

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

PROOF OF CLAIM



163693

Scheduled Claim Ref # 20-F2-18364

YOUR CLAIM IS SCHEDULED AS

\$843.75 UNSECURED

FILED

AUG 11 2003

BMC

In re
Head Distributing Company

Case Number
03-10963

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.

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.

Name of Creditor and Address

DIXIE EGG COMPANY
103 MCCLANE PARKWAY
COTTONWOOD AL 36320

0354429391734

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 **(904) 783-0522**

CREDITOR TAX ID #
59-1277940

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR
80110

Check here replaces or amends a previously filed claim dated _____

1 BASIS FOR CLAIM

- Goods sold
- Services performed
- Money loaned
- Personal injury/wrongful death
- Taxes
- Other (describe briefly)
- Retiree benefits as defined in 11 U.S.C. § 1114(a)
- Wages, salaries, and compensation (Fill out below)

Your social security number _____
Unpaid compensation for services performed from _____ to _____
(date) (date)

2 DATE DEBT WAS INCURRED **3/20/03 - 3/27/03**

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE \$ **843.75** (unsecured) \$ _____ (secured) \$ _____ (unsecured priority) \$ **843.75** (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

THIS SPACE FOR COURT USE ONLY

FILED

AUG 11 2003

BMC

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)

[Signature] **S.P. Stevenson C.F.O.**

Fleming Companies Claim



03179

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

DIXIE EGG COMPANY - ALABAMA
 103 MCLANE PARKWAY
 COTTONWOOD, AL 36320

INVOICE

REMIT TO
 POST OFFICE BOX 6933
 JACKSONVILLE FLORIDA 32236

ORIGINAL INVOICE
 INVOICE NO 19415

DATE 3/20/03

Due 3/30/03



QUALITY IS NEVER AN ACCIDENT.
 IT IS ALWAYS THE RESULT OF
 INTELLIGENT EFFORT.

RT	0001	
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SOLD TO ADEL GROCERY
 PO BOX 510
 ADEL, GA 31620

ENTERED MAR 21 2003

SHIP TO ADEL GROCERY
 PO BOX 510
 ADEL, GA 31620

CUSTOMER	SLSMN	PURCHASE ORDER	ORDER NO	ORDER DATE	SHIP DATE	SHIPPING INSTRUCTIONS
80110	00004	PO#179-0014830	19415	3/20/03	3/20/03	

TERMS NET 10 DAYS

Our Company shall charge 1½% carrying charge (interest) per month on all balances over 30 days old. Customer agrees to pay reasonable attorneys fees, if account is placed with our attorney for collection. Venue for any action shall be Duval County, Florida

QUANTITY	CODE	DESCRIPTION	DOZENS	UNIT PRICE	AMOUNT
50 CS	0391	A LARGE CTN 1/2 CASE WHITE	750	.7500	562.50
BASKETS DEL		BASKETS PICKED UP	SIG X <i>Jon Reuntee</i>		750 TOTAL - PAY THIS AMOUNT ▶
					562.50

Fleming

FLEMING CONVENIENCE

PURCHASE ORDER

REGISILP #

SHIP TO ADEL 115 N MAPLE STREET ADLL GA 31620 USA		VENDOR 1,9 DIXIE LGG COMPANY 103 McLANE ROAD COTTONWOOD AL 36320 ORDER DESK		ORDER DATE 2003-03-18	800-677-3376	PAGE 1 OF 1							
PURCHASED BY		VENDOR # 01105	SUB # 00	BUYER # 792	ARRIVAL DATE 2003-03-20 Thursday	334-677-1349							
DISCOUNT BRACKET 10 Days		PURCHASE ORDER # 179-0014830		THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL INVOICES, BILLS OF LADING, SHIPPING CONTAINERS AND PACKING SLIP									
WEIGHT 500		CU VOL 50		LBS									
QUANTITY ORDERED	PRCH UNIT	UPC CODE	ITEM NUMBER	ITEM DESCRIPTION	PACKING DESCRIPTION	CASE PACK	SEAL WEIGHT OZ/PT	INVOICE ALLOWANCE	OTHER ALLOWANCE	UNIT COST	EXTENDED COST	S/R	WHS ORG ON
50	CS	76087 00018	434761	EGGS LARGE GRADE A	15/DZ	1	50			11.25	562.50		15-340-01
50				***** ##ORDLP SLNI VIA FAX## Please fax confirmation of receipt of order to Jamie Paper Thanks			50	00	00		562.50		

Thank you,
Velma

PLEASE PRINT: SEND ORIGINAL INVOICE AND BILL OF LADING TO THE BOWL DISTRIBUTION CENTER. NOTICE: SUBSTITUTIONS EITHER IN PACKING OR PRICE WILL NOT BE ACCEPTED WITHOUT PRIOR AUTHORITY FROM BOWL DISTRIBUTION CENTER. WE RESERVE THE RIGHT TO RETURN ANY OR ALL MERCHANDISE SUBSTITUTED WITHOUT PRIOR AUTHORITY TO EITHER ANY OR ALL MERCHANDISE SHIPPED LATER THAN 30 DAYS FROM DATE OF ORDER AND TO DEDUCT FROM PAYMENT.

