

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

PROOF OF CLAIM



629777

Bar Date Ref # 2-NVM-96419

In re Fleming Companies, Inc et al Case Number 03-10945 MFW

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

Nick Training Consulting
Ste 219
250 Prairie Ctr Dr
Eden Prairie MN 55344

0354653629777

Creditor Telephone Number () 952-942-6235

CREDITOR TAX ID #

475-52-4901

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR
95784

Check here 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 475-52-4901

Unpaid compensation for services performed from _____ to _____ (date) (date)

2 DATE DEBT WAS INCURRED March 2003

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

\$ 95,045 (unsecured) \$ _____ (secured) \$ _____ (unsecured priority) \$ 5045 (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

August 11 2003

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)

Wayne S. Nick Douglas E. Nick

FILED FOR COURT ONLY

AUG 14 2003

BMC

Fleming Companies Claim



04329

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

Nick Training & Consulting

250 Prairie Center Drive

Suite 219

Eden Prairie, MN 55344

952.942-6235 Office/ 952.983.0360 FAX

INVOICE

03-119R

TO Mr Gary Overturf
Manager of Store Operations Services
Rainbow Foods
8000 Excelsior Boulevard
Hopkins, MN
55343-2094

Invoice Date March 20, 2003

For Facilitation of the Food Manager Certification workshop conducted on
March 21, 2003 31 associates at @ \$125

Amount Due \$3,875

Terms Net 14 days

Payable to Nick Training & Consulting
250 Prairie Center Drive, Suite 219
Eden Prairie, MN 55344
952 942 6235- office
952 983 0360- fax

Vendor # 95784

Thank you for your business!

Nick Training & Consulting

250 Prairie Center Drive

Suite 219

Eden Prairie, MN 55344

952.942-6235 Office/ 952.983.0360 FAX

INVOICE

03-120R

TO Mr Gary Overturf
Manager of Store Operations Services
Rainbow Foods
8000 Excelsior Boulevard
Hopkins, MN
55343-2094

Invoice Date March 28, 2003

For Facilitation of the Food Manager Recertification workshop conducted
on March 26th, 2003 18 associates at @ \$65

Amount Due \$1,170

Terms Net 14 days

Payable to Nick Training & Consulting
250 Prairie Center Drive, Suite 219
Eden Prairie, MN 55344
952 942 6235- office
952 983 0360- fax

Vendor # 95784

Thank you for your business!