

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

**PROOF OF CLAIM**



s122304

Scheduled Claim Ref # 1-F2-16777

**YOUR CLAIM IS SCHEDULED AS**

\$80.51 UNSECURED

In re  
**Core-Mark International, Inc**

Case Number  
**03-10944**

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**

0354429425686

RENO FORKLIFT/STORAGE SYS  
P O BOX 50009  
SPARKS NV 89435

☐ 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.

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 ID #

88-0158826

ACCOUNT OR OTHER NUMBER BY WHICH

CREDITOR IDENTIFIES DEBTOR

6230

Check here ☐ replaces  
if this claim ☐ 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** 3/5/03

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE**

\$ 80.51

(unsecured)

(secured)

(unsecured priority)

(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

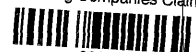
**SIGN** and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any).

Patricia Lopez Sec

THIS SPACE FOR COURT  
USE ONLY

FILED  
AUG 08 2003  
BMC

Fleming Companies Claim



02757

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

7 6 7 3 0

**RENO FORKLIFT/STORAGE SYSTEMS**  
**RENO SCALES**

CORE MARK DIST  
245 TELEGRAPH ST  
RENO, NV 89502  
HOME 775-322-4038 BUS

# INVOICE

171 CONEY ISLAND DRIVE \* SPARKS NEVADA 89431  
P O BOX 50009 \* SPARKS NEVADA 89435  
(775) 329 1384  
FAX (775) 329 1266

PAGE 1

SERVICE ADVISOR 823 JULIE SALAZAR

|             |                |                |               |          |              |           |
|-------------|----------------|----------------|---------------|----------|--------------|-----------|
| FUEL        | YEAR           | MAKE/MODEL     | SERIAL NUMBER | UNIT NO  | HOURS IN/OUT | TAG       |
|             | 00             | CROWN PE354060 | 6A127579      |          | 5861/5893    |           |
| IN SVC DATE |                | WARR EXP       | PROMISED      | PO NO    | PAYMENT      | INV DATE  |
| 23AUG1995   |                |                |               | DAN 0 00 | CHG          | 05MAR2003 |
| R O. OPENED | COMPLETED DATE | OPTIONS        |               |          |              |           |
| 03MAR03     | 05MAR03        |                |               |          |              |           |

| LINE                   | OPCODE  | TECH     | TYPE | HOURS                               | LIST | NET   | TOTAL |
|------------------------|---------|----------|------|-------------------------------------|------|-------|-------|
| A                      |         |          |      | PLANNED MAINTENANCE 90 DAY (ZONE 1) |      |       |       |
|                        | 10090Z1 |          |      | PLANNED MAINTENANCE 90 DAY (ZONE 1) |      |       |       |
|                        |         | 430CPM16 |      | 1 00                                |      | 30.00 | 30 00 |
| *****                  |         |          |      |                                     |      |       |       |
| MISCELLANEOUS SUPPLIES |         |          |      |                                     |      |       | 1 20  |

MISCELLANEOUS SUPPLIES

OUR NEW PHYSICAL ADDRESS IS  
171 CONEY ISLAND DRIVE, SPARKS, NV 89431

OUR MAILING ADDRESS IS:  
PO BOX 50009, SPARKS, NV 89435

9/20/21

|                   |  |                           |        |
|-------------------|--|---------------------------|--------|
| SIGNATURE<br>COPY |  | DESCRIPTION               | TOTALS |
|                   |  | LABOR AMOUNT              | 30.00  |
|                   |  | PARTS AMOUNT              | 0.00   |
|                   |  | GAS OIL LUBE              | 0.00   |
|                   |  | SUBLET AMOUNT             | 0.00   |
|                   |  | MISC CHARGES              | 1.20   |
|                   |  | TOTAL CHARGES             | 31.20  |
|                   |  | ADJUSTMENTS               | 0.00   |
|                   |  | SALES TAX                 | 0.09   |
|                   |  | PLEASE PAY<br>THIS AMOUNT | 31.29  |

