-28-03	OUR TRUCK			NET 30	N/A	
QUANTITY	DESCRIPTION					UNIT PRICE	AMOUNT
1	CASE REPAIR CAN 88045 JRC 125-15 TIP W/O #185 ATTACHED					75 00	75 00
						TOTAL	75 00

Thank You



NOR-CAL BATTERY Co.
 3442 E CHEROKEE ROAD
 STOCKTON, CA 95205
 PHONE (209) 948-1411
 FAX (209) 948-5131

INVOICE

No 117741

SOLD TO
 Fleming Foods
 3771 Channel Dr
 West Sacramento, CA 95691

DATE ORDERED
 3-28-03
YOUR ORDER NUMBER

SHIP DATE
 3-28-03

SHIP TO
 APQ - 7 2003
 FB377

TERMS NET 15 DAYS A finance charge of 1 1/2% per month (18% per annum) will be charged on past due accounts

CASH CHECK ON ACCOUNT DELIVERED BY
 OUR TRUCK WILL CALL

ITEM#	QTY. ORDERED	DESCRIPTION	SHIPPED	UNIT PRICE	EXTENSION
		Labor 18 x 125-15 s/w 8HCH04S Case Repair w/o 185			75.00

DATE RECEIVED	RESALE NUMBER	RESALE <input type="checkbox"/>	FREIGHT
		TAXABLE <input type="checkbox"/>	TAX
TOTALS			75.00

RECEIVED BY
 OFFICE

PLEASE PAY FROM THIS INVOICE

NOR-CAL BATTERY CO.
 3432-D CHEROKEE RD.
 STOCKTON, CA 95205
 PHONE (209) 948-1411
 FAX (209) 948-5131

NO 0185

Inv# 117741

QUAN	PART NUMBER AND DESCRIPTION	PRICE	AMOUNT
	Warranty Return		
	Repaired Cracked Steel Case.		
	2 Covers		
	Approx 5 of		
	Good.		

CUSTOMER INFORMATION

NAME: Fleming Foods Soc. ^{WEST} PHONE: DATE: 3/28/03

ADDRESS: 3711 Channel Dr. CITY: West Sacramento, CA 95691

CUSTOMER'S ORDER NO. DATE & TIME PROMISED: / /

WRITTEN BY: TERMS: A.M. P.M.

YEAR-MAKE-MODEL SERIAL NUMBER MILEAGE MOTOR NUMBER LICENSE NO.

OPER NO. INSTRUCTIONS **AMOUNT**

LUBE CHANGE OIL OIL FILTER

DIFFERENTIAL AIR CLEANER TRANSMISSION

ADJUST BRAKES WHEEL ALIGN ROTATE TIRES

WASH POLISH EMISSION SER

TYPE 18C125-15

81040US

ESTIMATE

(SEE BACK) **TOTAL PARTS ***

ACCESSORIES

BILLING

C O D Charge

Guarantee Repeat

GALLONS GAS QUARTS OIL LBS GREASE

TOTAL GAS, OIL, GREASE *

TOTAL LABOR * 15 00

TOTAL PARTS *

ACCESSORIES *

GAS, OIL, GREASE *

OUTSIDE WORK

TIRES-TUBES

SUB-TOTAL

TAX

*** TOTAL DUE ***

SIGNED: [Signature] DATE: 3/28/03

AUTO REPAIR ORDER

ESTIMATE COPY

TOPS FORM 8868

MADE IN U.S.A.