

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		PROOF OF CLAIM	
In re	<i>Fleming Companies, Inc.</i>	Case Number	<i>03-10945 (MFW)</i>



559195

Bar Date Ref # 2-NVM-17742

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

Pro Star Services
PO Box 110209
Carrollton TX 75011-0209

0354653559195

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.

Creditor Telephone Number *(972) - 245-6005*

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

CREDITOR TAX ID #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

3684

Check here if this claim

☐ 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 *1-7-03 - 4-1-03***3 IF COURT JUDGMENT, DATE OBTAINED****4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE***\$ 13,490.45*

(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).

BRUCE PETRICK CFO

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

THIS SPACE FOR COURT
USE ONLY

FILED

AUG 08 2003

Fleming Companies Claim



03318



P.O. BOX 110209
CARROLLTON TEXAS 75011 0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
05	01/07/00	17111	1

SOLD TO

FLEMING FOODS
1941 LAKE POINT
LEWISVILLE TX 76044

SHIP TO

CONTACT: CATHY HOOPE
PHONE: 972-466-8000

ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
217140	01/06/00	3661	51		FROMIN	01/07/00	NET 30 DAYS
ORDER QUANTITY		ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE	
18		1000	PS PREFERRED 1 30Z	18 95	CASE	341 10	
3		1050	PS PREFERRED DECAF	21 95	CASE	65 85	
2		1700	CREAM 200 PKTS CUFMT	29 95	CASE	59 90	
0		2100	SWEET & LOW 100	7 95	EACH	0 00	
2		125	SWEET & LOW 1250	16 95	EACH	33 90	
3		2300	SUGAR PACKETS 1000	10 95	CASE	32 85	
4		2600	TEA BAGS 1-GAL	9 95	EACH	39 80	
0		2610	TEA BAGS 1 CUP	5 95	EACH	0 00	
0		3001	BNUT REG HOT CHOC	7 95	EACH	0 00	
0		3005	BNUT SF HOT CHOC	7 95	EACH	0 00	
2		3508	CUP 8-OZ STYRO	20 95	CASE	41 90	
0		4000	T TOWELS 30CT	30 95	EACH	0 00	
3		4600	UTENSILS	21 95	CASE	65 85	
0		4700	STIR STIX	1 95	EACH	0 00	
0		5000	SOFT DRINK CAN	9 95	CASE	0 00	
0		6000	UZARKA 16-OZ	16 95	CASE	0 00	

CONTINUED ON NEXT PAGE

THIS IS NOT A RECEIPT FOR
THESE ITEMS. THE INVOICE
IS YOUR PROOF OF PURCHASE
FOR ALL RETURNS AND EXCHANGES.

TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



SALES AMOUNT

SALES TAX

TOTAL

PAYMENT RECEIVED

X
CUSTOMER SIGNATURE



P.O. BOX 110209
CARROLLTON, TEXAS 75011 0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
15	01/07/03	247111	2

SOLD TO

FLIMING FOODS
1941 LAKEPOINT
LEWISVILLE TX 76044

SHIP TO

CONTACT SANDY MOORE
PHONE 972-206-8000

ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
247144	01/07/03	36874	15		TRUCK	01/07/03	NET 30 DAY

ORDER QUANTITY	ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE
12	6800	SQUEAKY CLEAN	2.25	EACH	27.00
0	7000	SALT PKTS 3000CT	9.95	EACH	0.00
9	6035	DASANI 12-OZ CAN	11.50	EACH	103.50

THIS IS NOT A RECEIPT FOR THE
ITEMS LISTED ON THIS INVOICE
TO THE CREDIT OF THE
ACCOUNT FOR THE

TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



X _____
CUSTOMER SIGNATURE

SALES AMOUNT

811.65

2.5%
SALES TAX

11.12

TOTAL

822.77

PAYMENT RECEIVED



P.O. BOX 110209
CARROLLTON TEXAS 75011 0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
1	01/14/00	249087	1

