

UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE

PROOF OF CLAIM



484911

Bar Date Ref # 2 G5-6035

In re  <b>Fleming Companies, Inc</b>	Case Number  <b>03-10945</b>
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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**

0354651484911

PRESTIGE MAINTENANCE  
PO BOX 450992  
GARLAND TX 75045

☐ 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 ( )	CREDITOR TAX ID # <b>75-2664036</b>	ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR <b>Fleming Foods</b>	Check here <input type="checkbox"/> replaces or <input type="checkbox"/> amends if this claim	a previously filed claim dated _____
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**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 7/1/03 to 8/22/03  
(date) (date)

**2 DATE DEBT WAS INCURRED**

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ 3861.70 (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (unsecured priority) \$ 3861.70 (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)(6)
- ☐ 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

SEP 08 2003

**BMC**

Fleming Companies Claim



08559

DATE SIGNED <b>9/3/03</b>	SIGN and print the name and title of any of the creditor or other person authorized to file this claim (attach copy of power of attorney if any) <b>Rachelle S. [Signature]</b> CFO
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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

1701 SUMMIT AVE  
SUITE #4  
PLANO TX 75074

INVOICE NO.	16593
DATE	07/01/03

## CUSTOMER

Garland Division/ Expense  
Fleming Companies  
P O Box 268802  
Oklahoma City, OK 73126-8802

### SERVICE LOCATION

Fleming Foods  
2600 Mccree  
Garland, TX 75041

[illegible]

**▼ TO INSURE PROPER CREDIT, PLEASE DETACH AND MAIL BOTTOM PORTION WITH YOUR PAYMENT ▼**

## ATTENTION

Garland Division/ Expense  
Fleming Companies  
P O Box 268802  
Oklahoma City, OK 73126-8802

**PLEASE SEND REMITTANCE TO:**

**PRESTIGE MAINTENANCE LTD**  
PO BOX 450992  
GARLAND, TX 75045

<b>Customer No.</b>	Fleming
<b>Job No.</b>	Fleming Fo
<b>Invoice No.</b>	16593
<b>Invoice Date</b>	07/01/03
<b>Amount Due</b>	1,948.50
<b>Amount Remitted</b>	

1701 SUMMIT AVE  
SUITE #4  
PLANO, TX 75074

INVOICE NO.	16592
DATE	08/01/03

## CUSTOMER

Garland Division/ Expense  
Fleming Companies  
P O Box 268802  
Oklahoma City, OK 73126-8802

### SERVICE LOCATION

Fleming Foods  
2600 Mccree  
Garland, TX 75041

[illegible]

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Invoice No.	16592
Invoice Date	08/01/03
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INVOICE NO.	16594
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Oklahoma City, OK 73126-8802

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2600 Mccree  
Garland, TX 75041

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PO BOX 450992  
GARLAND, TX 75045

<b>Customer No.</b>	Fleming
<b>Job No.</b>	Fleming Fo
<b>Invoice No.</b>	16594
<b>Invoice Date</b>	08/01/03
<b>Amount Due</b>	541 25
<b>Amount Remitted</b>	

1701 SUMMIT AVE  
SUITE #4  
PLANO, TX 75074

INVOICE NO.	16692
DATE	08/25/03

Garland Division/ Expense  
Fleming Companies  
P O Box 268802  
Oklahoma City, OK 73126-8802

Fleming Foods  
2600 Mccree  
Garland, TX 75041

TERMS	CUSTOMER NO		P O NO	
Net 30 Days	Fleming			
Description	Quantity	Unit of Measure	Price	Amount
On Demand Service Fee - 8/22/03 Last day of service was 8/22/03				(532.61)

Garland Division/ Expense  
Fleming Companies  
P O Box 268802  
Oklahoma City, OK 73126-8802

**PLEASE SEND REMITTANCE TO:**

**PRESTIGE MAINTENANCE LTD.**  
PO BOX 450992  
GARLAND, TX 75045

<b>Customer No.</b>	Fleming
<b>Job No.</b>	Fleming Fo
<b>Invoice No.</b>	16692
<b>Invoice Date</b>	08/25/03
<b>Amount Due</b>	(576 55)
<b>Amount Remitted</b>	