

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

PROOF OF CLAIM



454843

Bar Date Ref # 1-NC-10459

In re

Case Number

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

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

Name of Creditor and Address

0354653454843

Alhambra Corner Store
Don / Donna
Hwy 11 Gen Del
Alhambra Corner AB TOM 0C0
Canada

Creditor Telephone Number ()

CREDITOR TAX ID #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

170068

Check here if this claim

replaces or amends

a previously filed claim dated

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)

Your social security number

Unpaid compensation for services performed from _____ to _____

(date) (date)

CREDIT FOR CONFECTIONARY GOODS NOT RECEIVED

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

\$ 171.55 (unsecured)

(secured)

(unsecured priority)

\$ 171.55 (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

AUG 14 2003

BMC

DATE SIGNED

AUG 11/03

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)

Donna PRESIDENT ALHAMBRA CORNER STORE 877117

Fleming Companies (claim)



03978

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

ORIGINAL

INVOICE NO 172 - 1404074

TYPE V

DATE 2003-05-20

PAGE 1

CREDIT

REF-0177390DK

GST # R101151835



BILL TO 877717 ALBERTA LTD. G-N DELIVERY ALHAMBRA, AB TOM OGD DBA: 877717 ALBERTA LTD

REMIT TO: 8225 30TH STR-ET S.E. CALGARY AB T2C 1H7 403 279-5581

ALHAMBRA CORNER STORE HWY 11 GEN DEL ALHAMBRA CORNER AB TOM OGD TAX ID R 870939329

TRK	STOP	PO NUMBER	SALESPERSON	PRF #	CUST PHONE NO	DUNS NO	TERMS
	2047		457 CURTIS EMES		403 729-3003	24957-2231	NET 1 DAYS "P.A.D."

ITEM	UPC	QUANTITY	DESCRIPTION	PACKING	SUGG RETAIL	KEY	GP %	RETAIL EXTENSION	UNIT COST	COST EXTENSION	TAX
1-PP		1	CONFECTIONARY ***	300 CT	.82 0		34.8	246.00-	160.33	160.33-	7
96-EA			EFFEM SINGLES PPK	1							2
96-EA			>MARS	1							3
36-EA			>SNICKERS	1							4
36-EA			>TWIX	1							5
36-EA			>SKITTLES FRUIT	1							6
36-EA			>STARBURST DRIG	1							6
1-			** COMMODITY TOTAL				34.8	246.00-		160.33-	7
			GST TAXABLE		160.33-					11.22-	8
			AT 7.00000% ON								9

CARTONS	OIG TAX	NO OF LABELS	TAXABLE 160.33-	NON TAXABLE	GROCERIES	NON GROCERY 160.33-	ALLOWANCES	INVOICE TOTAL	171.55-
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SPECIAL INSTRUCTIONS	TOTAL RETAIL 246.00-	GROSS PROFIT 85.67-	NOTE GROSS PROFIT CALCULATION DOES NOT INCLUDE SUPPLIES	LESS APPLICABLE DISCOUNT .00
	TOTAL IN	TOTALS OUT	* K E Y N - NEW ITEM A - PRICE INCREASE D = PRICE DECREASE	PLUS TOTAL CHARGES .00

PLEASE PAY THIS AMOUNT 171.55CR

ACCEPTANCE OF THE ABOVE LISTED MERCHANDISE CONSTITUTES AN AGREEMENT TO PAY WITHIN TERMS FAILURE TO PAY ON TIME WILL RESULT IN A SERVICE CHARGE OF 24% PER ANNUM CALCULATED AND COMPOUNDED MONTHLY NOT IN ADVANCE (2%) PER MONTH FROM THE DATE SUCH AMOUNT IS DUE ON ALL PAST DUE AMOUNTS PLUS ALL COSTS INCURRED IN THE COLLECTION OF ANY OVERDUE ACCOUNTS INCLUDING LEGAL COSTS ON A SOLICITOR TO HIS OWN CLIENT'S BASIS AND ALL REASONABLE DISBURSEMENTS INCURRED IN CONNECTION THEREWITH

LOCATION: 8225 30TH STREET S.E. CALGARY, AB T2C 1H7

CUSTOMER AUTHORIZED SIGNATURE

ORDERS MUST BE REPORTED WITHIN 24 HOURS NOT RESPONSIBLE THEREAFTER

PAYMENT MUST BE RECEIVED BY

2003-05-21