FOR THE DISTRICT OF		PRO	OF OF CLAIM		680032			
In re		Case No	umber	Bar	Date Ref # 21-N-50010			
Mınter-Weisman Co		03-10	964					
NOTE This form should not be used to m	ake a claim for an administra	ative I		1				
expense arising after the commencement of an administrative expense may be filed	of the case A "request" for pursuant to 11 U S C § 503	payment	Check box if you are aware that anyone else has filed a proof of claim relating					
Name of Creditor and Address			to your claim Attach copy of statement giving particulars					
Market Tire 5337 Edgewood Ave N Crystal MN 55428	035465268(0032	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	If you have airead	ly filed a proof of claim with the			
Creditor Telephone Number (76) ~ 53		.D. D.V. W. II.O.	court		or BMC you do not need to file again			
41-0858546	ACCOUNT OR OTHER NUMBE CREDITOR IDENTIFIES DEBTO		Check here	laces or a previol ends	usly filed claim dated			
1 BASIS FOR CLAIM								
	sonal injury/wrongful death		ree benefits as defined in 11		•			
Services performed Tax	es er (describe briefly)	wag	les salaries and compensate Your social security number	•	w)			
inioney loaned Cur	er (describe briefry)		Unpaid compensation for se		d from to			
					(date) (date)			
2 DATE DEBT WAS INCURRED 3/13/0		3 IF CC	OURT JUDGMENT, DATE O	BTAINED	* CO 0 7 /			
AS OF PETITION DATE	9307 \$ (unsecured)	(se	ecured) \$	secured priority)	\$ 98071 (total)			
If all or part of your claim is secured or	entitled to priority, also co	mplete Ite	,	,	,			
Check this box if claim includes interest of	r other charges in addition to the	e principal a	amount of the claim Attach ite	mized statement o	of all interest or additional charges			
5 SECURED CLAIM	6	UNSECUE	RED PRIORITY CLAIM					
Check this box if your claim is secured right of setoff)	l by collateral (including a		his box if you have an unsec	cured priority clai	m			
Brief description of collateral			the priority of the claim					
Real Estate		befor	es salaries or commissions (up e filing of the bankruptcy petition less whichever is earlier 11 U	or cessation of th				
Motor Vehicle		r	ributions to an employee benefit	•	S 507(a)(4)			
Other		Up to	s \$2 100* of deposits toward pure ersonal family or household use	chase lease or re	ntal of property or services			
Value of collateral \$		Alımo	ony mainteriance or support owe 11 U S C § 507(a)(7)	ū				
Amount of arrearage and other cha	· ·	Taxes	s or penalties owed to governme	ental units - 11 U S	C § 507(a)(8)			
included in secured claim above if	any \$	Amo	r Specify applicable paragraph nunts are subject to adjustment on 4/1. espect to cases commenced on or after	/01 and every 3 years	thereafter			
7 CREDITS The amount of all payments 8 SUPPORTING DOCUMENTS <u>Attal</u> running accounts contracts court judgmen if the documents are not available explain 9 DATE-STAMPED COPY To receive	ch copies of supporting docu nts mortgages security agre If the documents are volum	lited and de <u>ments,</u> su ements an ninous atta	educted for the purpose of m ich as promissory notes pur nd evidence of perfection of l ich a summary	iaking this proof chase orders in ien DO NOT Sl	of claim voices itemized statements of END ORIGINAL DOCUMENTS			
additional copy of this proof of claim	e an acknowledgment of yo	our Ciaimi, į	piease enciose a seil-addri	esseu stampeu	envelope and an			
The original of this completed proof of so that it is received on or before 4 00				ACCEPTED)	THIS SPACE FOR COURT USE ONLY			
BY MAIL TO Bankruptcy Management Cor	noration		D OR OVERNIGHT DELIVERY ptcy Management Corpor		FILED			
P O BOX 900	ροιαμοίι	1330 E	ast Franklin Avenue	GUOTI	AUG 08 2003			
El Segundo, CA 90245-0900			undo, CA 90245		VAN DO SON?			
file this o	the name and title if any of the laim (attach copy of power of atta	orney if any))		BMC			
			WM MOBERGO	PRES)	Fleming Companies Claim			
Penalty for presenting fraudulent claim is a fine of		-	years or both 180SC §§1 'or Instructions	5∠ AND 35/7				



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TTARES IN SECTION

5337 EDGEWOOD AVENUE NORTH (54th & West Broadway) CRYSTAL, MINNESOTA 55428

TELEPHONE (763) 535 1716 or (763) 533 9710

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5337 EDGEWOOD AVENUE NORTH (54th & West Broadway) CRYSTAL MINNESOTA 55428

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5337 EDGEWOOD AVENUE NORTH (54th & West Broadway) CRYSTAL MINNESOTA 55428

TELEPHONE (763) 535 1716 or (763) 533 9710

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5337 EDGEWOOD AVENUE NORTH (54th & West Broadway) CRYSTAL MINNESOTA 55428

TELEPHONE (763) 535 1716 or (763) 533 9710

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