

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

**PROOF OF CLAIM**



616505

Bar Date Ref # 2-NVM-82776

In re *Fleming Companies, Inc* Case Number *03-10945 (MFW)*

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.

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

**Name of Creditor and Address**  
  
0354653616505  
Mitsui Foods Inc  
PO Box PO Box 18434  
Newark NJ 07191

Creditor Telephone Number ( )

CREDITOR TAX ID #  
*22-1965737*

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

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

**1 BASIS FOR CLAIM** Note: *Claimant has made a reclamation demand & reserves all rights thereunder*  
 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** *Various*

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ *420,291.43* (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

DATE SIGNED  
*09/04/03*

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).  
*Jay J. Rodgers, SVP & Treasurer*

FILED FOR COURT USE ONLY  
 SEP 05 2003  
 BMC  
 Fleming Companies Claim  
 08029

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**

**FLEMING COS DIP  
STATEMENT OF ACCOUNT  
RECAP AS OF APRIL 2003**

	INVOICES (RETURNED PAY)	\$	32,592 62
	INVOICES	\$	118,007 71
	OPEN PAYMENTS	\$	(3,760 40)
	CREDIT MEMOS	\$	(12,248 31)
	MF10'S	\$	(29,071 32)
<b>CHARGEBACKS INVALID-</b>			
	POST AUDITS	\$	58,372 38
	PRICING / ALLOWANCE	\$	39,806 23
	VISIONET	\$	10,560 00
	FLOOR STOCK PROTECTION	\$	3,310 50
	SHORTAGES	\$	1,459 66
	STORE BRANDS ADS & STORE RESET	\$	4,686 00
	FREIGHT	\$	14,859 26
	NO EXPLANATION PROVIDED	\$	25,930 79
	UNSALEABLES	\$	2,089 50
	<b>SUB TOTAL</b>	<b>\$</b>	<b>266,594 62</b>
<b>CASH DISCOUNT INVALID-</b>			
	2001	\$	108,490 87
	2002	\$	14,904 02
	2003	\$	30,301 92
		<b>\$</b>	<b>153,696 81</b>
	<b>GRAND TOTAL</b>	<b>\$</b>	<b>420,291 43</b>