

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

PROOF OF CLAIM



s121351

In re
Core-Mark International, Inc

Case Number
03-10944

Scheduled Claim Ref # 1-F2-15652
YOUR CLAIM IS SCHEDULED AS
\$585.20 UNSECURED

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.

Name of Creditor and Address

0354429390624

DAYS INN
9717 SUNNYSIDE ROAD
CLACKAMAS OR 970159765

The amounts reflected above constitute your claim as scheduled by the Debtor. If you agree with the amounts set forth herein and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below.

If the amounts shown above are listed as Contingent, Unliquidated or Disputed, a proof of claim must be filed.

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 (503) **652-1500 x 408**

CREDITOR TAX ID #
91-1779435

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 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 _____

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 \$ 829.40 \$ _____ \$ _____ \$ _____

(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 4/11/01 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
FILED
AUG 27 2003
BMC
Filing Companies Claim
 06746

DATE SIGNED
8/21/03

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).

Chloe Jones, Controller

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

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

In re)	Chapter 11
)	
Fleming Companies, Inc , et al , ¹)	Case No 03-10945 (MFW)
Debtors)	(Jointly Administered)

**NOTICE OF DEADLINE FOR THE
FILING OF PROOFS OF CLAIM AND PROOFS OF INTEREST**

TO ALL CREDITORS OF THE DEBTORS

PLEASE TAKE NOTICE that the above-captioned debtors and debtors-in-possession (the "Debtors") filed a voluntary petition for relief under Chapter 11 of title 11 of the United States Code (as amended from time to time, the "Bankruptcy Code") in the United States Bankruptcy Court for the District of Delaware (the "Court") The Debtors are operating their businesses and managing their property as debtors in possession pursuant to Sections 1107(a) and 1108 of the Bankruptcy Code

Pursuant to Section 105(a) of the Bankruptcy Code and Bankruptcy Rule 3002(c)(3), all Persons and Entities, including, without limitation, individuals, partnerships, corporations, estates, trusts, governmental units (which shall include all entities defined as such in Section 101(27) of the Bankruptcy Code, including any such entity that holds a claim arising from prepetition tax years or periods or from prepetition transactions to which a Debtor was a party), and entities asserting claims against an individual Debtor that arose out of the obligations of such entities or the Debtors under a contract for the provision of liability insurance (each a "Creditor" and collectively, "Creditors"), holding or wishing to assert a claim as defined in Section 101(5) of the Bankruptcy Code against any of the Debtors (collectively, the "Claims") or interest in any of the Debtors (collectively, the "Interests") arising on or before April 1, 2003 (the "Petition Date"), are required to file a separate, completed and executed proof of claim form conforming substantially to Official Bankruptcy Form 10) (the "Proof of Claim") on account of any Claims such Creditors hold or wish to assert against the Debtors, so that the Proof of Claim is actually received on or before 4 00 p m Pacific Daylight Time on September 15, 2003 (the "General Bar Date"), or in the case of governmental units, by October 1, 2003, the "Governmental Unit Bar Date," by the Debtors' Official Notice and Claims Agent at the following address

Bankruptcy Management Corporation ("BMC")
1330 East Franklin Avenue, El Segundo, CA 90245 *(for overnight mail or hand delivery)*
P O Box 900, El Segundo, CA 90245-0900 *(for regular mail)*
Telephone 1-888-909-0100

Notwithstanding the foregoing, **AT THIS TIME**, Proofs of Claim ARE NOT REQUIRED to be filed by Creditors holding or wishing to assert Claims against the Debtors of the types that are set forth in clauses (a) through (f) below (collectively, the "Excluded Claims")

- (a) Claims listed in the Debtors' Schedules of Assets and Liabilities (the "Schedules") filed with the Court, pursuant to Bankruptcy Rule 1007, or any amendments thereto, which are not therein listed as "contingent," "unliquidated" or "disputed," and which are not disputed by the creditor holding such claim as to nature, amount, or classification,
- (b) Claims on account of which a Proof of Claim has already been properly filed with the Court,
- (c) Claims previously allowed by, or paid pursuant to, an order of the Court, including, without limitation, any claims of the Agents and/or the Lenders allowed pursuant to the Final DIP Order,²
- (d) Claims allowable under Sections 503(b) and 507(a)(1) of the Bankruptcy Code as administrative expenses of the Debtors' chapter 11 cases,
- (e) Claims made by any of the Debtors or any direct or indirect subsidiary of any of the Debtors against one or more of the other Debtors,
- (f) Claims of an entity whose claim is limited exclusively to a claim for the repayment of principal and/or interest on or under any issuance by any of the Debtors of any debt security (collectively, the "Notes") or any indenture in respect of each issue of the Notes (the "Indentures" and each such Indenture collectively with the Notes issued thereunder, the "Debt Instruments"), provided, however, that (i) the foregoing exclusion shall not apply to the indenture trustees under any of the