SOLD TO

FLYING FOODS
1945 LAKEPOINT
LENN VILL

SHIP TO

UNITED STATES MARINE CORPS
PHONE 17 200 0000

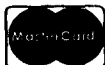
ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
219072	01/14/00	3681	5		TROMIN	01/14/00	NET 30 DAY
ORDER QUANTITY			ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE
18			1000	PS PREFERRED 1 30Z	18	5CASE	341 10
5			1050	PS PREFERRED DECAF	21	5CASE	109 75
4			1700	CREAM 900 PKTS CUFMT	29	5CASE	119 80
0			2100	SWEET & LOW 400	7	5EACH	0 00
0			1125	SWEET & LOW 1250	16	5EACH	0 00
4			2300	SUGAR PACKETS 1000	10	5CASE	43 80
4			2600	TEA BAGS 1-GAL	9	5EACH	39 80
10			2610	TEA BAGS 1-CUP	5	5EACH	59 50
0			3001	BNUT REG HOT CHOC	9	5EACH	0 00
0			2005	BNUT HF HOT CHOC	7	5EACH	0 00
3			3508	CUP 8 OZ STYRO	20	5CASE	62 85
0			4000	F TOWELS 30CT	30	5EACH	0 00
2			4600	UTENSILS	21	5CASE	43 70
0			4700	STIR STIX	1	5EACH	0 00
6			5000	SOFT DEPTH CAN	9	5CASE	59 70
0			2000	OLARKA 16 OZ	16	5CASE	0 00
CONTINUED ON NEXT PAGE							

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THIS IS NOT A PACKING SLIP
PLEASE FORWARD THIS INVOICE
TO YOUR ACCOUNTING DEPARTMENT
FOR PAYMENT FOR THE ORDER

TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



SALES AMOUNT

SALES TAX

TOTAL

PAYMENT RECEIVED

X

CUSTOMER SIGNATURE



P.O. BOX 110209
CARROLLTON TEXAS 75011-0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
	01/11/00	2400	2

SOLD TO

FLFMING FOODS
1941 LAKEPOINT
LEWISVILLE TX 76040

SHIP TO

CONTACT SANDY MOON
PHONE 972 306 6000

ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
10072	01/11/00	2681			ROMINE	01/11/00	NET 30 DAYS
ORDER QUANTITY			ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE
12			6600	SQUEAKY CLEAN	2.25	EACH	27.00
0			7000	SALT PKTS 3000CT	9.95	EACH	0.00
8			6035	DHSANI 12-OZ CAN	11.50	EACH	92.00

ALL ITEMS ARE SUBJECT TO
PRICE CHANGES WITHOUT NOTICE
FOR YOUR COMPANY'S RECORD
PLEASE RETURN FOR RECORDS ONLY

TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



SALES AMOUNT

999.20

25%
SALES TAX

15.97

TOTAL

1015.17

PAYMENT RECEIVED

X

CUSTOMER SIGNATURE



P.O. BOX 110209
CARROLLTON TEXAS 75011 0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
11	01-1-90	1117	1

SOLD TO

FLEMING FOODS
101 LAKEPOINT
LEWISVILLE TX 76044

SHIP TO

ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
100	01-1	2600	11		1 MONTH	01-21-90	NET 30 DAYS
ORDER QUANTITY			ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE
21			1000	PS PREFERRED 1 30Z	18 75	CASE	397 95
5			1050	PS PREFERRED DECAF	21 95	CASE	109 75
3			1700	CREAM 200 PKTS COMMT	29 50	CASE	89 85
0			2100	SWEET & LOW 400	7 05	EACH	0 00
0			2125	SWEET & LOW 1250	16 05	EACH	0 00
2			2300	SUGAR PACKETS 1000	10 50	CASE	21 90
4			2600	TEA BAGS 1-GAL	9 95	EACH	39 80
0			2610	TEA BAGS 1-CUP	5 05	EACH	0 00
0			3001	BNUT REG HOT CHOC	9 95	EACH	0 00
0			3005	BNUT SF HOT CHOC	7 05	EACH	0 00
2			3508	CUP 8-OZ STYRO	20 95	CASE	41 90
0			4000	K-TOWELS 30CT	30 05	EACH	0 00
4			4600	UTENSILS	21 95	CASE	37 30
0			4700	STIR STIX	1 05	EACH	0 00
8			5000	SOFT DRINK CAN	2 35	CASE	19 60
0			6000	OZARKA 16 OZ	16 05	CASE	0 00

CONTINUED ON NEXT PAGE

THE FOLLOWING INFORMATION IS FOR YOUR RECORD ONLY. IT IS NOT TO BE USED FOR ANY OTHER PURPOSE. IT IS THE POLICY OF PRO STAR TO MAINTAIN THE HIGHEST QUALITY OF SERVICE TO OUR CUSTOMERS. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS.

TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



SALES AMOUNT

SALES TAX

TOTAL

PAYMENT RECEIVED

X

CUSTOMER SIGNATURE



P.O. BOX 110209
CARROLLTON TEXAS 75011-0209
(972) 245-6005 • (972) 245 4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
51	01/21/02	351007	2

SOLD TO

FLEMMING FOODS
1915 LAKE POINT
ELLSWORTH

SHIP TO

CONTACT: SALLY MORRIS
PHONE: 972-405-3800

ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
F102	01/21/02	3681			FROM THE	01/21/02	NET 30 DAYS
ORDER QUANTITY			ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE
12			6600	SQUEAKY CLEAN	2.25	EACH	27.00
0			7000	SALT PKTS 3000CT	9.95	EACH	0.00
0			4025	NAPKINS DINNER	6.05	EACH	0.00
0			4042	MULTIFOLD TOWELS	19.05	EACH	0.00
1			4027	NAPKINS HYNAP DISP	59.95	EACH	59.95
8			6035	DASANI 12-OZ CAN	11.50	EACH	92.00

THIS IS NOT A BILLING SLIP
PLEASE FORWARD THIS INVOICE
TO YOUR ACCOUNT PAYABLE
DEPARTMENT FOR PROCESSING

SALES AMOUNT

1047.50

SALES TAX

24.45

TOTAL

1071.95

PAYMENT RECEIVED

TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



X

CUSTOMER SIGNATURE



P.O. BOX 110209
CARROLLTON TEXAS 75011 0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
	01 / 01 / 00	15	1

SOLD TO

FLUDDING FOODS
1000 LAFAYETTE
LUBBOCK TEXAS

SHIP TO

CONTACT: ADRIAN HODGE
CITY: LUBBOCK TEXAS

ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
1555	01/01/00	30001	5		1 DOMESTIC	01/03/00	NET 30 DAYS
ORDER QUANTITY			ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE
22			1000	PS PREFERRED 1 30Z	18	50CASE	414.90
6			1050	PS PREFERRED DECAF	21	50CASE	131.70
5			1700	CREAM 900 PKTS COFMT	29	50CASE	179.70
0			100	SWEET & LOW 400	7	50EACH	0.00
0			2125	SWEET & LOW 1250	16	50EACH	0.00
6			2300	SUGAR PACKETS 1000	10	50CASE	65.70
0			2500	TEA BAGS 1-GAL	9	50EACH	0.00
10			2610	TEA BAGS 1-CUP	5	50EACH	59.50
0			3001	BNUT REG HOT CHOC	9	50EACH	0.00
0			3005	BNUT SF HOT CHOC	7	50EACH	0.00
3			3508	CUP 8-OZ STYRO	20	50CASE	62.85
0			4000	1 TOWELS 30CT	30	50EACH	0.00
4			4600	UTENSILS	21	50CASE	87.80
10			4700	STIR STIX	1	50EACH	17.50
13			5000	SOFT DRINK CAN	9	50CASE	129.35
0			5000	OZARKA 16-0Z	16	50CASE	0.00

CONTINUED ON NEXT PAGE

THE FOLLOWING INFORMATION IS FOR THE
PURPOSE OF PROVIDING THE CUSTOMER WITH
A SUMMARY OF THE ORDER FOR THEIR RECORDS
ONLY. IT IS NOT INTENDED TO BE USED FOR
ANY OTHER PURPOSE.

TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



X

CUSTOMER SIGNATURE

SALES AMOUNT

SALES TAX

TOTAL

PAYMENT RECEIVED



P O BOX 110209
CARROLLTON TEXAS 75011-0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889 STAR

INVOICE

ROUTE	INVOICE DATE	INVOICE#	PAGE
FE	01/28/00	252955	2

SOLD TO

FLIMING FOODS
1945 LAKE POINT
LEWISVILLE TX 76046

SHIP TO

CONTACT: GAIL MOUNT
PHONE: 972 906 6000

ORDER #	ORDER DATE	CUST #	SALESMAN	PURCHASE ORDER	SHIP VIA	SHIP DATE	TERMS
100	01/28/00	3881	50		FROMIER	01/28/00	NET 30 DAYS
ORDER QUANTITY			ITEM NUMBER	DESCRIPTION	PRICE	UNIT	EXTENDED PRICE
12			6600	SQUEAKY CLEAN	2.25	EACH	27.00
0			7000	SALT PKTS 3000CT	9.95	EACH	0.00
10			6035	DASANI 12-OZ CAN	11.50	EACH	115.00

THE FOLLOWING IS A SUMMARY OF THE ORDER. PLEASE REVIEW THIS INVOICE FOR YOUR ACCOUNT. PAYABLE DATE MUST BE WITHIN 30 DAYS.

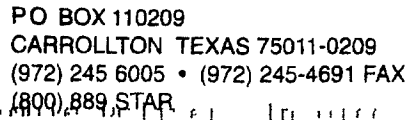
TERMS NET 30

FORWARD TO ACCOUNTING FOR PAYMENT



X _____
CUSTOMER SIGNATURE

SALES AMOUNT	1293.00
2.5% SALES TAX	26.77
TOTAL	1319.77
PAYMENT RECEIVED	



2004-05

by Moore

INVOICE



PO BOX 110209
CARROLLTON, TEXAS 75011-0209
(972) 245 6005 • (972) 245 4691 FAX
(800) 889 STAR

COFFEE SERVICE



TO: [Name] [Address] [City] [State] [Zip]
FROM: P.S. Office Supplies & Coffee Service Vending
DATE: [Date]
ITEMS: [List of items and quantities]

TERMS: Net 30 Days
Sales Rep: [Name]
Route: [Number]

Item	Description	Price	Quantity
1	1000	\$ 18.50	1
2	1000	\$ 12.50	1
3	1000	\$ 8.50	1
4	1000	\$ 16.50	1
5	1000	\$ 10.50	1
6	1000	\$ 9.50	1
7	1000	\$ 10.50	1
8	1000	\$ 11.50	1
9	1000	\$ 12.50	1
10	1000	\$ 13.50	1
11	1000	\$ 14.50	1
12	1000	\$ 15.50	1

PLEASE PRINT YOUR NAME AND ADDRESS
ON THE BOTTOM OF THE INVOICE
YOUR INVOICE AND BILL WILL BE RETURNED TO
YOUR ACCOUNT. THANK YOU

Total Sales \$ 1044.80
Sales Tax \$ 19.50
Invoice Total \$ 1064.30

Signature: [Signature]

