UNITED STATES BANKRUPTCY COURT PROOF OF CLAIM FOR THE DISTRICT OF DELAWARE lin re Case Number Bar Date Ref # 2 NVM 110797 03-10945 (MFW) Inc et al Fleming Companies, 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 U354bb36432b2 from the bankruptcy court in Cookie Specialties Inc this case 482 N Milwaukee Ave Wheelins IL 60090 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 Creditor Telephone Number (84)7/537-3888 court Bankruptcy Court or BMC you do not need to file again CREDITOR TAX I D # ACCOUNT OR OTHER NUMBER BY WHICH replaces Check here CREDITOR IDENTIFIES DEBTOP a previously filed claim dated or amends 36-2743848 if this claim Fleming Co , Inc ΤX 1 BASIS FOR CLAIM Retiree benefits as defined in 11 U S C § 1114(a) Goods sold Personal injury/wrongful death Services performed Taxes Wages salaries and compensation (Fill out below) Your social security number Money loaned Other (describe briefly) Unpaid compensation for services performed from (date) (date) 3 IF COURT JUDGMENT DATE OBTAINED 2 DATE DEBT WAS INCURRED 3/3/03 & 3/20/03 4 TOTAL AMOUNT OF CLAIM \$ 7,879 20 879 20 \$ AS OF PETITION DATE (unsecured) (secured) (unsecured phority) (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 6 UNSECURED PRIORITY CLAIM Check this box if you have an unsecured priority claim Check this box if your claim is secured by collateral (including a 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 before filing of the bankruptcy petition or cessation of the Debtor's Real Estate business whichever is earlier 11 USC § 507(a)(3) Motor Vehicle Contributions to an employee benefit plan 11 USC § 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 U S C § 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 7 CREDITS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim -0-8 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 THIS SPACE FOR COURT The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) FUSEQULY so that it is received on or before 4 00 p.m. September 15 2003 Pacific Daylight Time BY MAIL TO BY HAND OR OVERNIGHT DELIVERY TO AUG 08 2003 Bankruptcy Management Corporation Bankruptcy Management Corporation PO BOX 900 1330 East Franklin Avenue **BMC** El Segundo CA 90245-0900 El Segundo CA 90245

Fleming Companies Claim

§§ 152 AND 3571

SIGN and print the name and title if any of the creditor or other person authorizes

file this claim (attach copy of power of attorney if any)

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

DATE SIGNED

8/6/03

Cookie Specialties Inc 482 N Milwaukee Ave Wheeling, Il 60090

Invoice

DATE	INVOICE NO		
03/20/03	21748		

BILL	TO		
1		 	. T

Fleming Companies Inc - TX P O Box 24750 Oklahoma City, OK 73124-4750

SHIP TO

Fleming Co Garland Division 2600 McCree Rd Garland, TX 75046-9012

Total

\$3,939 60

		PO NO	TER	MS	REP	SHIP DATE	SHIP VIA
		421326GA	2% 10 Net 30		03/20/03	American Frt	
# OF CASE	DESCRIPTION			size-ii	tem #	PRICE	AMOUNT
98	Matt's C	hocolate Chip Cookies	····	12/1 lb C/	C	20 10	1,969 80
49	Matt's O	atmeal Raisin Cookies		12/11b O/R		20 10	984 90
49	Matt's Pe	eanut Butter Cookies		12/1 lb P/B		20 10	984 90
						i	
					1		

Cookie Specialties Inc 482 N Milwaukee Ave Wheeling, Il 60090

Invoice

SHIP VIA

DATE	INVOICE NO			
03/03/03	21700			

BILL TO	
Fleming Companies Inc - TX P O Box 24750 Oklahoma City, OK 73124-4750	

PO NO

SHIP TO	
Fleming Co Garland Division 2600 McCree Rd	
Garland, TX 75046-9012	

SHIP DATE

REP

		214566GA	2% 10	Net 30		03/03/03	American Frt
# OF CASE	DESCRIPTION		sıze-ıtem #		PRICE	AMOUNT	
84	84 Matt's Chocolate Chip Cookies		12/1 lb C/C		20 10	1,688 40	
84	84 Matt's Oatmeal Raisin Cookies		12/11b O/R		20 10	1,688 40	
28	28 Matt's Peanut Butter Cookies		12/1 lb P/B		20 10	562 80	
						:	
	<u> </u>			<u> </u>	L		L