¹ The Debtors are the following entities Core-Mark International, Inc Fleming Companies Inc , ABCO Food Group, Inc ABCO Markets Inc , ABCO Realty Corp , ASI Office Automation, Inc C/M Products Inc , Core-Mark Interrelated Companies Inc , Core-Mark Mid-Continent Inc , Dunigan Fuels, Inc , Favar Concepts, Ltd Fleming Foods Management Co , L L C , Fleming Foods of Texas, L P Fleming International, Ltd , Fleming Supermarkets of Florida, Inc , Fleming Transportation Service, Inc , Food 4 Less Beverage Company Inc Fuelserv, Inc , General Acceptance Corporation, Head Distributing Company Marquise Ventures Company, Inc , Minter-Weisman Co , Piggly Wiggly Company, Progressive Realty, Inc , Rainbow Food Group, Inc Retail Investments, Inc , Retail Supermarkets Inc , RFS Marketing Services, Inc , and Richmar Foods, Inc

² The term Final DIP Order refers to the Final Order Authorizing (I) Post-Petition Financing Pursuant to 11 U S C § 364 and Bankruptcy Rule 4001(c), (II) Use of Cash Collateral Pursuant to 11 U S C § 363 and Bankruptcy Rules 4001(b) and (d), (III) Grant of Adequate Protection Pursuant to 11 U S C §§ 361 and 363, and (IV) Approving Secured Inventory Trade Credit Program and Granting Subordinate Liens Pursuant to 11 U S C §§ 105 and 364(c)(3) and Rule 4001(c)

*Returned
CKS*

58.30 +
127.60 +
185.90 ◊

*Folios
UNPAID*

58.30 +
58.30 +
58.30 +
58.30 +
58.30 +
58.30 +
58.30 +
60.50 +
58.30 +
58.30 +
58.30 +
TOTAL 829.40 *

CHECK #
THE ATTACH

ARK INTERNATIONAL INC

Page 1

IF NOT CORRECT PLEASE NOTIFY US PROMPTLY

INVOICE D
CCYY-MM
2003 02

TOTAL

AMOUNT	DISCOUNT	NET AMOUNT	DIV NO
58 30	00	58 30	45
58 30	00	58 30	

CORE-MARK INTERNATIONAL INC.

Check No 904085602

50 937

213

395 Oyster Point Blvd

Suite 415

San Francisco, CA 94109

JP MORGAN CHASE BANK
6040 FARBER ROAD

SYRACUSE, NY 13206

CORE-MARK

DATE 2003-03-03

**DO NOT
REDEPOSIT**

AMOUNT \$

*****58 30

9503

[Signature]

TREASURER

Pay to the
Order of

DAYS INN
9717 SUNNYSIDE ROAD
CLACKAMAS, OR 970159765

123-220

⑈904085602⑈ 21309379⑈ ⑈01⑈8⑈09666⑈

⑈0000005830⑈

DAVE INN - PORTLAND SOUTH
 5717 S E SUNNYSIDE ROAD
 CLACKAMAS, OR 97015-3725
 PHONE: (503) 254-1299 FAX: (503) 254-2702

MAFF STILI
 CORE-MAFF INTERNATIO

FOLIO. 51791 ROOM 107 REG#.
 ARRIVE 02 19 05
 DEPART 02 21 05
 TODAY 05 21 05
 #GUESTS 1
 RATE..55 .1

Lovell Member #:
 TIME CHECKED IN. 19:14

TIME CHECKED OUT.

ROOM #	SH	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
105	C	02/19/05	E	ROOM RENT	35.00	35.00
105	C	02/19/05	F	TAXES, TA...	5.30	40.30
105	H	02 20 05	O	DIRECT BILL	-5.30	0.00
***** TOTAL DUE *****						0.00
ROOM RENT..		35.00	ROOM TA...	5.30	DIF BILL	55.30

Please contact the manager about any issue with your stay.
 Days Inn Worldwide or affiliated properties contact you about goods
 and services unless you call 877 212-2720 or write to PO 27970,
 Minneapolis, MN 55427-0270 to opt out. View our Days Inn
 website about privacy.