Cash received *****
Check received *****
Amount charged *****

INVOICE



PO BOX 110209
CARROLLTON TEXAS 75011-0209
(972) 245-6005 • (972) 245-4691 FAX
(800) 889-STAR

COFFEE SERVICE



DATE: 11/20/01

TO: THE STATE OF TEXAS
1945 LEBLANC DRIVE
DALLAS, TEXAS 75201

Invoice No: 445920
Invoice Dates: 11/20/01
Phone: 214-245-6000

FROM: P.S. COFFEE SERVICE
1945 LEBLANC DRIVE
DALLAS, TEXAS 75201

Qty	Unit Price	Description	Price	Extension
12	Case 1000	15 FLEETWORTH 1000	\$ 18.75	\$ 225.00
2	Case 1000	25 FLEETWORTH 1000	\$ 11.25	\$ 22.50
1	Case 1000	1000 1000 FLEETWORTH	\$ 11.25	\$ 11.25
1	Case 1000	1000 1000 FLEETWORTH	\$ 10.00	\$ 10.00
4	Unit 6000	1000 1000 FLEETWORTH	\$ 9.95	\$ 39.80
1	Case 500	1000 1000 FLEETWORTH	\$ 20.95	\$ 20.95
1	Case 4000	1000 1000 FLEETWORTH	\$ 1.95	\$ 1.95
10	Unit 4200	1000 1000 FLEETWORTH	\$ 1.75	\$ 17.50
1	Case 5000	1000 1000 FLEETWORTH	\$ 5.95	\$ 5.95
1	Unit 6000	1000 1000 FLEETWORTH	\$ 7.25	\$ 7.25
2	Case 6000	1000 1000 FLEETWORTH	\$ 10.95	\$ 21.90

THIS IS NOT A PACKAGING SLIP.
PLEASE FORWARD TO ACCOUNTS PAYABLE
WE WILL RETURN YOUR PURCHASE

Total Sale \$ 85.00
Sales Tax \$ 13.11
Invoice Total \$ 98.11

Signature: *Sandy Moore*

Cash Received *****
Amount Charged *****
Check # 445920

INVOICE



PO BOX 110209
CARROLLTON TEXAS 75011 0209
(972) 245 6005 • (972) 245-4691 FAX
(800) 889-STAR

COFFEE SERVICE



OFFICE SUPPLIES & COFFEE SERVICE VENDING
Professionally Serving All Your Office Needs

Bill to: Mr. J. J. Hinkle
12345 Main Street
Dallas, TX 75201
Phone: 214-555-1234

Bill to: Mr. J. J. Hinkle
12345 Main Street
Dallas, TX 75201
Phone: 214-555-1234

Qty	Unit Price	Description	Price	Extension
12	\$1.00	12 PAPER FILTERS	\$12.00	\$12.00
4	\$1.00	4 PAPER FILTERS	\$4.00	\$4.00
3	\$1.20	3 PAPER FILTERS	\$3.60	\$3.60
1	\$1.25	1 PAPER FILTER	\$1.25	\$1.25
2	\$2.30	2 PAPER FILTERS	\$4.60	\$4.60
2	\$1.50	2 PAPER FILTERS	\$3.00	\$3.00
3	\$1.00	3 PAPER FILTERS	\$3.00	\$3.00
12	\$1.00	12 PAPER FILTERS	\$12.00	\$12.00
6	\$1.00	6 PAPER FILTERS	\$6.00	\$6.00

THIS IS NOT A FORMAL INVOICE.
PLEASE RETURN TO ACCOUNTS DEPARTMENT.
WE WILL BILL YOU SEPARATELY.

Total Sales \$72.40
Sales Tax \$8.15
Invoice Total \$80.55

Signature

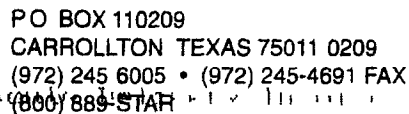
J. J. Hinkle 3/4/03

Each item is \$1.00
Amount \$1.00

Each item is \$1.00
Amount \$1.00

Each item is \$1.00
Amount \$1.00

INVOICE

[illegible][illegible][illegible]

THEY ARE NOT IN THE POSITION OF
THEY ARE NOT IN THE POSITION OF
THEY ARE NOT IN THE POSITION OF

Total Value	\$ 11,700
Less: 14	117
Inventory 7/31/55	11,583

A I I I I I I I

Jeff Winkler 2/26/03

1. The first level of need is ******* GOY**
 2. The second level of need is ******* (G)Y**

The first two are $\frac{1}{2} \times \frac{1}{2}$ and $\frac{1}{2} \times \frac{1}{2}$ and the last is $\frac{1}{2} \times \frac{1}{2}$.

