

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

**PROOF OF CLAIM**



672925

Bar Date Ref # 1-NV-67083

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.

**Name of Creditor and Address**

Gleichen Std Transport  
PO Box 328  
Standard AB T0J 3G0  
Canada

0354653672925

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 ( ) 403 934 7787

CREDITOR TAX ID #  
89827 2752 RT

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

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

**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** March 6 2003

**3 IF COURT JUDGMENT DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ 3917 (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (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.

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  
**FILED**  
AUG 25 2003  
BMC

DATE SIGNED

Aug 8/2003

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)

Darren Firkus Pres. Dawn Finkus



06485

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

Gleichen Standard Transport 1990

Box 328  
 Standard, Alberta  
 T0J 3G0

# Invoice

Date	Invoice No
3/31/2003	3803

<b>Bill To</b>
Core-Mark International, Inc 8225 30 ST S E Calgary, AB T2C 1H7

<b>To</b>
M&r Gas Station  Siksika

<b>Prepaid</b>	<b>Collect</b>
X	

Description	References	Weight	Rate	Amount
DELIVERY	654637	500	0 07	34 00T
DELIVERY	Fuel Surcharge	34	0 076	2 58T
	Business Number 89827 2752 RT			

			2 56	
			<b>Total</b>	
			\$39 14	

COMBINATION SHORT FORM OF STRAIGHT BILL OF LADING - EXPRESS SHIPPING CONTRACT ADOPTED BY RAIL FREIGHT AND EXPRESS CARRIERS SUBJECT TO THE JURISDICTION OF THE CANADIAN TRANSPORT COMMISSION. ISSUED AT SHIPPER'S REQUEST

RECEIVED subject to the classifications and tariffs in effect on the date of issue of this Original Bill of Lading or, RECEIVED subject to the Rules for the Lading of Express and Non-Carload Freight Traffic and tariffs in effect on the date of issue of the original Shipping Contract (bill of lading), goods described below in apparent good order except as noted (contents and conditions of contents of packages unknown) marked, consigned and destined as indicated below which said Company agrees to carry to its usual place of delivery at said destination if on its road otherwise to deliver to another carrier on the route to said destination.

It is mutually agreed, as to each carrier of all or any of said goods over all or any portion of said route to destination, and as to each party at any time interested in all or any of said goods, that every service to be performed hereunder shall be subject to all the terms and conditions which are hereby incorporated by reference and have the same force and effect as if the same were severally, fully and specifically set forth herein)

- 1 approved by the Canadian Transport Commission for Canada by General Order No. T-5 dated February 1 1955 set forth in the Canadian Freight Classification and also available at all Railway agency stations and freight offices upon request, when said goods are carried by a rail carrier or
- 2 of the bill of lading of the water carrier as provided in its tariffs of Rules and Regulations when said goods are carried by water carrier or
- 3 of the bill of lading set forth in or prescribed by the relevant tariffs, classification, statutes and regulations pertaining to motor carrier's service when said goods are carried by a motor carrier or
- 4 of the bill of lading form prescribed by O.C. 968 79 April 4 1979 when the said goods originating in Québec are to be carried by a Motor Carrier
- 5 or approved by the Canadian Transport Commission for Canada by General Order No. T-45, set forth in the Rules for the Carriage of Express and Non-Carload Freight Traffic and also available at all express and railway agency stations and express and freight offices upon request when said goods are carried by a rail carrier and which are agreed to by the shipper and accepted for himself and his assigns.

NAME OF CARRIER GLEICHEN TRANSPORT POINT OF ORIGIN CALGARY SHIPPING DATE MARCH 6, 2003 SALES REP 438

CONSIGNEE & CONSIGNEE'S STREET ADDRESS M&R GAS STATION #182097 SHIPPER CORE-MARK INT

SIKSIKA NATION BOX 1665 DESTINATION SIKSIKA If charges are to be prepaid write or stamp here "to be prepaid" PPD

ROUTE SIKSIKA, AB TO J-3W0

PIECES/PACKAGES	DESCRIPTION OF ARTICLES AND SPECIAL MARKS	WEIGHT (RUBB TO CORRECTION)	RATE
2	INV # 654637 - 674 - 220		
7	INV # 644621 - 321 - 0547		
	Line 1-4 114 Cigs		
	Line 6-2 16 Tobb		
	Line 9-3 2M		
	3 CUSES		3803

SHIPPER SHOW AMOUNT OF C O D

C AMOUNT \$

O FEE \$

D TOTAL \$

RECEIVED \$

TO APPLY IN PREPAYMENT OF THE CHARGES ON THE PROPERTY DESCRIBED HEREON

AGENT OR CASHIER

FOR CARRIER'S USE CHARGES

ADVANCE AND/OR BEYOND \$

MISC \$

BASIC \$

PIECE \$

VALUE \$

TOTAL \$

SPECIAL AGREEMENT BETWEEN CONSIGNOR AND CARRIER ADVISE HERE

FOR MOTOR CARRIER SERVICE DECLARED VALUATION. Maximum liability of \$4.41 Kg (\$2.00/lb) calculated on the total weight of the shipment, unless declared valuation is less otherwise \$

NOTICE OF CLAIM: a) No carrier is liable for loss, damage or delay to any goods carried under the Bill of Lading, unless notice is given setting out particulars of the origin, destination and date of shipment of the goods and the estimated amount claimed in respect of such loss, damage or delay is given to the originating carrier or the delivering carrier within sixty (60) days after the delivery of the goods, or b) The cause of failure to make delivery, within nine (9) months from the date of shipment. b) The final statement of the claim must be filed within nine (9) months from the date of shipment together with a copy of the paid freight bill.

WHERE REQUIRED BY THE TARIFF SHIPPER MUST COMPLETE THE FOLLOWING

9 TOTAL NO. OF PIECES/PKGS. DIMENSIONS OF SHIPMENT TOTAL CUBIC FEET DIMENSIONAL WT. NUMBER X/L PIECES/PKGS. TOTAL WT. 500 TO 1100 6500 435

DECLARED VALUE OF SHIPMENT \$ 3823

RECEIVED ABOVE GOODS IN GOOD CONDITION

SHIPPER CORE-MARK INT AGENT

PER 8225 30 ST SE PER Calgary 90

T2C-147

PERMANENT POST OFFICE ADDRESS OF SHIPPER Calgary

PLEASE QUOTE SHIPPER'S NO 654637

1 ORIGINAL NOT NEGOTIABLE (THIS BILL OF LADING EXPRESS SHIPPING CONTRACT IS TO BE SIGNED BY SHIPPER AND CARRIER) NUMERIC FILE COPY