

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

**PROOF OF CLAIM**



669321

Bar Date Ref # 1-NV-57136

In re **Core-Mark International, Inc  
Fleming Convenience**

Case Number  
**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.

**Name of Creditor and Address**

Graphic Systems Inc  
2632 26th Ave S  
Minneapolis MN 55406

0354653669321

- 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 (612) **721-6100**

CREDITOR TAX ID #  
**41-0973757**

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR  
**#1897**

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 \_\_\_\_\_  
Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_  
(date) (date)

**2 DATE DEBT WAS INCURRED** 2/11/03 thru 3/25/03

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ 357.29 (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (unsecured priority) \$ 357.29 (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 21 2003**

**BMC**

DATE SIGNED  
**08/18/03**

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).

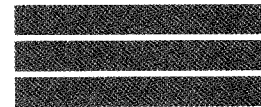
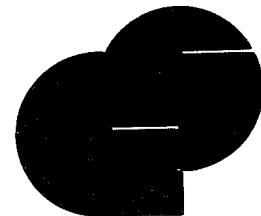
*Gregory Schwab*  
**Gregory Schwab, Controller**

Fleming Companies Claim  
  
05673

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**

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F A X 6 1 2 / 7 2 1 / 0 3 0 0  
8 0 0 / 2 3 5 / 0 3 8 7



**Graphic  
Systems**  
INC

August 18, 2003

Clerk  
Bankruptcy Management Corp  
P O Box 900  
ElSequendo, Ca 90245-0900

Dear Clerk,

Graphic Systems, Inc. is submitting an unsecured claim in the amount of \$357 29

Detailed Listing

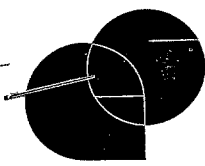
- 1) NSF check #90408335 dated 3/24/03 in the amount of \$10 83 for invoice A170467 (see attached)
- 2) Invoice A169910 dated 2/11/03 in the amount of \$98 51 (see attached)
- 3) Invoice A170342 dated 3/25/03 in the amount of \$247.95 (see attached)

If you have any questions, please contact me at (612) 721-6100 ext 35

Sincerely,

Gregory Schwab,  
Controller

Encl



# Graphic Systems, Inc

2632 26th Avenue South  
Minneapolis, MN 55406  
(612) 721-6100 / FAX (612) 721-0300  
Toll Free (800) 235-0387

www.graphicsystems.com



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- PLANTING CONVENIENCE  
ATTN: ACCOUNT PAYABLE,  
15 OYSTER POLINI BOULEVARD  
SUITE 410  
SU SAN FRANCISCO, CALIFORNIA  
CITY 94107-3045

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SEE SHIP INSTRUCTIONS

CUST JOB NO

JOB DESC FROM STOCK

ORDERED BY

DATE	DESCRIPTION	QUANTITY	UNIT PRICE	SHIP DATE	DUPLICATE DATE
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05/02/03	18 15, BOOTH GRAPHICS	118	1.10	15 DAYS	FILE 3PART
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10/10/03

DATE	DESCRIPTION	QUANTITY	UNIT PRICE	SHIP DATE	DUPLICATE DATE
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01/02	FROM STOCK			00	00	00
BUY	FILES			00	12.00	10.00

THANK YOU FOR YOUR BUSINESS!

SUB TOTAL	DISCOUNT	TAX	DELIVERY	PAYMENTS	AMOUNT DUE
17.00			0.00		17.00

AMOUNTS PAST DUE ARE SUBJECT TO A FINANCE CHARGE OF 1 1/2% PER MONTH, ANNUAL PERCENTAGE RATE OF 18%

NOTICE SEE REVERSE SIDE FOR ADDITIONAL TERMS AND CONDITIONS OF SALE

DESCRIPTION OF ORIGINALS RECEIVED }

CALL WHEN READY  
NEGS (SHIP OR FILE)

S E L L I N G	
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CORE-MARK INTERNATIONAL INC

