

Name of Debtor
Core-Mark International

Bankruptcy Case No
03-10944

A. CREDITOR INFORMATION

(The creditor is the person or other entity to whom the debtor owes money or property)

REC'D AUG 28 2003

Name and Address of Creditor
 Expanets
 9780 Mt. Pyramid Ct.
 Suite 400
 Englewood CO 80112

- Check box if you 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.
- Check box and attach copy of assignment if claim has been assigned to you

THIS SPACE IS FOR COURT USE ONLY

Number by which creditor identifies debtor
537160

- replaces
- amends a previously filed claim dated _____
- supplements

B. CLAIM INFORMATION

1. BASIS FOR CLAIM
- Goods purchased
 - Services performed
 - Money loaned
 - Other forms of contract (Identify)
 - Personal Injury/Wrongful death/Property damage
 - Other (Describe briefly)

- Wages, Salaries and Commissions (Fill out below)
- Your social security number _____
- Unpaid services performed from _____ to _____
- Nature of services (Describe briefly)

2. DATE DEBT WAS INCURRED _____

3. CLASSIFICATION OF CLAIM Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Priority, (3) Secured. It is possible for a claim to be partly in one category and partly in another—such as wage claim which may be a priority claim for the first \$2,000 and an unsecured nonpriority claim for the balance. Classify the nature of the claim by CHECKING THE APPROPRIATE BOX OR BOXES which you believe best describes the claim. STATE THE AMOUNT OF THE CLAIM

- UNSECURED NONPRIORITY CLAIM \$ _____
 For the purposes of this form, a claim is unsecured if there is no collateral, or to the extent the value of collateral is less than the amount of the debt.
- SECURED CLAIM \$ _____
 Attach evidence of perfection of security
 Brief Description of Collateral
 Real Estate Motor Vehicle Other

- PRIORITY CLAIM \$ _____
 Specify the priority of the claim by checking the appropriate box(es)
- Wages, salaries or commissions (up to \$2000, earned not more than 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 \$900 of deposits toward purchase, lease, or rental of property or service for personal, family or household use—11 U.S.C. §507(a)(6)
- Taxes or penalties of governmental units—11 U.S.C. §507(a)(7)
- Other specify _____

4. TOTAL AMOUNT OF CLAIM. \$ _____ (Unsecured) + \$ _____ (Secured) + \$ _____ (Priority) = \$ 1,414.00 (Total)

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5. Attach copies of documents in support of this claim, such as purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.

6. This form should not be used to make a claim for expenses incurred after the filing of the bankruptcy petition. Such expenses may be paid only upon proper application and notice pursuant to 11 U.S.C. §503.

7. CREDITS AND SETOFFS Attach an itemization of all amounts and dates of payments which have been credited against the debt. Set forth any setoff or counterclaim which the debtor may have against your claim.

8. To receive an acknowledgment of the receipt of your claim, enclose a stamped, self addressed envelope and a copy of your claim

C CERTIFICATION

The undersigned certifies under penalty of perjury that the debtor named above is indebted to the claimant in the amount shown; that there is no security for the debt other than that stated above or in an attachment to this form, that no unmatured interest is included; and that the undersigned is authorized to make this claim.

Date _____ Sign and Print the Name and Title, if any, of the Creditor or Other Person Authorized to File this Claim
Richard Marinaccio Richard Marinaccio Divisional President

2003 AUG 22 PM 1:11

Filing Companies Claim



President

POWER OF ATTORNEY

Said claimant hereby constitutes and appoints _____

_____ or either of them, attorneys in fact authorizing them, or either of them, for said claimant and on said claimant's behalf to attend any and all meetings, to vote for or against any offer, proposal or resolution, and in the choice of trustee or trustees of the estate of said debtor or bankrupt and for a committee of creditors, to accept or reject any arrangement or reorganization plan offered by said debtor or bankrupt, to receive payment of dividends and of money or of other consideration due said claimant, and in general to do all things as fully as said claimant could do if personally present, with full power of substitution.