DIXIE EGG COMPANY - ALABAMA
 103 MCLANE PARKWAY
 COTTONWOOD, AL 36320

INVOICE


REMIT TO
 POST OFFICE BOX 6933
 JACKSONVILLE FLORIDA 32236

ORIGINAL INVOICE

INVOICE NO 19525

DATE 3/27/03

Due 4/1/03

 QUALITY IS NEVER AN ACCIDENT.
 IT IS ALWAYS THE RESULT OF
 INTELLIGENT EFFORT.

RT 0001

SOLD TO ADEL GROCERY
 PO BOX 510
 ADEL, GA 31620

ENTERED MAR 28 2003

SHIP TO ADEL GROCERY
 PO BOX 510
 ADEL, GA 31620

CUSTOMER	SLSMN	PURCHASE ORDER	ORDER NO	ORDER DATE	SHIP DATE	SHIPPING INSTRUCTIONS
80110	00004	PO#179-0016370	19526	3/27/03	3/27/03	

TERMS NET 10 DAYS

Our Company shall charge 1½% carrying charge (interest) per month on all balances over 30 days old. Customer agrees to pay reasonable attorneys fees, if account is placed with our attorney for collection. Venue for any action shall be Duval County, Florida.

QUANTITY	CODE	DESCRIPTION	DOZENS	UNIT PRICE	AMOUNT
25 CS	0391	A LARGE CTN 1/2 CASE WHITE	375	.7500	281.25
BASKETS DEL		BASKETS PICKED UP	SIG <i>Gen Roantree 25p</i> TOTAL - PAY THIS AMOUNT ▶		281.25

Fleming

FLEMING CONVENIENCE

PURCHASE ORDER

REGISLER #

SHIP TO ADEL 115 N MAPLE STREET ADEL GA 31620 USA		VENDOR 17 DIALIE LGG COMPANY 163 MILLINE ROAD COTTONWOOD AL 36320 ORDER DESK		ORDER DATE 2003-05-21	800-677-3376		PAGE 1 OF 1					
PURCHASED BY		VENDOR #	SUP #	BUYER #	ARRIVAL DATE 2003-05-27 Thursday	334-677-7349		PURCHASE ORDER # 179-0016370				
CS R-VD		07705	00	792	PAYMENT TERMS DISCOUNT BRACKET 10 Days		THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL INVOICES, BILLS OF LADING, SHIPPING CONTAINERS AND PACKING LISTS STANDING ORDER #					
QUANTITY ORDERED		PROCH VOL	WPC CODE	ITEM NUMBER	ITEM DESCRIPTION	PACKING DESCRIPTION	CASE PACK	SEAL WHITE ORDERED	UNIT COST	EXTENDED COST	S/E	WHOLE OLA SH
25	CS	76087	00018	434761	EGG. LARGE GRADL A	15/DZ	1	25	11.25	281.25		15-340101
					***** #0 ORDER SENT VIA FAX## Please fax confirmation of receipt of order and schedule delivery appt with Jamie Paper Ext 21 Thanks							
25								25	00	00		281.25

*Thank you,
Velma*

REPLACEMENTS SEND ORIGINAL INVOICE AND BILL OF LADING TO THE DISTRIBUTION CENTER
 NOTE: SUBSTITUTIONS PRIOR TO PACKING OR PRICE WILL NOT BE ACCEPTED WITHOUT PRIOR AUTHORITY FROM ISSUING DISTRIBUTION CENTER. WE RESERVE THE RIGHT TO DELIVER ANY OR ALL MERCHANDISE SUBSTITUTED WITHOUT PRIOR AUTHORITY. WE REFUSE ANY OR ALL MERCHANDISE SHIPPED LATER THAN 30 DAYS FROM DATE OF ORDER AND TO DEFECT FROM PAYMENT.
 ALL OTHERS ARE ON A ORDER BY C. ORDER ON THE 6. 2. 2. 2. 2. 2.

To Fax 133467774 9
 From Core 1 Fax 1 Internal 1 0
 Date 03/27/03 10:00 AM Page 2 of 2