Check No 904083335



Oyster Point Blvd  
San Jose, CA 94080

MORGAN CHASE BANK  
36040 TARBELL ROAD  
SYRACUSE, NY 13206

VOID 60 Days From Date

AMOUNT \$ 57136

\$\*\*\*\*\*1083

Pay to the  
Order of

GRAPHIC SYSTEMS INC  
2632 26TH AVE SOUTH  
MINNEAPOLIS, MN 55406

TREASURER

091014267

⑈904083335⑈ ⑆ ⑆309379⑆ ⑆ ⑆8009668⑈

⑈0000001083⑈

Check # 904083335

CORE-MARK INTERNATIONAL INC

ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW

IF NOT CORRECT PLEASE NOTIFY L

INVOICE DATE CCYY MM DD	INVOICE NO	GROSS AMOUNT	DISCOUNT	NET AMOUNT
2003 03 07	A 170467	10 83	00	10 83
	*** Total ***	10 83	00	10 83

GRAPHIC SYSTEMS INC  
2632 26TH AVE S

Date 4/30/03  
Primary Account

Page 3  
3204591



Business Checking 320459 (Continued)

WITHDRAWALS AND DEBITS

Date	Description	Amount
4/02	ACCOUNT NUMBER 502003701 TRANSFER TO LOAN	11 108 23
4/03	ACCOUNT NUMBER 502003701 Chargeback	10 83
4/03	TRANSFER TO LOAN	6 595 11
4/03	ACCOUNT NUMBER 502003701 Chargeback Fee	4 00
4/03	AnchorLink chrg ACH items (General C)	1 40
4/03	AnchorLink chrg ACH batch (General C)	7 00
4/04	MN REV PAYMN DEPT REVENUE CCD 99993060264	815 92

Business Checking 3204591 (Continued)

WITHDRAWALS AND DEBITS

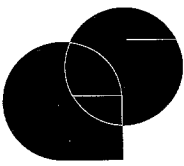
Date	Description	Amount
4/04	TXP* 7738077*004*030403*T*000 0081592*060264\ MN REV PAYMN DEPT REVENUE CCD 99993060847	2,061 00
4/04	TXP* 7738077*002*030331*T*000 0206100*060847\ MN REV PAYMN DEPT REVENUE CCD 99993053467	2,220 00
4/04	TXP* 7738077*010*030430*T*000 0222000*053467\ USATAXPYMTEFTPS CHICAGO CCD	2,546 49
4/04	USATAXPYMTEFTPS CHICAGO CCD 120309410847663	4 709 39
4/04	USATAXPYMTEFTPS CHICAGO CCD 120309410838990	9,010 49
4/04	MN UI PAY MN UI FUND CCD 0500868000	
4/04	TXP*0500868000*888*030331*T*000 00901049*061444\ USATAXPYMTEFTPS CHICAGO CCD	10,200 00
4/04	120309410724169 TRANSFER TO LOAN	86,068 74
4/07	ACCOUNT NUMBER 502003701 TRANSFER TO LOAN	21,167 72
4/08	ACCOUNT NUMBER 502003701 TRANSFER TO LOAN	29,848 06
4/09	ACCOUNT NUMBER 502003701 TRANSFER TO LOAN	1,323 72
4/10	ACCOUNT NUMBER 502003701 TRANSFER TO LOAN	6 693 24
4/10	AnchorLink	2 38
4/10	chrg ACH items (General C)	14 00
4/11	AnchorLink chrg ACH batch (General C)	
4/11	MN REV PAYMN DEPT REVENUE CCD 99993101613	812 44

Business Checking 3204591 (Continued)

WITHDRAWALS AND DEBITS

Date	Description	Amount
4/11	TXP* 7738077*004*030410*T*000 0081244*101613\ USATAXPYMTEFTPS CHICAGO CCD	4,743 31
4/11	120310111626580 TRANSFER TO LOAN	26 957 55

(SEE OVER)