CHECK # **904083391**

CORE-MARK INTERNATIONAL INC

Page 1

THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW

IF NOT CORRECT PLEASE NOTIFY US PROMPTLY

INVOICE DATE CCYY-MM-DD	INVOICE NO	GROSS AMOUNT	DISCOUNT	NET AMOUNT	DIV NO
2003 02 13	81365	69 30	00	69 30	45
2003 02 17	81604	58 30	00	58 30	45
	*** Total ***	127 60	00	127 60	

CORE-MARK INTERNATIONAL INC

Check No **904083391**
50 937



395 Oyster Point Blvd
Suite 415
San Francisco CA 94080

JPMORGAN CHASE BANK
6040 BARBELL ROAD
SYRACUSE, NY 13206

RETURN TO FEDERICA
FOR REASON INDICATED BELOW
REFER TO MAKER

Void 60 Days From Date
AMOUNT \$

*******127 60**

DO NOT REDEPOSIT

Pay to the
Order of

DAYS INN
9717 SUNNYSIDE
CLACKAMAS, OR 970159765

RETURNED BY
JPMORGAN CHASE BANK

APR 01 2003

TREASURER

123-220

⑈904083391⑈

⑈11309379⑈

⑈10809668⑈

⑈0000012760⑈

DAYS INN - FORTLAND SOUTH
 7717 E FUNNYSIDE ROAD
 CLACKAMUS, OR 97015-9745
 PHONE: (503) 654-1055 FAX: (503) 654-2702

MAF# 5111 FOLIO 615&5 ROOM 107 REG#
 COFF-MAF# INTERNATIO AFFIVE OE 12 05
 DEFER OE 13 05
 TODAY OE 21 02
 #REQUESTS 1
 RATE .55.00
 Loyalt/ Member # TIME CHECKED IN 17:17 TIME CHECKED OUT..

ROOM #	3M	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
107	E	02/12/05	D	541-476-1470 01:00 Z	11.00	11.00
107	C	02 12 05	E	ROOM RENT	55.00	66.00
107	C	02 12 05	F	COUNTY TAX	3.30	69.30
107	A	02 13 05	D	DIRECT BILL	67.00	0.00

***** TOTAL DUE..... 0.00

ROOM RENT.. 55.00 ROOM TA . 3.30 TELEPHONE . 11.00
 DIR BILL... 67.30

Please contact the manager about any issue with our stay.
 Days Inn Worldwide or affiliates may contact you about goods
 and services unless you call 1-877-212-2755 or write to P.O. Box 27570,
 Minneapolis, MN 55427-0770 to opt out. View our Days Inn
 website about privacy.

DAVE INN - PORTLAND SOUTH
 2717 S E SUNNYSIDE ROAD
 CLATSOP COUNTY, OR 97135-7725
 PHONE: (503) 254-1257 FAX: (503) 259-2702

MIKE WOLFE
 COPE MART
 227 OFFER FOWELL OF RD
 WILLIAMS, OR 97544

CLIO, 2104 ROOM 127 REG#.
 ARRIVE 02/16/03
 DEPART 02/17/03
 TODAY 02/16/03
 #GUESTS 1
 RATE..55.00

Local, Member #:
 TIME CHECKED IN 17:55

TIME CHECKED OUT .

ROOM #	SH	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
127	C	02/16/03	F	ROOM RENT	55.00	55.00
127	C	02/16/03	F	COUNTY TAX	3.30	58.30
127	F	02/17/03	U	DIRECT BILL	50.00	0.00

***** TOTAL DUE. 0.00

ROOM RENT . 55.00 ROOM TAX . 3.30 DIR BILL... 58.30

Please contact the manager about any issue with your stay.
 Dave Inn Worldwide or affiliates may contact you about goods
 and services unless you call 271-212-2733 or write to Po 27570,
 Minneapolis, MN 55427-0570 to opt out. View our Dave Inn
 website about privacy.