**SIGNATURE COPY**

# Reno Forklift Storage Systems Reno Scales



171 CONEY ISLAND DRIVE  
SPARKS NEVADA 89431  
PHONE (775) 329 1384

P.O. BOX 50009  
SPARKS NEVADA 89435  
FAX (775) 329 1266

Service Line Direct (775) 982 8828  
Parts Line Direct (775) 982 8821

## SERVICE ADVISOR

25248Q 12/02

|            |          |            |               |                 |              |
|------------|----------|------------|---------------|-----------------|--------------|
| FUEL       | YEAR     | MAKE/MODEL | SERIAL NUMBER | CUSTOMER UNIT # | HOURS IN/OUT |
|            |          |            |               |                 | 5893         |
| DEL DATE   | WARR EXP | PO #       | TERMS NET 30  | INV DATE        |              |
|            |          |            |               |                 |              |
| R O OPENED |          | OPTIONS    |               |                 |              |
|            |          |            |               |                 |              |

## ARTS USED IN THIS REPAIR ARE AS FOLLOWS

| TRUCK<br>NUMBER | SO | PART NUMBER | PART DESCRIPTION         | QUANTITY | TRUCK<br>NUMBER | SO | PART NUMBER | PART DESCRIPTION | QUANTITY |
|-----------------|----|-------------|--------------------------|----------|-----------------|----|-------------|------------------|----------|
|                 |    |             | OIL                      |          |                 |    |             |                  |          |
|                 |    |             | OIL FILTER               |          |                 |    |             |                  |          |
|                 |    |             | AIR FILTER               |          |                 |    |             |                  |          |
|                 |    |             | HAZARDOUS WASTE DISPOSAL |          |                 |    |             |                  |          |
|                 |    |             | TIRE DISPOSAL            |          |                 |    |             |                  |          |

| OK | R=SEE REMARKS | A=ADJUST |                                  |     |  |                                   |     |  |                             |     |
|----|---------------|----------|----------------------------------|-----|--|-----------------------------------|-----|--|-----------------------------|-----|
|    |               |          | E Hoses & Reels                  |     |  | 16 Steering                       |     |  | 7 Check Belt                |     |
|    |               |          | F Hoist & Tilt Cylinders         |     |  | 17 Parking Brake                  |     |  | 8 Transmission Fluid Level  | N/A |
|    |               |          | G Side Shift                     | N/A |  | 18 Horn                           |     |  | 9 Check UeJoints            |     |
|    |               |          | 7 Battery Water Level            |     |  | 19 Warning & Safety Equipment     |     |  | <b>ELECTRIC LIFT TRUCKS</b> |     |
|    |               |          | 8 Oil Level Differential         |     |  | 20 Forks                          |     |  | 1 Battery Connector         |     |
|    |               |          | 9 Oil Level Hydraulic Reservoir  |     |  | <b>INTERNAL COMBUSTION TRUCKS</b> |     |  | 2 Battery Cable Condition   |     |
|    |               |          | 10 Fluid Level Master Cylinder   |     |  | 1 Drain & Refill Engine Oil       |     |  | 3 Contactor Tips            |     |
|    |               |          | 11 Check Brake Pedal Clearance   | N/A |  | 2 Replace Oil Filter              |     |  | 4 Electrical Connections    |     |
|    |               |          | 12 Check Control Valve Operation |     |  | 3 Service Air Filter              |     |  | 5 Relays and Switches       |     |
|    |               |          | 13 Check Mast & Carriage         |     |  | 4 Remove/Clean Battery Terminal   | N/A |  | 6 Drive Motor               |     |
|    |               |          | 14 Instrument Gauges             |     |  | 5 Blow Out Radiator               |     |  | 7 Pump Motor                |     |
|    |               |          | 15 Brakes                        |     |  | 6 Check Coolant Level             |     |  | 8 Steer Pump Motor          | N/A |

## COMPLAINT

## AUSE

## CORRECTIVE ACTION

RVISE  
JCK NO 134  
DATE COMPLETED 3/4/03  
CHANIC S  
GATURE WAG #430

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees/permission to operate the vehicle herein described on streets highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto.

