UNITED STATES BANKRUPTCY COURT PROOF OF CLAIM FOR THE DIS IRICT OF DELAWARE In re Case Number Bar Date Ref # 2-NVM-19349 NOTE This form should not be used to make a claim for an administrative Check box if you are expense arising after the commencement of the case. A 'request for payment aware that anyone else has of an administrative expense may be filed pursuant to 11 U S C § 503 filed a proof of claim relating to your claim Attach copy of Name of Creditor and Address statement giving particulars Check box if you have never received any notices 0354653560773 from the bankruptcy court in Scariano Brothers LLC this case 7850 Townsend PC New Orleans LA 70126 Check box if this address differs from the address on the envelope sent to you by the If you have already filed a proof of claim with the court Creditor Telephone Number (分り 200 - 8519 Bankruptcy Court or BMC you do not need to file again ACCOUNT OR OTHER NUMBER BY WHICH replaces Check here CREDITOR IDENTIFIES DEBTOR or amends a previously filed claim dated 72-0691789 松井リフナ if this claim BASIS FOR CLAIM Goods sold Personal injury/wrongful death Retiree benefits as defined in 11 U S C § 1114(a) Services performed Wages salaries and compensation (Fill out below) Money loaned Other (describe briefly) Your social security number Unpaid compensation for services performed from (date) (date) 2 DATE DEBT WAS INCURRED 3 IF COURT JUDGMENT, DATE OBTAINED 4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE (secured) (unsecured priority) 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 6 UNSECURED PRIORITY CLAIM Check this box if your claim is secured by collateral (including a Check this box if you have an unsecured priority claim right of setoff) Specify the priority of the claim Brief description of collateral Wages salaries or commissions (up to \$4 650*) earned within 90 days Real Estate before filing of the bankruptcy petition or cessation of the Debtor's business whichever is earlier 11 U S C § 507(a)(3) Motor Vehicle Contributions to an employee benefit plan 11 U S C § 507(a)(4) Other Up to \$2 100* of deposits toward purchase lease or rental of property or services for personal family or household use 11 USC § 507(a)(6) Alimony maintenance or support owed to a spouse former spouse or Value of collateral child 11 USC § 507(a)(7) Amount of arrearage and other charges at time case filed Taxes or penalties owed to governmental units 11 U S C § 507(a)(8) included in secured claim above if any \$ 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 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 AUG 1 1 2003 BY MAIL TO BY HAND OR OVERNIGHT DELIVERY TO Bankruptcy Management Corporation Bankruptcy Management Corporation PO BOX 900 1330 East Franklin Avenue El Segundo, CA 90245-0900 El Segundo, CA 90245 DATE SIGNED 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) Fleming Companies Clam Aronsud 5 czus Ale

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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

03/19/03 664693 80013 INVOICE

FLEMING COMPANIES, INC. -C C M

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FLEMING CO., INC -ATTN: CCM
D/B/A BILL TO : C C M

HWY 90

P.O BOX 25200

BROUSSAPD, LA.

OKLAHOMA CITY, OK. 73126-0200

REPRINT 08/04/2003

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FLEMING CO , INC.-ATTN: CCM D/B/A BILL TO : C C M

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BROUSSARD, LA

OKLAHOMA CITY, OK 73126-0200

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FLEMING COMPANIES, INC Customer Category Marketing Box 26550 Oklahoma City, OK 73126

Number 1107060103 JPMorgan Chase Bank

Texas Controlled Disbursements

Void After:90 Days

03/27/2003

REFER TO MAKER

THE AMOUNT OF

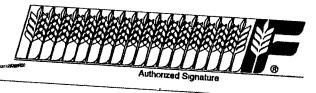
PAY TO THE ORDER OF

SCARIANO BROTHERS LLC

7850 TOWNSEND PC Z U 20 L Q. 84K

NEW ORLEANS LA 70126

VOID OVER \$947 06



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03/27/03 665348 81663 INVOICE

FLEMING COMPANIES, INC -C C M

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FLEMING CO , INC.-ATTN. CCM

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BROUSSARD, LA

OKLAHOMA CITY, OK. 73126-0200

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