DAVE INN - FORTLAND SOUTH
 9717 S E SUNNYSIDE ROAD
 CLATSOP COUNTY, OR 97015-2762
 PHONE: (503) 254-1699 FAX: (503) 259-2702

MIKE WOLFE
 CORE MGMT
 267 WIFFF POWELL OF RD
 WILLIAMS, OR 97544

FOLIO, 32092 ROOM, 127 FEG#.
 ARRIVE 02 23 02
 DEPART 02 24 02
 TODAY, 06 21 02
 #GUESTS 1
 RATE..55.00

Lo all Member #:
 TIME CHECKED IN..17:52:

TIME CHECKED OUT .

ROOM #	SH	DATE	CL	DESCRIPTION	AMOUNT	BALANCE
127	C	02 23 03	E	ROOM RENT	55.00	55.00
127	C	02 23 03	F	COUNTY TAX	3.30	58.30
127	B	02/24 03	O	DIRECT BILL	58.30	0.00

***** TOTAL DUE... . 0.00

ROOM RENT.. 55.00 ROOM TAX.. 3.30 DIR BILL... 58.30

Please contact the manager about any issue with your stay.
 Dave's Inn Worldwide or affiliates may, contact you about goods
 and services unless you call 877-212-2722 or write to PO 27970,
 Minneapolis, MN 55427-0570 to opt out. View our Dave's Inn
 website about privacy.

DAYS INN FORTLAND SOUTH
 2717 E E SUNNYSIDE ROAD
 CLACKAMINE, OR 97015-0765
 PHONE: (503) 654-1333 FAX: (503) 654-2702

MARI STILL
 CORE-MAINT INTERNATIONAL

FOLIO, 02216 ROOM, 102 FEG#,
 AFFIVE 07,25'03
 DEPART 12 27 03
 TODAY, 05 21/03
 #GUESTS 1
 RATE..55.00

Loyalty Member #:
 TIME CHECKED IN. 16:56:

TIME CHECKED OUT..

ROOM #	SH	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
102	C	02 26 03	E	ROOM RENT	55.00	55.00
102	C	02 26/03	F	COUNTY TAX	3.30	58.30
102	A	02 27 03	O	DIRECT BILL	59.60	0.00

***** TOTAL DUE. ... 0.00

ROOM RENT. 55.00 ROOM TAX . 3.30 DIR BILL. 59.60

Please contact the manager about any issue with your stay.
 Days Inn Worldwide or affiliates may contact you about goods
 and services unless you call 877 212-2703 or write to P.O. 27270,
 Minneapolis, MN 55427-0570 to opt out. View our Days Inn
 website about privacy.

DAYS INN - PORTLAND SOUTH
 9717 2 E SUNNYSIDE ROAD
 CLACKAMAS, OR 97115-5725
 PHONE: (503) 654-1237 FAX: (503) 655-2702

MIKE WOLFE
 COPE MART
 297 WHELF FOWELL CF PD
 WILLIAMS, OR 97154

FOLIO. 32478 ROOM. 131 FEG#.
 AFFILE 02 02/05
 DEPART 03/05 03
 TODAY 06 21 05
 #GUESTS 1
 RATE .55.00

Loyalty Member #:
 TIME CHECKED IN. 12:56:

TIME CHECKED OUT .

ROOM #	TH	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
131	C	02/02/05	E	ROOM RENT	55.00	55.00
131	C	03/02/05	F	COUNTY TAX	3.30	58.30
131	B	02/03/05	D	DIRECT BILL	55.20	0.00
*****					TOTAL DUE.. ..	0.00
ROOM RENT..	55.00	ROOM TAX...	3.30	DIR BILL...	58.30	

Please contact the manager about any issue with your stay.
 Days Inn Worldwide or Affiliates may contact you about goods
 and services unless you call 877-215-2752 or write to 50 E7970,
 Minneapolis, MN 55427-0570 to opt out. View our Days Inn
 website about privacy.

DAYS INN - PORTLAND SOUTH
 9717 E E SUNNYSIDE ROAD
 CLACKAMAS, OR 97015-3763
 PHONE: (503) 454-1557 FAX: (503) 454-2702

MIKE WOLFE
 COFFEE-MAF1 INTERNATIO

FOLIO, 2E234 ROOM, 127 REG#,
 ARRIVE 03/05 03
 DEPART 03/06 02
 TOLR, 05/21 02
 #GUESTS 1
 RATE, 55.00

Levelt Member #:
 TIME CHECKED IN, 12:44

TIME CHECKED OUT..