TERMS

Total

\$3,939 60



FedEx Freight East 2200 FORWARD DRIVE HARRISON AR 72501 800 874 4723

DELIVERY RECEIPT

Freight Bill Number 362785521 RO



Page 2 of 2 B/L # PO.# Ship Date Origin Dest 21748 421326-GA 03/20/03 DAL Trailer # P4528 CONSIGNEE 09070165 69560411 SHIPPER FLEMING COMPANIES INC COOKIE SPECIALTIES 2600 MCCREE RD GARLAND DIVISION 482 N MILWAUKEE TX 75041-3901 IL 60090 GARLAND WHEELING CLASS DESCRIPTION CHARGES H/U PCS HM WCT-LBS NMFC RATE APPT032503 20 00SETUP032103 09 33 PAT (972) 840-4435 Δ. 0 C رق Œ ** ANY ADDITIONAL SERVICES MAY RESULT IN ADDITIONAL CHARGES ** 196 PREPAID - WILL INVOICE SHIPPER 3065 ACCESSORIAL SERVICES PERFÖRMED WILL INVOICE RESPONSIBLE PARTY INSIDE DELIVERY . LIFTGATE III RESIDENTIAL LIMITED ACCESS _ DETENTION SORT & SECREGATE OTHERS. ASK ABOUT OUR EUROPE SERVICE! Received by Customer Requirements/Appointment Instruction ATTIVE 19215 Depart 20150 APPT 03/25/2003 FROM 00.00 TO 20 00 (972)840-4435 X-0000 PAT APPT Driver # X Dely Driver DELV WITH S/W INTACT # of Skids Delv CLEAR EXCEPTIONS □SHORT □ OVER □ DAMAGE



FedEx Freight East 2200 FORWARD DRIVE HARRISON AR 72601 800 874 4723

DELIVERY RECEIPT

Freight Bill Number 362785521 RO



Page 1 of B/L # PO # 21748 Ship Date 421326-GA Origin Dest **CONSIGNEE 09070165** 03/20/03 Trailer # P4528 BEN DAL SHIPPER 69560411 FLEMING COMPANIES INC 2600 MCCREE RD COOKIE SPECIALTIES GARLAND DIVISION 482 N MILWAUKEE GARLAND TX 75041-3901 H/U WHEELING PCS HM DESCRIPTION IL 60090 WGT-LB\$ NMFC PCF CLASS PO# 421326-GA RATE CHARGES MATTS REAL CHOC CHIP COOKIES MATTS NAT OATMEAL RAISIN 98 3065 ۵. 072040-00 49 070 COOKIES 072040-00 0 070 49 MATTS REAL PEANUTT BUTTER COOKIES Ç 072040-00 070 SKIDS 4 ča, APPOINTMENT DELIVERY ** ш ** FOOD STUFF ** 421326GA BL# SGF INSPECTING TERMINAL 002748 ORIGINAL WEIGHT **SHIPMENT REWEIGHED AS ABOVE**
004772 FUEL SURCHG LTL SHPT6 50% APPOINTMENT FROM 00 00 TO 20 00 * ANY ADDITIONAL SERVICES MAY RESULT IN ADDITIONAL CHARGES ** PREPAID - WILL INVOICE SHIPPER ACCESSORIAL SERVICES PERFORMED WILL INVOICE RESPONSIBLE PARTY -O INSIDE DELIVERY -O LIFTGATE __ RESIDENTIAL LIMITED ACCESS SORT & SEGREGATE __ DETENTION NUSCOE OTHERS ASK ABOUT OUR EUROPE SERVICE! Received by _ NIJCOC Brive 198 Customer Requirements/Appointment Instruction Date 3/25/2 Depart 21730 APPT. 03/25/2003 FROM 00 00 TO 20 00 Delv Driver Skewis (972)840-4435 X-0000 PAT Driver # X XX The DELV WITH S/W INTACT # of Skids Delv CLEAR □SHORT □ OVER □ DAMAGE