[illegible]



PO BOX 110209
CARROLLTON TEXAS 75011-0209
(972) 245-6005 • (972) 245 4691 FAX
(800) 889-STAR

COFFEE SERVICE



Delivered To: 44 ELMING FORDS
60101 ELAM THORNTON RD
1045 ELMING FORDS, CANTON, MOBILE
ALABAMA 36505
Invoice No: 58895
Invoice Date: 07/18/00
Phone: 972-245-6005

Form: 1111-10-DAYS
Sales Rep: 1000-KRUMHOLTZ
Route: 1111-10-DAYS

Qty	Item	Description	Price	Extension
19	Case 1000	PS FREEBIEBIE 1.30L	\$ 12.95	\$ 246.05
4	Case 1050	PS FREEBIEBIE DEFLIN	\$ 21.95	\$ 87.80
3	Case 1200	CREAM 900 PKTS (1000)	\$ 29.95	\$ 89.85
4	Case 1300	SUGAR 1000 PKTS (1000)	\$ 10.95	\$ 43.80
3	Case 1500	COFFEE 1000 PKTS (1000)	\$ 20.95	\$ 62.85
3	Case 4000	DEFENSE 1000	\$ 21.95	\$ 65.85
8	Case 5000	SOFT DRINK CAN - 3-Exec	\$ 9.95	\$ 79.60
12	Unit 6600	SOFT DRINK CAN	\$ 2.95	\$ 35.40
2	Unit 40	HARNESS 1000	\$ 59.95	\$ 119.90
10	Unit 6035	DASH 1000 - Exec	\$ 11.95	\$ 119.50

THIS IS NOT A FACTURE
PLEASE FORWARD TO ACCOUNTS PAYABLE
WE APPRECIATE YOUR BUSINESS

Total Sale: \$ 1081.00
Sales Tax: \$ 9.11
Invoice Total: \$ 1090.11

Signature: *Smoo*

Cash Received *****
Amount Charged *****

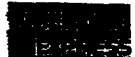
Check Received *****
Card# *****

INVOICE



PO BOX 110209
CARROLLTON, TEXAS 75011 0209
(972) 245 6005 • (972) 245 4691 FAX
(800) 889 STAR

COFFEE SERVICE



02/11/07 17:02

Route Delivery Invoiced

Page 1

Delivered To: 584 FLEMING TROOPS
DU PONT BLVD INVOICED AT SITE
1945 LAKELAND BLVD SANDY MOORE
LEWISVILLE TX 76035 Phone: 972 245-5131

PO#:
Terms: NET 30 DAYS Sales Rep: JUDIE ROTHMAN
Route No.: 55

Qty	Unit	Item ID	Description	Price	Extension
2	Case	1000	PS PREMIUM 1 LTR	\$ 18.95	\$ 37.90
2	Case	1050	PS PREMIUM DICAL	\$ 21.95	\$ 43.90
3	Case	1200	CREAM 900 FRIS COMET	\$ 39.95	\$ 119.85
4	Case	7300	BUGAL TACETTES 1000	\$ 10.95	\$ 43.80
5	Unit	2510	110 MAGS J CUP	\$ 4.05	\$ 20.25
4	Case	3500	OUT 8-OZ STYRO	\$ 20.95	\$ 83.80
10	Unit	4200	SITR SITR	\$ 11.25	\$ 112.50
9	Case	5000	SQUID DRINK CAN	\$ 9.95	\$ 89.55
12	Unit	6000	SQUID KEY CAN	\$ 2.25	\$ 27.00
10	Unit	6035	DASANI 1 LTR	\$ 11.50	\$ 115.00

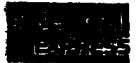
THIS IS NOT A FURNISHING SLIP
PLEASE FORWARD TO ACCOUNTS PAYABLE
WE APPRECIATE YOUR BUSINESS

Total Sale: \$ 1044.90
Sales Tax: \$ 17.92
Invoice Total: \$ 1062.82

Signature: *J. Rothman*

Cash Received \$*****00*
Amount Charged \$*****00*

Check Enclosed \$*****00* Check # 1234567
Card#



L. H. C. I. § 8 7 7 / 6 (6) 7



P O BOX 110209
CARROLLTON TEXAS 75011-0209
(972) 245 6005 • (972) 245 4691 FAX
(800) 889-STAR

COFFEE SERVICE



TO: [illegible] FROM: [illegible]

[illegible text block]

[illegible text block]

[illegible text block]

[illegible text block]

[illegible text block]

[Handwritten signature]



[illegible text block]

J BLANTON