(Signature) X _____

(SIGN YOUR INDIVIDUAL NAME HERE)

Sign
Here

I, _____, the Creditor (claimant) named [or the president or other officer or authorized agent of the corporation named as Creditor or a member or an authorized agent of the partnership named as Creditor] in the foregoing Proof of Claim and Power of Attorney, do hereby declare (or certify, verify, or state), under penalty of perjury*, that the statements contained therein are true and correct, [and that the filing of this Proof of Claim and Power of Attorney on behalf of the corporation (or partnership) has been authorized]

Executed this _____ day of _____, 19____ at _____

(Signature) X _____

(SIGNATURE OF INDIVIDUAL, PARTNER, OFFICER,
OR AGENT MAKING OATH)

Sign
Here

* This unsworn declaration authorized by 28 USC 1746.

TYPE OR PRINT NAME OF SIGNER

TITLE (CORPORATE OFFICER, PARTNER OR AGENT)

Penalty for presenting fraudulent claim fine of not more than \$5,000 or imprisonment for not more than 5 years, or both. Title 18, U.S.C., § 152.

INSTRUCTIONS- Follow the instructions in each numbered paragraph and at each blank space and then (1) sign your name at the X and (2) attach an itemized statement.



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P O Box 28039
Pittsburgh PA 15236-80399

*****AUTO**3-DIGIT 981 EX_08.A.14 27421 1.2 0 292
CORE-MARK INTERNATIONAL INC
PO BOX 21009
SEATTLE WA 98111-3009 US

Questions about your bill or your account?

Visit www.expanets.com

Billing Support Center
Call 1 800-247-7000 Prompt 1
E mail billing@expanets.com

Technical Assistance Center
Call 1-866-XPANETS

Client Sales & Support Center
Call 1-800 247-7000
E-mail info@expanets.com

Your account is seriously past due Please pay immediately to avoid further collection action

Account Information

Account Number	Invoice Number	Amount Due
296512	15138095	\$1 414 00
Bill-To Number	Invoice Date	Due Date
537160	03/22/2003	Upon Receipt

ACCOUNT SUMMARY

Previous Balance	\$1,414 00	
Payments Received	\$0 00	
Balance Forward		\$1 414 00
New Charges and Taxes		
Total New Charges and Taxes		\$0 00

Total Amount Due \$1,414 00

Message Center

It's not hype, it's VoIP

Voice over IP (VoIP) also known as IP Telephony is the right choice in business communications if you want to

- * Streamline voice and data over one network
 - * Increase messaging flexibility and functionality
 - * Unify multi-location calling and reduce toll expenses
 - * Simplify and reduce administrative costs for moves, adds and changes
 - * Add customer relationship management applications more cost effectively
- Expanets offers a variety of solutions to help bring your voice and data together simply and economically. You can find out more about the benefits of IP by downloading a free white paper from www.expanets.com

Payment Due Immediately Upon Receipt of Invoice

To ensure proper credit please write your account number on your check - please detach and return with remittance

Remittance Document

Bill To Address Check here for change in billing address

CORE-MARK INTERNATIONAL INC
PO BOX 21009
SEATTLE WA 98111-3009 US

Visa Mastercard American Express Discover

Card Number _____

Expires (mo/yr) _____ / _____

Cardholder's Name (please print) _____

Cardholder's Signature _____

Account Number 296512
Bill-To Number 537160
Invoice Number 15138095
Invoice Date 03/22/2003
Total Amount Due \$1,414 00

Payment Amount \$ _____

Please make check payable to Expanets Inc and remit to

EXPANETS
PO BOX 173868
DENVER CO 80217 3868

0015138095 00296512 03222003 00000141400 8



Customer Name	CORE-MARK INTERNATIONAL INC
Account Number	296512
Bill to Number	537160
Invoice Number	15138095
Invoice Date	03/22/2003

Balance Forward Detail

Previous Balance

<u>Date</u>	<u>Transaction Type</u>	<u>Transaction Number</u>	<u>Transaction Amount</u>	<u>Adj./Credits</u>	<u>Payments</u>	<u>Previous Balance</u>
10/16/2002	Unapplied Receipt	24602	\$0 00	\$0 00	(\$400 00)	(\$400 00)
11/29/2002	Purchases/One Time	1000304297	\$320 00	\$0 00	\$0 00	\$320 00
11/29/2002	Purchases/One Time	1000310902	\$1 494 00	\$0 00	\$0 00	\$1 494 00
Totals			\$1,814 00	\$0 00	(\$400 00)	\$1 414 00
Previous Balance						\$1,414 00