

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

PROOF OF CLAIM



668589

Bar Date Ref # 1-NV 53676

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

0354653668589

Magtar Sales Inc
67 Westmore Dr
#5
Rexdale ON M9V 3Y6
Canada

Creditor Telephone Number ()

CREDITOR TAX ID #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

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)

2 DATE DEBT WAS INCURRED

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

\$ 352 84 \$
(unsecured)

(secured)

\$ _____ \$
(unsecured priority)

\$ 352 84 \$
(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 15 2003

BMC

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)

August 11, 2003

Karen Legge

Karen Legge

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

MAGTAR SALES INC.

SHIPPING/MAILING ADDRESS / ADRESSE D EXPEDITION/POSTALE

67 WESTMORE DR , UNIT # 5
 REXDALE (ONTARIO) M9V 3Y6
 TEL (416) 740-8660 FAX (416) 740-6966

REORDERS/INQUIRIES
 COMMANDES/RENSEIGNEMENTS
 TOLL FREE/SANS FRAIS
1-800-387-7446

INVOICE NUMBER /
 N° DE LA FACTURE 0097400

SOLD TO /VENDU A

CORE-MARK INTERNATIONAL, INC.
 7800 RIVERFRONT GATE

BURNABY, B.C.
 ACCOUNTS PAYABLE V5J 5L3

SHIPPED TO /EXPEDIE A

COREMARK INTERNATIONAL D.C. COREMAR 0001
 2924 JACKLIN ROAD

VICTORIA, B.C.
 V9B 3Y5

TERMS /
 CONDITIONS NET 30 -2% -10 DAYS

FOR YOUR DEPT #/
 A L ATTENTION DU SERVICE N°

INVOICE DATE/ DATE DE LA FACTURE	VENDOR #/ VENDEUR N°	SALESMAN/REPRÉSENTANT	ZONE	P O #/ BON DE COMMANDE N	SHIPPED VIA/EXPÉDIÉ PAR	SHIPPED FROM/EXPÉDIÉ DE	
Mar/20/2003	53676	01	92V	30-0746941	PUROLATOR	TORONTO	
PRODUCT NO D'ARTICLE	DESCRIPTION			QUANTITY/ QUANTITE	UNIT MEASURE/ UNITÉ DE MESURE	PRICE PER / PRIX PAR	AMOUNT/MONTANT
CLR	539254 CLR CLEANER			4	DOZ	82.44	329.76
TOTAL WEIGHT OF SHIPMENT/ POIDS TOTAL DE L'ENVOI			107	SUB-TOTAL/SOMME PARTIELLE		→	329.76
				GST #R103456171	GST/TPS	→	
				INVOICE TOTAL/FACTURE TOTALE	6.5.T.	→	23.08
						→	352.84

MAGTAR OFFICE COPY/
 EXEMPLAIRE DU BUREAU MAGTAR

FOR PROPER CREDIT, PLEASE RETURN REMITTANCE COPY (PINK) WITH PAYMENT /
 POUR UN CREDIT ADEQUAT, VEUILLEZ RENVOYER LE BORDEREAU DE PAIEMENT (ROSE) AVEC LE PAIEMENT



CORE-MARK INTERNATIONAL, INC.

PURCHASE ORDER

C B A 1 1 1 0 1 7 4 0 2 0 0 0

REGISTER #		SHIP TO		VENDOR		ORDER DATE	416-740-8660	PAGE 1 OF 1	
VICTORIA		030MAGTAR SALES INC		67 WESTMORE DRIVE		ARRIVAL DATE	2003-04-02 Wednesday	PURCHASE ORDER # 30-0746941	
2924 JACKLIN ROAD		REXDALE ON M9V 3Y6		CUSTOMER SERVICE-V CIMMINO		PAYMENT TERMS		THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL INVOICES	
VICTORIA		53676		00		DISCOUNT BRACKET	2 000 % 10 Days	BILL OF LADING, SHIPPING CONTAINERS AND PACKING LIST	
BC V9B 3Y5		VENDOR #		BUYER #		FOR		STANDING ORDER #	
CAN		53676		302				WEIGHT	CU VOL
CS RCVD	PURCHASED BY							99	CASES 4

QUANTITY ORDERED	PURCH UNIT	UPO CODE	ITEM NUMBER	ITEM DESCRIPTION	PACKING DESCRIPTION	CASE PACK	SELL UNITS ORDERED	OFF INVOICE ALLOWANCE	OTHER ALLOWANCES	UNIT COST	EXTENDED COST	\$/E	WHS LOCATION
4	CS	78291 31082	539254	CLR CALCIUM LIME RUST REMOVER		12	48			6 87	329 76		11-070503
				***** ##ORDER SENT VIA FAX##									
4							48	00	00		329 76		

INSTRUCTIONS: SEND ORIGINAL INVOICE AND BILL OF LADING TO THE ABOVE DISTRIBUTION CENTER

NOTICE: SUBSTITUTIONS EITHER IN PACKING OR PRICE WILL NOT BE ACCEPTED WITHOUT PRIOR AUTHORITY FROM ISSUING DISTRIBUTION CENTER. WE RESERVE THE RIGHT TO RETURN ANY OR ALL MERCHANDISE SUBSTITUTED WITHOUT PRIOR AUTHORITY TO REFUSE ANY OR ALL MERCHANDISE SHIPPED LATER THAN 90 DAYS FROM DATE OF ORDER, AND TO DEDUCT FROM PAYMENT ANY EXPENSE OR LOSS INCURRED THROUGH ERROR ON THE PART OF THE SHIPPER.

L1011 CORE-MARK INTERNATIONAL, INC.