ROOM #	CH	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
127	C	03/05/03	E	ROOM FENT	55.00	55.00
127	C	03/05/03	F	COUNT, TAX	3.30	58.30
127	R	03/06/03	D	DIRECT BILL	58.30	0.00
*****					TOTAL DUE.....	0.00
ROOM FENT..		55.00	ROOM TAX ..	3.30	DIF BILL. .	58.30

Please contact the manager about an issue with your stay.
 Days Inn Worldwide or affiliates may contact you about goods
 and services unless you call 877-212-0700 or write to Box 27270,
 Minneapolis MN 55427-0700 to opt out. View our Days Inn
 website about privacy.

DAVE INN - FORTLAND SOUTH
 2717 S E SUNNYSIDE ROAD
 CLATWAS, OR 97015-5725
 PHONE: (503) 654-1695 FAX: (503) 655-2702

RICHARD CUFFHEY
 COREMAFI
 287 UFFER FOWELL CR RD
 WILLIAMS OR 97544

FOLIO. 82254 ROOM. 127 REG#.
 ARRIVE 03 09 03
 DEPART 03 10 03
 TODAY 02 21 03
 #GUESTS 1
 RATE. 55.00

Loyalt Member #:
 TIME CHECKED IN 13:29:

TIME CHECKED OUT .

ROOM #	SH	DATE	CI	DESCRIPTION	AMOUNT	BALANCE
127	C	03 09 03	E	ROOM RENT	55.00	55.00
127	C	03 09 03	F	COUNTY TAX	3.30	58.30
127	A	03 10 03	D	DIRECT FILL	58.20	0.00
***** TOTAL DUE. ...						0.00
ROOM RENT		55.00	ROOM TAX...	3.30	DIRECT FILL. .	58.20

Please contact the manager about any issue with your stay.
 Dave Inn Worldwide or affiliates may contact you about goods
 and services unless you call 877 213-2735 or write to 60 27977,
 Minneapolis MN 55427-0970 to opt out. View our Dave Inn
 website about privacy.

LAKE INN - PORTLAND SOUTH
 4717 S E SUNNYSIDE ROAD
 CLACKAMAS, OR 97115-0725
 PHONE: 503 454-1670 FAX: 503 559-2702

MARIE STILL
 CONF MARI INTERNATIO
 .

FOLIO. 83062 ROOM. 347 REC#
 ARRIVE 03/12/03
 DEPART 03/13/03
 TODAY 03/21/03
 #GUESTS 1
 RATE..55.00

Loyalt. Member #:
 TIME CHECKED IN..15:12:

TIME CHECKED OUT..

```

=====
ROOM #  SH  DATE      CD  DESCRIPTION              AMOUNT  BALANCE
-----  -  -
347     C   03/12/03  C   ROOM RENT                55.00   55.00
347     C   03/12/03  F   COUNTY TAX                2.30   58.20
347     A   03/13/03  D   DIRECT BILL              52.30    0.00
=====
                                  ***** TOTAL DUE *****                0.00
=====
ROOM RENT .      55.00   ROOM TAX...      2.30   DIR BILL...     52.30
  
```

Please contact the manager about any issue with your stay.
 Lake Inn Worldwide or Affiliates no. contact us about goods
 and services unless you call 877-212-2723 or write to Box 27570,
 Minneapolis, MN 55427-0770 to opt out. View our Lake Inn
 website about privacy.

DAYS INN - PORTLAND SOUTH
 7717 E E SUNNYSIDE ROAD
 CLATSOP COUNTY, OR 97131-2702
 PHONE: (503) 654-1200 FAX: (503) 652-2702

RICHARD CURRHEV
 COFE MARR
 257 OFFER POWELL OF RD
 WILLIAMS, OR 97544

FOLIO 05320 ROOM 127 FEA#.
 ARRIVE 05/16/03
 DEPART 05/17/03
 TODAY 05/21/03
 #GUESTS 1
 RATE. 55.00

Loyalty Member #:
 TIME CHECKED IN 19:47:17

TIME CHECKED OUT 05:34:56

ROOM #	SH	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
127	C	03/16/03	C	ROOM RENT	55.00	55.00
127	C	03/16/03	T	COUNTY TAX	5.30	52.30
127	A	05/17/03	D	DEFECT BILL	52.30	0.00

***** TOTAL DUE..... 0.00

ROOM RENT . 55.00 ROOM TAX . . 5.30 DEF BILL... 52.30

Please contact the manager about any issue with our stay.
 Days Inn Worldwide or affiliates may contact you about goods
 and services unless you call 877-212-2730 or write to Box 27270,
 Minneapolis MN 55427-0770 to opt out. View our Days Inn
 website about privacy.