# Graphic Systems, Inc

2632 26th Avenue South  
Minneapolis, MN 55406  
(612) 721-6100 / FAX (612) 721-0300  
Toll Free (800) 235-0387

www.graphicsystems.com

INVOICE # ==>	A 169910
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FLEMING CONVENIENCE  
ATTN ACCOUNTS PAYABLE  
395 OYSTER POINT BOULEVARD  
SUITE 415  
SO SAN FRANCISCO ,CA94080  
650-589 9445

REPRINT  
FLEMING CONVENIENCE  
ATTN CHRIS BOUGHTON  
CORONA DIVISION  
353 MEYER CR  
CORONA, CA 91720

CUST JOB NO

JOB DESC

ORDERED BY

DATE & TIME IN	CUSTOMER P.O. #	SR	QW	TERMS	SHIPPED VIA	INV DATE
01/31/03 09:36	FLEXMARK BLUE	16	35	NET 15 DAYS	F/E SPARTY	02/11/03

PRODUCT	DESCRIPTION	ADD'L	#	ORTG	1ST PPN	EA	ADDL EXTENSION
CCREAT	SET UP FOR RHO	1	1		00	25 00	25 00
RMJSC	80 X 10 FLEX MARK	1	1		.00	62 50	62.50
STUBE	SHIPPING TUBE	1	1		00	3 50	3 50

THANK YOU FOR YOUR BUSINESS!

SUB TOTAL	DISCOUNT	TAX	DELIVERY	PAYMENTS	AMOUNT DUE
91 00	00	7 51	00	00	98 51

AMOUNTS PAST DUE ARE SUBJECT TO A FINANCE CHARGE OF 1 1/2% PER MONTH, ANNUAL PERCENTAGE RATE OF 18%

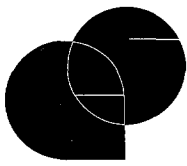
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NEGS (SHIP OR FILE)





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2632 26th Avenue South  
Minneapolis, MN 55406  
(612) 721-6100 / FAX (612) 721-0300  
Toll Free (800) 235-0387

www.graphicssystem.com

INVOICE # ==> A 170342

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FLEMING CONVENIENCE  
ATTN: ACCOUNTS PAYABLE  
305 OYSTER POINT BOULEVARD  
SUITE 415  
SO SAN FRANCISCO ,CA94080  
650-589-9445

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REPRINT  
SEE SHIP LIST

CUST JOB NO

JOB DESC

ORDERED BY

DATE & TIME IN	CUSTOMER P.O. #	SR	OW	TERMS	SHIPPED VIA	INV DATE
02/27/03 12:49	48" FLEXCON LOGO	16	35	NET 15 DAYS	F/E 3PARTY	03/25/03

PRODUCT	DESCRIPTION	ADD'L	#ORIG	1ST PRN	EA	ADDL	EXTENSION
CCREAT	RHO SET UP	1	1		.00	25 00	25 00
RMISC	48 X LF FLEXMARK V400	5	1		00	18 79	03 95
M960	48 X LF OVERLAM	5	1		00	10 00	50 00
DCUT	DIE CUTTING CHARGE	1	5		00	2 64	13 20
STUBE	SHIPPING TUBE	1	1		00	9 95	9 95

THANK YOU FOR YOUR BUSINESS!

SUB TOTAL	DISCOUNT	TAX	DELIVERY	PAYMENTS	AMOUNT DUE
192 10	.00	15 85	40 00	00	247 95

AMOUNTS PAST DUE ARE SUBJECT TO A FINANCE CHARGE OF 1 1/2% PER MONTH, ANNUAL PERCENTAGE RATE OF 18%

NOTICE SEE REVERSE SIDE FOR ADDITIONAL TERMS AND CONDITIONS OF SALE

DESCRIPTION OF  
ORIGINALS  
RECEIVED }

CALL WHEN READY

NEGS (SHIP OR FILE)

S L I T T O N	
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