

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

**PROOF OF CLAIM**



666424

Bar Date Ref # 1-NV-30465

In re **INVOICE # 1382**

Case Number **03-10945**

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.

**Name of Creditor and Address**

United Forklift  
PO Box 25711  
Anaheim CA 92325

0354653666424

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.

Creditor Telephone Number ( )

CREDITOR TAX ID #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

Check here  replaces or  amends a previously filed claim dated \_\_\_\_\_

**1 BASIS FOR CLAIM**

Goods sold  Personal injury/wrongful death  Retiree benefits as defined in 11 U.S.C. § 1114(a)

Services performed  Taxes  Wages, salaries, and compensation (Fill out below)

Money loaned  Other (describe briefly)

Your social security number **570-15-2794**

Unpaid compensation for services performed from **2-25-03 - CURRENT** (date) (date)

**2 DATE DEBT WAS INCURRED**

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE**

\$ \_\_\_\_\_ (unsecured) \$ \_\_\_\_\_ (secured) \$ **586.56** (unsecured priority) \$ \_\_\_\_\_ (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.

THIS SPACE FOR COURT  
**FILED**

AUG 20 2003

**BMC**

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  
**8-17-03**

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)

*[Signature]* JOHN W. ELLIS

Filing Companies Claim



05397

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**

CORE-MARK INTERRELATED INC

Check No 905004329

50 937

213

395 Oyster Point Blvd  
Suite 415  
So. San Francisco, CA

JPMORGAN CHASE BANK  
6040 TARBELL ROAD

SYRACUSE, NY 13206

CORE-MARK

RETURN TO FED UTICA  
FOR REASON INDICATED BELOW

**DO NOT  
REDEPOSIT**

60 Days From Date

REFER TO MAKER

APR 04 2003

AMOUNT \$  
30465

\*\*\*\*\*586.56

UNITED STATES DEPT OF TREASURY  
JPMORGAN CHASE BANK  
P.O. BOX 25711  
ANAHEIM, CA 92825



TREASURER

322271627

15004329 21309379 910809668

0000058656

R5 v6



04-07-03

Notice of Returned Deposited Check

We want to let you know that a check deposited in, or cashed against, your account was returned unpaid. The check amount, along with a Returned Deposited Item Fee, was withdrawn from your account on the date listed above. If you have any questions, please call us at 1-800-374-4646.

Account Number:  
394-300536-9

Reason for return: REFER TO MAKER

Amount:	586.56
Fee :	5.00
Total :	591.56

UNITED FORKLIFT  
JOHN W ELLIS  
2412 E CLIFPARK WAY  
ANAHEIM CA 92806-4913

FD030001 00112



# UNITED FORKLIFT

P O Box 25711  
 Anaheim 92825-5711  
 714-931-8106

# Invoice

Number 1382

Date February 25 2003

65

### Billing Title

A. M. I.  
 311 Reed Circle  
 Corona, CA 92879-1349  
 United States Of America  
 ATTN Accounts Payable

### Shipping Title

A. M. I.  
 311 Reed Circle  
 Corona, CA. 92879-1349  
 United States Of America  
 ATTN Accounts Payable

PO Number	Terms	Sales Rep	Sales Territory	Ship Via	Code
Everett	Net/30 Days	John Ellis	Corona	#0578	2009

Product ID	Description	Quantity	Price	Tax 1	Tax 2	Amount
78708-2	24 Volt Horn Assm	1 00	21 50	✓		21 50
93613	Oil Seal	1 00	4 65	✓		4 65
90730	Oil Seal	1 00	4 89	✓		4 89
100462-35	Load Wheel	6 00	19 50	✓		117 00
65081-21	Bearing	8 00	4 75	✓		38 00
100463	Spacer	4 00	0 75	✓		3 00
13 x 4 x 8	Solidthane Splined Drive Tire	1 00	142 50	✓		142 50
E-5507	Axle Kit Assembly w/ Adapter	1 00	212 83	✓		212 83

~~PAID~~  
 3/31/03  
 CHK# 905004329

1-650-  
 589-9445

Sub-Total	\$544 37
State Tax 7 75% on 544 37	42 19
City Tax 0 00% on 0 00	0 00
Total	\$586 56

0 - 30 days	31 - 60 days	61 - 90 days	> 90 days	Total
\$1 464 18	\$0 00	\$0 00	\$0 00	\$1 464 18

