UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

PROOF OF CLAIM

s122385

Scheduled Claim Ref # 1-F2 16866

YOUR CLAIM IS SCHEDULED AS

$369 71 UNSECURED

In re	Case Number
Core-Mark International, Inc	**03-10944**

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

☐ 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

Name of Creditor and Address

0354429428931

SANDMAN HOTELS
310 1755 W BROADWAY
VANCOUVER BC V6J 4S5

Creditor Telephone Number 604 730-6603

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 TAX I D #	ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR	Check here if this claim ☐ replaces or ☐ amends a previously filed claim dated
R121767065 CANADIAN	CORMAR	

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)

PW 3/13/03

Your social security number

Unpaid compensation for services performed from 3/1/02 (date) to 3/31/03 (date)

2 DATE DEBT WAS INCURRED 3/1/02 - 3/31/03

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

$ 350.13 (unsecured)	$ (secured)	$ (unsecured priority)	$ 350 13 (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 14 2003

BMC

Fleming Companies Claim

03972

DATE SIGNED	**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)
8/11/03	PAUL NIKITIW CREDIT MANAGER

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

Sandman
HOTELS and INNS

STATEMENT OF ACCOUNT

Statement Date	Account No
08/11/03	CORMAR

'So Many Reasons To Stay"

310 - 1755 West Broadway
Vancouver BC V6J 4S5 Canada
Telephone (604)730-6600 Fax (604)730-4645

Bill To

Core-Mark International
8225 30th Street SE
Calgary AB T2C 1H7
Canada

Check No _____
Date Paid _____
Amount _____

Phone 403-279-5581 Fax 403-279-1963

Transaction Date	Invoice Number	Description	Amount	Balance
03/19/02	_RECEIPT	Payment Ref 421784	-193 08	-193 08
03/03/03	012 0003436	GRAY CHRIS	104 00	104 00
03/10/03	012 0003490	CHRIS GRAY	104 97	104 97
03/17/03	012 0003604	CHAPMAN CHRISTIN	115 57	115 57
03/24/03	012 0003666	GRAY CHRIS	107 82	107 82
03/31/03	012 0003747	PO GARY CHRIS	110 85	110 85

Below 31	Over 30	Over 60	Over 90	Over 120	Total
0 00	0 00	0 00	334 24	15 89	350 13

The 1st 3 digits of each invoice refer to the following hotels

002 Blue River	012 Cranbrook	023 Kelowna	036 Lethbridge	046 Saskatoon
003 Cache Creek	013 Williams Lake	024 Revelstoke	040 Langley	047 Red Deer
004 Kamloops	014 Vancouver	025 Edmonton	042 Grande Prairie	048 Guildford
005 Princeton	020 Vernon	026 Calgary	043 Richmond	049 Calgary Airport
006 Prince George	021 McBride	027 Castlegar	044 Quesnel	050 Regina
007 Smithers	022 Terrace	028 Penticton	045 Victoria	051 Montreal

Please detach and return with payment

Core-Mark International
8225 30th Street SE
Calgary AB T2C 1H7
Canada

Amount Enclosed

Remit To

SANDMAN HOTELS AND INNS
310 1755 West Broadway
Vancouver BC V6J 4S5 Canada

Statement Date	Account No	
08/11/03	CORMAR	
Invoice No	Balance	X
_RECEIPT	-193 08	
012 0003436	104 00	
012 0003490	104 97	
012 0003604	115 57	
012 0003666	107 82	
012 0003747	110 85	