#### **UNITED STATES BANKRUPTCY COURT** PROOF OF CLAIM FOR THE DISTRICT OF DELAWARE Scheduled Claim Ref # 2-F2 23391 In re Case Number YOUR CLAIM IS SCHEDULED AS Fleming Companies, Inc 03-10945 \$2 078 64 UNSECURED 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 of aware that anyone else has 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 0354429420426 The amounts reflected above constitute your claim as Check box if you have scheduled by the Debtor If you agree with the amounts ON COURSE INFORMATION never received any notices set forth herein and have no other claim against the 6531 N SIDNEY PLACE from the bankruptcy court in Debtor you do not need to file this proof of claim MILWAUKEE WI 53209 this case EXCEPT as stated below If the amounts shown above are listed as Contingent Check box if this address Unliquidated or Disputed a proof of claim must be differs from the address on the filed envelope sent to you by the If you have already filed a proof of claim with the Creditor Telephone Number (414) 35ス - 970 C Bankruptcy Court or BMC you do not need to file again ACCOUNT OR OTHER NUMBER BY WHICH replaces CREDITOP IDENTIFIES DEBTOR Check here a previously filed claim dated \_ 39-1243603 or if this claim amends 1 BASIS FOR CLAIM Goods sold Personal injury/wrongful death Retiree benefits as defined in 11 U S C § 1114(a) X Services performed Taxes Wages salaries and compensation (Fill out below) Money loaned Your social security number Other (describe briefly) Unpaid compensation for services performed from (date) 2 DATE DEBT WAS INCURRED 3 IF COURT JUDGMENT, DATE OBTAINED 2003 4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE 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 U S C $\,$ § 507(a)(6) Value of collateral Alimony maintenance or support owed to a spouse former spouse or 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 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) THIS SPACE FOR COURT so that it is received on or before 4 00 p m , September 15, 2003, Pacific Daylight Time BY HAND OR OVERNIGHT DELIVERY TO **Bankruptcy Management Corporation Bankruptcy Management Corporation 4UG 12 2003** PO BOX 900 1330 East Franklin Avenue El Segundo CA 90245-0900 El Segundo, CA 90245 $\mathsf{BMC}$ DATE SIGNED SIGN and print the name and title if any of the creditor or other person authorized to

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

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

Fleming Companies Claim



#### ONCOURSE INFORMATION SERVICES, INC

6531 NORTH SIDNEY PLACE MILWAUKEE, WI 53209-3215 (414) 352-9700 INVOICE NUMBER 0069140-IN
INVOICE DATE 03/10/2003
ORDER NUMBER 0057976
SHIP DATE 3/3/03
SALESPERSON B SEWART

**CUSTOMER NO** 09-F071900

**SOLD TO** 

SHIP TO

FLEMING COMPANY

ATTN MARY LEVERENCE 1200 WEST SUNSET DRIVE WAUKESHA, WI 53186-8512

CUSTOMER P O MARY LEVERENCE		SHIP VIA UPS GROUND	<b>TERMS</b> Net 30 Days		
QTY	ITEM NUMBER	DESCRIPTION	PRICE	UNIT	TOTAL
		WEEKLY FORM OVERLAY FOR A/R			
		FOR DATES OF 03/03 TO 03/07/03			
1	1 00 /DOWNLOAD	WEEKLY DOWNLOAD	475 0000	WEEK	475 00
1	1 00 /CD	WEEKLY CD	15 0000	EACH	15 00
1	1 00 /UPS	UPS CHARGES TO SEND CD-03/03	4 4500	EACH	4 45

OCISI NOW ACCEPTS VISA/MASTERCARD PAYMENTS

 NET INVOICE
 494 45

 LESS DISCOUNT
 0 00

 FREIGHT
 0 00

 SALES TAX
 25 21

 INVOICE TOTAL
 519 66



### ONCOURSE INFORMATION SERVICES, INC

6531 NORTH SIDNEY PLACE MILWAUKEE, WI 53209-3215 (414) 352-9700 INVOICE NUMBER 0069219-IN
INVOICE DATE 03/18/2003
ORDER NUMBER 0058014
SHIP DATE 3/10/03
SALESPERSON B SEWART