*[Signature]*

6230

7 6 7 3 2

# RENO FORKLIFT/STORAGE SYSTEMS RENO SCALES

CORE MARK DIST  
245 TELEGRAPH ST  
RENO, NV 89502  
HOME 775-322-4038 BUS

INVOICE

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PAGE 1

SERVICE ADVISOR 823 JULIE SALAZAR

| FUEL        | YEAR           | MAKE/MODEL    | SERIAL NUMBER  | UNIT NO | HOURS IN/OUT | TAG |
|-------------|----------------|---------------|----------------|---------|--------------|-----|
|             | 55             | CLARK WP50045 | NP245502751275 |         | 834/841      |     |
| IN SVC DATE | WARR EXP       | PROMISED      | PO NO          | PAYMENT | INV DATE     |     |
| 03MAR2003   |                |               | DAN 0 00       | CHG     | 05MAR2003    |     |
| R O OPENED  | COMPLETED DATE | OPTIONS       |                |         |              |     |
| 03MAR03     | 05MAR03        |               |                |         |              |     |

| LINE | OPCODE | TECH | TYPE | HOURS | LIST | NET | TOTAL |
|------|--------|------|------|-------|------|-----|-------|
|------|--------|------|------|-------|------|-----|-------|

A PLANNED MAINTENANCE 90 DAY (ZONE 1)

11090Z1 PLANNED MAINTENANCE 90 DAY (ZONE 1)

430CPM16 1 00

40 00

40 00

1 T34-1203 FILTER

8 60

8 60

8 60

CHANGED HYDRAULIC FILTER. CHAINS CHECKED OK. FORKS ARE WORN PAST OSHA  
SPECS AND NEED TO BE REPLACED EXTENSION CYLINDERS ARE LEAKING

\*\*\*\*\*

OUR NEW PHYSICAL ADDRESS IS

171 CONEY ISLAND DRIVE, SPARKS, NV 89431

OUR MAILING ADDRESS IS

PO BOX 50009, SPARKS, NV 89435

9-304

| SIGNATURE<br>COPY | DESCRIPTION               | TOTALS |
|-------------------|---------------------------|--------|
|                   | LABOR AMOUNT              | 40 00  |
|                   | PARTS AMOUNT              | 8 60   |
|                   | GAS OIL LUBE              | 0 00   |
|                   | SUBLET AMOUNT             | 0 00   |
|                   | MISC CHARGES              | 0 00   |
|                   | TOTAL CHARGES             | 48 60  |
|                   | ADJUSTMENTS               | 0 00   |
|                   | SALES TAX                 | 0 62   |
|                   | PLEASE PAY<br>THIS AMOUNT | 49 22  |

SIGNATURE COPY

At Lake

**Reno Forklift**  
**Storage Systems      Reno Scales**



171 CONEY ISLAND DRIVE  
SPARKS NEVADA 89431  
PHONE (775) 329 1384

PO BOX 50009  
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Parts Line Direct (775) 982 8821

## SERVICE ADVISOR

252480 12 02

| FUEL     | YEAR | MAKE/MODEL  | SERIAL NUMBER | CUSTOMER UNIT # | HOURS IN/OUT |              |          |
|----------|------|-------------|---------------|-----------------|--------------|--------------|----------|
|          | 1994 | Cummins 444 | 144444444444  |                 | 114          | 841          |          |
| DEL DATE |      | WARR EXP    |               | PO #            |              | TERMS NET 30 | INV DATE |
| 11-1-94  |      |             |               | 1144            | 1144         | 1144         |          |

|             |  |         |             |
|-------------|--|---------|-------------|
| R O OPENED  |  | OPTIONS |             |
| JUN 06 1987 |  |         | MAY 05 1987 |

|                     |  |                         |          |
|---------------------|--|-------------------------|----------|
| TIME = 0015         | TEST TYPE =                                  | USE IF LOG INSTRUCTIONS | INTERVAL |
| # 100001            | CRUISE PLANNED MAINTENANCE - 10 DAY (ZONE 1) |                         |          |
| CHANGED HYD. FILTER |  |                         |          |

