

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

**PROOF OF CLAIM**



s135226

Scheduled Claim Ref # 2-F2-22852

**YOUR CLAIM IS SCHEDULED AS**

\$2 303 06 UNSECURED

In re  
**Fleming Companies, Inc**

Case Number  
**03-10945**

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**  
  
0354429415342  
  
MELBA FOOD SPECIALTIES INC  
37-20 SKILLMAN AVENUE  
LONG ISLAND CITY NY 11101

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 #  
**111879378**

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR  
**#243300**

Check here  replaces 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 \_\_\_\_\_ to \_\_\_\_\_  
 (date) (date)

**2 DATE DEBT WAS INCURRED** 2/6/03      **3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ 2303.06 (unsecured)      \$ \_\_\_\_\_ (secured)      \$ \_\_\_\_\_ (unsecured priority)      \$ 2303.06 (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 08 2003



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).  
MARIE CWOIC

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

# Melba FOOD SPECIALTIES, INC

Distributors of Fancy Foods

37 20 SKILLMAN AVE  
LIC NY 11101

(718) 786 3142 • FAX (718) 786 1026

STOP NO.  
1

PAGE	INVOICE DATE	INVOICE NUMBER
1	02/06/03	027065

FLEMING INC C T P  
KING OF PRUSSIA G M D  
P O BOX 268863  
OKLAHOMA CITY OK 73126-8863

FLEMING  
P O BOX 268863  
KING OF PRUSSIA  
OKLAHOMA CITY OK 73126

243300

CUSTOMER TELEPHONE NO 972-906-8507

QUANTITY	TERMS	SLSMN	P.O NUMBER	SHIP VIA	SPECIAL INSTRUCTIONS
000	27 10 NET 11	01		01 OUR TRUCK	

QTY	UM	ITEM NO	DESCRIPTION	SIZE	PACK	SRP	PRICE	EACH	EXTENSION
60	CS	006801	ANT JENNY APRIC/PEAC	17.5 OZ	B-12	3.99	29.95	2.50	1797.00
35	CS	006802	ANT JENNY MILK 'N BUT	17.5 OZ	B-12	2.99	22.95	1.91	803.25
5	CS	006800	ANT JENNY MILD MANN	17.5 OZ	B-12	2.99	22.95	1.91	114.75

*R.M.* 2/6/03  
10008  
2715 00

Product must be inspected upon receipt. No claims or returns will be accepted after 2 days.

ESTAMP

PREPARED BY \_\_\_\_\_

PIECE COUNT

10008

2715 00

PAY THIS AMOUNT

**Fleming**

TEXAS COMMERCE  
SAN ANGELO, TX

No <sup>64-88/</sup> 23573782 1113  
AG

Box 26847 Oklahoma City OK 73126

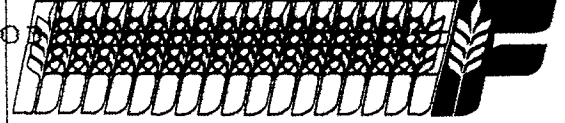
**REFER TO MAKER**

Date 03/27/03 Amount \$\*\*\*\*\*2,303 06\*

Pay  
TWO THOUSAND THREE HUNDRED THREE DOLLARS AND 06/100

Pay  
To  
The  
Order  
Of

MELBA FOOD SPECIALTIES, INC 04010  
37-20 SKILLMAN AVENUE  
LONG ISLAND CITY, NY 11101



Unique Character Facsimile Signature

⑈ 23573782 ⑈ ⑆ 111300880106300036160 ⑈

⑈ 0000230306 ⑈

*[Handwritten scribbles]*

VENDOR #  
178225

LY3300  
0109

Division			Invoice Date	Receipt Date	Inv No /Credit Request	Amount	Discor.nt
GMD	KING OF PRUSSIA		03/24/03	02/19/03	KGT402539	-364 80	0 00
GMD	KING OF PRUSSIA	CTP	02/06/03	02/19/03	027065	2,715 00	47 14
DATE OF CHECK 03/27/03			AMOUNT OF CHECK		\$2,303 06		

PRELIM

411.94



Fleming Companies 1/21/2003 12 10 PAGE 2/2 RightFax

INVOICE TO  
KOP GM DIVISION  
201 CHURCH ROAD  
P O BOX 1526  
KING OF PRUSSIA PA 19406-1526

SHIP TO:  
KOP GM DIVISION  
201 W CHURCH RD  
KING OF PRUSSIA PA 19406  
RUSH order fax conf to B Morales  
8972-906-1471/Tel 972-906-1496

24 3300

**Fleming  
Companies, Inc**

VENDOR  
MELBA FOOD SPECIALTIES  
ATTN ORDER DEPT  
37-20 SKILLMAN AVENUE  
LONG ISLAND C NY 11101

PICK-UP DATE  
02/20/03

VENDOR NO  
42875

**PURCHASE  
ORDER**

732-237-8715

DATE ORDERED 01/21/03	PURCHASE ORDER NO 849426	TERMS 10 DAYS 2 00X	PRICE PROTECTION
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SHIP VIA FAX732/340-1110