**CUSTOMER NO** 09-F071900

SOLD TO

SHIP TO

FLEMING COMPANY

ATTN MARY LEVERENCE 1200 WEST SUNSET DRIVE WAUKESHA, WI 53186-8512

CUSTOMER P O MARY LEVERENCE		SHIP VIA UPS GROUND	<b>TERMS</b> Net 30 Days		
QTY I	TEM NUMBER	DESCRIPTION	PRICE	UNIT	TOTAL
		WEEKLY FORM OVERLAY FOR A/R			
		FOR DATES OF 3/10 TO 3/14/03			
1 00 /I	DOWNLOAD	WEEKLY DOWNLOAD	475 0000	WEEK	475 00
1 00 /0	CD	WEEKLY CD	15 0000	EACH	15 00
1 00 /1	JPS	UPS CHARGES TO SEND CD-3/10	4 4500	EACH	4 45

OCISI NOW ACCEPTS VISA/MASTERCARD PAYMENTS

 NET INVOICE
 494 45

 LESS DISCOUNT
 0 00

 FREIGHT
 0 00

 SALES TAX
 25 21

 INVOICE TOTAL
 519 66



#### **ONCOURSE INFORMATION SERVICES, INC**

6531 NORTH SIDNEY PLACE MILWAUKEE, WI 53209-3215 (414) 352-9700 INVOICE NUMBER 0069220-IN
INVOICE DATE 03/18/2003
ORDER NUMBER 0058212
SHIP DATE 3/17/03
SALESPERSON B SEWART

**CUSTOMER NO** 09-F071900

SOLD TO SHIP TO

FLEMING COMPANY

ATTN MARY LEVERENCE 1200 WEST SUNSET DRIVE WAUKESHA, WI 53186-8512

CUSTOMER P O MARY LEVERENCE		SHIP VIA UPS GROUND	TERMS Net 30 Days		
QTY	ITEM NUMBER	DESCRIPTION	PRICE	UNIT	TOTAL
		WEEKLY FORM OVERLAY FOR A/R			
		FOR DATES OF 3/17 TO 3/21/03			
1 00	0 /DOWNLOAD	WEEKLY DOWNLOAD	475 0000	WEEK	475 00
1 00	0 /CD	WEEKLY CD	15 0000	EACH	15 00
1 00	O /UPS	UPS CHARGES TO SEND CD-3/17	4 4500	EACH	4 45

OCISI NOW ACCEPTS VISA/MASTERCARD PAYMENTS

 NET INVOICE
 494 45

 LESS DISCOUNT
 0 00

 FREIGHT
 0 00

 SALES TAX
 25 21

 INVOICE TOTAL
 519 66

**ONCOURSE INFORMATION SERVICES, INC** 

6531 NORTH SIDNEY PLACE MILWAUKEE, WI 53209-3215 (414) 352-9700 INVOICE NUMBER 0069383-IN
INVOICE DATE 03/28/2003
ORDER NUMBER 0058246
SHIP DATE 3/24/03
SALESPERSON B SEWART

**CUSTOMER NO** 09-F071900

SHIP TO

SOLD TO

FLEMING COMPANY

ATTN MARY LEVERENCE 1200 WEST SUNSET DRIVE WAUKESHA, WI 53186-8512

CUSTOMER P O MARY LEVERENCE		SHIP VIA UPS GROUND	TERMS Net 30 Days		
QTY	ITEM NUMBER	DESCRIPTION	PRICE	UNIT	TOTAL
		WEEKLY FORM OVERLAY FOR A/R			
		FOR DATES OF 03/24 TO 03/28/03			
1	00 /DOWNLOAD	WEEKLY DOWNLOAD	475 0000	WEEK	475 00
1	00 /CD	WEEKLY CD	15 0000	EACH	15 00
1	00 /UPS	UPS CHARGES TO SEND CD-3/24	4 4500	EACH	4 45

OCISI NOW ACCEPTS VISA/MASTERCARD PAYMENTS

 NET INVOICE
 494 45

 LESS DISCOUNT
 0 00

 FREIGHT
 0 00

 SALES TAX
 25 21

 INVOICE TOTAL
 519 66