## ARTS USED IN THIS REPAIR ARE AS FOLLOWS

| TRUCK<br>NUMBER | SO | PART NUMBER | PART DESCRIPTION         | QUANTITY | TRUCK<br>NUMBER | SO | PART NUMBER | PART DESCRIPTION | QUANTITY |
|-----------------|----|-------------|--------------------------|----------|-----------------|----|-------------|------------------|----------|
|                 |    |             | OIL                      |          |                 |    |             |                  |          |
|                 |    |             | OIL FILTER               |          |                 |    |             |                  |          |
|                 |    |             | AIR FILTER               |          |                 |    |             |                  |          |
|                 |    |             | HAZARDOUS WASTE DISPOSAL |          |                 |    |             |                  |          |
|                 |    |             | TIRE DISPOSAL            |          |                 |    |             |                  |          |
| 134             | ✓  | 11203       | HYD. FILTER              | 1        |                 |    |             |                  |          |

| -OK              | R=SEE REMARKS | A=ADJUST |    |                               |                                   |                               |  |                             |                          |                         |
|------------------|---------------|----------|----|-------------------------------|-----------------------------------|-------------------------------|--|-----------------------------|--------------------------|-------------------------|
|                  |               |          | E  | Hoses & Reels                 | 16                                | Steering                      |  | 7                           | Check Belt               |                         |
|                  |               |          | F  | Hoist & Tilt Cylinders        | 17                                | Parking Brake                 |  | 8                           | Transmission Fluid Level |                         |
|                  |               |          | G  | Side Shift                    | 18                                | Horn                          |  | 9                           | Check UeJoints           |                         |
|                  |               |          | 7  | Battery Water Level           | 19                                | Warning & Safety Equipment    |  | <b>ELECTRIC LIFT TRUCKS</b> |                          |                         |
|                  |               |          | 8  | Oil Level Differential        | 20                                | Forks                         |  | 1                           | Battery Connector        |                         |
|                  |               |          | 9  | Oil Level Hydraulic Reservoir | <b>INTERNAL COMBUSTION TRUCKS</b> |                               |  |                             | 2                        | Battery Cable Condition |
|                  |               |          | 10 | Fluid Level Master Cylinder   | 1                                 | Drain & Refill Engine Oil     |  | 3                           | Contactor Tips           |                         |
|                  |               |          | 11 | Check Brake Pedal Clearance   | 2                                 | Replace Oil Filter            |  | 4                           | Electrical Connections   |                         |
|                  |               |          | 12 | Check Control Valve Operation | 3                                 | Service Air Filter            |  | 5                           | Relays and Switches      |                         |
|                  |               |          | 13 | Check Mast & Carriage         | 4                                 | Remove/Clean Battery Terminal |  | 6                           | Drive Motor              |                         |
|                  |               |          | 14 | Instrument Gauges             | 5                                 | Blow Out Radiator             |  | 7                           | Pump Motor               |                         |
|                  |               |          | 15 | Brakes                        | 6                                 | Check Coolant Level           |  | 8                           | Steer Pump Motor         |                         |
| CHAMICS COMMENTS |               |          |    |                               |                                   |                               |  |                             |                          |                         |

## COMPLAINT

AUSE

PERFORMED OSHA CHAIN & FORK INSPECTIONS CHAINS ARE OK BUT FORKS ARE WORN PAST OSHA SPECS & NEED TO BE REPLACED.

### CORRECTIVE ACTION

## EXTENSION CYLINDERS LEAK

HAS ALREADY BEEN WRITTEN UP  
NO QUOTE

VIRGINIA

|   |                              |   |  |
|---|------------------------------|---|--|
| TRUCK NO. <u>134</u>                          | DATE COMPLETED <u>3/4/03</u> | I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees/permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. | <input checked="" type="checkbox"/> <u>Brunner</u> |
| MECHANIC'S SIGNATURE <u>W. J. [Signature]</u> | # <u>430</u>                 |   |  |