IMPORTANT NOTICE  
NOTIFY FLORIAN FOODS FOR HAVING  
SPRINTMENT IF UNABLE TO MEET  
ARRIVAL DATE

ADVISE FLORIAN FOODS PURCHASE  
ORDER NUMBER BY TELEPHONE  
TELEPHONE OR E-MAIL THE CAR  
NUMBER ROUTING DATE SHIPPED  
AND ORIGINAL POINT OF MAIL

TERMS AND CONDITIONS  
PURCHASE ORDER NUMBER MUST BE  
SHOWN ON ALL INVOICES SHIPPING  
INVOICES AND INVOICES  
ORDER NUMBER FOR ORDERING TO WHICH  
THIS PURCHASE ORDER APPLIES AND  
ANYTHING DONE BY BUYER IN CONNECTION  
WITH THIS PURCHASE ORDER SHALL BE IN  
COMPLIANCE WITH THE TERMS AND  
CONDITIONS OF THE ORDER. A RECEIPT IS  
TO BE OBTAINED FROM THE SUPPLIER  
AT THE TIME OF DELIVERY AND TO BE  
RETURNED TO THE BUYER WITHIN 10  
BUSINESS DAYS OF DELIVERY. THE BUYER  
AGREES TO HOLD THE SUPPLIER HARMLESS  
FROM ALL CLAIMS, DAMAGES, LOSSES  
AND EXPENSES, INCLUDING ATTORNEY'S  
FEES, ARISING OUT OF OR RESULTING  
FROM THE PURCHASE OF THE GOODS  
HEREUNDER, WHETHER OR NOT SUCH  
CLAIMS, DAMAGES, LOSSES AND  
EXPENSES ARE CAUSED IN WHOLE OR  
IN PART BY THE NEGLIGENCE, ACTIVE  
OR PASSIVE NEGLIGENCE, OF THE  
BUYER, ITS AGENTS, EMPLOYEES, OR  
OFFICERS.

UNDER THE TERMS AND CONDITIONS OF THIS  
PURCHASE ORDER, THE BUYER AGREES  
TO HOLD THE SUPPLIER HARMLESS FROM  
ALL CLAIMS, DAMAGES, LOSSES AND  
EXPENSES, INCLUDING ATTORNEY'S  
FEES, ARISING OUT OF OR RESULTING  
FROM THE PURCHASE OF THE GOODS  
HEREUNDER, WHETHER OR NOT SUCH  
CLAIMS, DAMAGES, LOSSES AND  
EXPENSES ARE CAUSED IN WHOLE OR  
IN PART BY THE NEGLIGENCE, ACTIVE  
OR PASSIVE NEGLIGENCE, OF THE  
BUYER, ITS AGENTS, EMPLOYEES, OR  
OFFICERS.

THIS PURCHASE ORDER IS ISSUED IN  
COMPLIANCE WITH EXECUTIVE  
ORDER 11246 THE REHABILITATION  
ACT OF 1974 AND THE VETERAN'S  
VETERANS' READJUSTMENT  
ACT.

OTHER THE QUANTITIES MAY BE SHIPPED IN  
ONE OR MORE LOTS. THE BUYER'S  
RECEIPT IS THE ONLY VALID RECEIPT  
FOR THE GOODS.

SHIPPING CHARGES TO BE PAID BY THE  
BUYER. THE BUYER SHALL BE RESPONSIBLE  
FOR OBTAINING ALL NECESSARY  
PERMITS AND LICENSES FOR THE  
TRANSPORTATION OF THE GOODS.  
THE BUYER SHALL BE RESPONSIBLE FOR  
OBTAINING ALL NECESSARY  
INSURANCE FOR THE GOODS.

DELIVERY TERMS OF SALE EXCEPT  
OTHER WELDON AT OUR DOCK.

FAILURE TO COMPLY WITH ABOVE  
MAY RESULT IN REFUSAL OF THE  
GOODS.

QUANTITY ORDERED	LPC CASE CODE	ITEM CODE	DESCRIPTION	PACK & SIZE	TIE HIGH	COST
35 CS	35398	JENNYS KICK N BUTT SAUCE		17 5 FZ	17	18 530
OF 12	00001	90107-4		17 5 FZ	5	PER 12
5 CS	35398	JENNYS MILD SAUCE		17 5 FZ	17	18 530
OF 12	00002	90108-2		17 5 FZ	5	PER 12
60 CS	35398	JENNYS APRCT/PEACH SAUCE		17 5 FZ	17	26 800
OF 12	00003	90109-0		17 5 FZ	5	PER 12

Bill  
C.T.P.  
King of Prussia G.M.D  
Fleming Inc  
P.O. Box 26 8863  
Ohalakana City

MUST CALL FOR APPT 72 HRS PRIOR TO ARRIVAL DATE  
SEPARATE B/L FOR EACH PO A HANDLING CHARGE WILL  
BE ASSESSED FOR OTHER THAN GOOD 40X48 PALLETS

73126  
8863

MERCHANDISER	TOTAL UNITS	TOTAL CASES	TOTAL PALLETS	TOTAL WEIGHT	TOTAL EXT COST
MORALES BLANCA	100	51	3	1300	2349

File