DAYS INN - PORTLAND SOUTH
 9717 E C SUNNYSIDE ROAD
 CLACKAMAS, OR 97015-2725
 PHONE: (503) 654-1339 FAX: (503) 257-2702

MARI TRILL FOLIO, 89461 ROOM, 109 FFG#.
 CORE-MARI INTERNATIONAL AFFIVE 03 15 03
 . DEPART 03,20 03
 TODAY 08 21 03
 #SUITE 1
 Loyalt, Member #* RATE..55.00
 TIME CHECKED IN..17:40:34 TIME CHECKED OUT..18:21:54

ROOM #	PH	DATE	CD	DESCRIPTION	AMOUNT	BALANCE
109	B	03 15/03	G	541-474-1470 C 01:00	2.20	2.20
109	C	03 17/03	F	ROOM RENT	55.00	57.20
109	C	03 17/03	F	COUNTY TAX	3.50	60.70
109	E	03 20 03	G	DIRECT BILL	60.50	0.00

***** TOTAL DUE 0.00

ROOM RENT.. 55.00 ROOM TAX . 3.50 TELEPHONE.. 2.20
 DIR BILL . 60.50

Please contact the manager about any issue with your stay.
 Days Inn Worldwide or affiliates may contact you about goods
 and services unless you call 877-212-2725 or write to us, 2727,
 Minneapolis, MN 55427-0970 to opt out. View our Days Inn
 website about privacy.

DAYS INN - FOOTLAND SOUTH
 2717 E SUNNYSIDE ROAD
 CLACKAMAS, OR 97015-7355
 PHONE: (503) 654-1579 FAX: (503) 653-2700

RICHARD CURFHE
 COFE MARI
 287 JEFFER FOWELL CF RD
 WILLIAMS, OR 97544

FOLIO. 35757 ROOM. 227 REG#
 ARRIVE 03/23 03
 DEPART 03/24 03
 TODAY 05/21 03
 #GUESTS 1
 RATE..55 00

Local Member #:
 TIME CHECKED IN..15:05:03

TIME CHECKED OUT..12:58:52

ROOM #	SM	DATE	CD	DESCRIPTION	AMOUNT	BALANCE	
127	C	03 23 03	E	ROOM RENT	55.00	55.00	
127	C	03 23 03	F	COUNTY TAX	3.50	58.50	
127	F	03 24 03	C	DEFECT BILL	58.00	0.00	
*****					TOTAL DUE	0.00	
ROOM RENT..		55 00	ROOM TAX..		3.50	DEF BILL..	58 30

Please contact the manager about any issue with your stay.
 Days Inn Worldwide or affiliates may contact you about goods
 and services unless you call 577-212 2700 or write to Box 2770
 Minneapolis, MN 55427-0270 to opt out. View our Days Inn
 website about privacy

DAVE INN -- PORTLAND OREGON
 711 E FOUNTAIN SIDE ROAD
 CLATSOP COUNTY, OR 97115-5765
 PHONE: (503) 654-1155 FAX: (503) 654-2703

MARK LITILL
 CURE-MARK INTERNATIONAL
 .

FOLIO 85244 ROOM. 105 FEG#. 1
 ARRIVE 03/25/03
 DEPART 03/27/03
 TODAY 03/21/03
 #GUESTS 1
 RATE..55.00

Local Member #:
 TIME CHECKED IN..22:22:07

TIME CHECKED OUT..04:21:27

```

=====
ROOM #  BH  DATE  CO  DESCRIPTION  AMOUNT  BALANCE
=====
105     C   03/26/03  F   ROOM RENT      55.00     55.00
105     C   03/26/03  F   COUNTY TAX       3.30     58.30
105     C   03/27/03  C   DIRECT BILL      58.30      0.00
=====
                                ***** TOTAL DUE *****
                                ..                          0.00
=====
ROOM RENT..      55.00  ROOM TAX...      3.30  DIR BILL...     58.30
=====
  
```

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