

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

**PROOF OF CLAIM**



s138913

Scheduled Claim Ref # 2-F2-26539

**YOUR CLAIM IS SCHEDULED AS**

\$383 57 UNSECURED

In re  
**Fleming Companies, Inc**

Case Number  
**03-10945**

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.

**Name of Creditor and Address**  
  
0354429432882  
  
SPELLBOUND DEVELOPMENT  
GROUP INC  
3419 VIA LIDO #400  
NEWPORT BEACH CA 92663

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.

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 **(247) 474-8577**

CREDITOR TAX ID #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

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

**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** 3/24/03

**3 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ 383 57 (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (unsecured priority) \$ 383 57 (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 USE ONLY

SEP 09 2003

BMC

Fleming Companies Claim



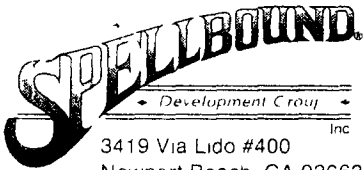
09313

DATE SIGNED

9/15/03

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)

*[Signature]*



3419 Via Lido #400  
 Newport Beach CA 92663  
 Phone (949) 474 8577 • Fax (949) 474 8470 • e mail spellbound1@spellboundinc.com  
 (Please remit all payments to the above address)

*Chapter 11*

DATE	INVOICE NO.
3/24/2003	14938

**BILL TO**  
**Fleming Convenience**  
**Randy Coffman**  
**3000 7th Avenue**  
**Altoona, PA 16602**

**SHIP TO**  
**Fleming Convenience**  
**Randy Coffman**  
**3000 7th Avenue**  
**Altoona, PA 16602**

P.O. NO.	TERMS	DUE DATE	REP	SHIP DATE	SHIP VIA	FOB	SUPPLIER #
143-0039040	NET 30	4/23/2003	ST	3/21/2003	FedEx Gnd	Irvine CA	

ITEM	DESCRIPTION	QTY.	\$/UNIT	AMOUNT	
LZ036-R-S2	Lizard Safety Utility Knife Model LZ-036-R-S Model LZ-036-R-S-OR Color High Visibility Orange Option Retractable Blade Guard Quantity per inner box; 6 pack Quantity "6-pack inner boxes" this order 60 1 Case Shipped	60	5.94	356.40	
	<b>SUB TOTAL</b>			356.40	
SHP-100	Shipping & Handling			27.17	
	Shipped on packing list # 19540				
	OUT OF STATE SALE NO SALES TAX COLLECTED		0.00%	0.00	
<b>THANK YOU !</b>				<b>Total</b>	<b>\$383.57</b>

COUNTS OVER 30 DAYS PAST DUE ARE SUBJECT TO A LATE PAYMENT CHARGE OF 1.5 PERCENT PER MONTH. THIS INVOICE BECOMES DUE IMMEDIATELY IF PURCHASER SELLS OUT, ASSIGNS, BURNS, SUSPENDS PAYMENT, ISSUES OR ATTACHED OR BECOMES INSOLVENT OR BANKRUPT. ANY SALES OR TAX OF ANY NATURE IMPOSED BY ANY GOVERNMENT AUTHORITY ON ANY OF THE MERCHANDISE SHIPPED ON THIS INVOICE SHALL BE ADDED TO THE PRICE QUOTED OR FIXED THEREUNDER AND PAID BY THE PURCHASER. PURCHASER AGREES TO PAY ALL COLLECTION COSTS AND ATTORNEY'S FEES NECESSARY TO COLLECT PAST DUE AMOUNTS AS PERMITTED BY LAW. SHOULD LITIGATION BECOME NECESSARY, I/WE AGREE THAT VENUE SHALL BE IN ORANGE COUNTY, CALIFORNIA.

001

32 #



P O CONFIRMATION  
Will ship within 48 hours of  
receipt of Purchase Order

*Handwritten signature*

ETA @ 7TH AVE 3/28 KL

① CASE. LZ-S. ORANGE!

14938  
Loc # 18324

FLEMING CONVENIENCE

PURCHASE ORDER

REGISTER #		VENDOR			ORDER DATE	PAGE OF 1	
ALTOONA 3010 7TH AVE ALTOONA PA 16607 USA		SPELLBOUND DEVELOPMENT 2419 VIA LIDO #900 NEWPORT BEACH CA 92667 CUSTOMER SERVICE-BEN			2003 03 21	600 77 0759	
PURCHASED BY		VENDOR #	SUB #	BUYER #	ARRIVAL DATE	PURCHASE ORDER # 143-0039040	
		07045	00	435	2 3 03-23	149-14-8410	
					PAYMENT TERMS	STANDING ORDER #	
					30 Days		
					DISCOUNT BRACKET	Total Weight	
					FOB ORIGIN	33	
						CU VOL	
						1	
						CASES	
						4	
QUANTITY	UNIT	UPC CODE	ITEM DESCRIPTION	PRICE	DATE	QUANTITY	PRICE
1	CS	LZ-S	LIZARD SAFETY BOX CUTTER	360	03-23	1	360
<b>Fleming</b>							

*Landon*

19540  
FedEx  
3-21-03  
DB-5L

8 27.17

VIA  
FEDEX-GRD  
PRE PAY F ADD

WAREHOUSE:ALTOONA

FRI 08 52 FAX 8148475559

INSTRUCTIONS: SEND ORIGINAL INVOICE AND BILL OF LADING TO THE ABOVE DISTRIBUTION CENTER  
IMPORTANT: SEE BACK HEREOF FOR SELLERS WARRANTIES AND AGREEMENTS

NOTICE: SUBSTITUTIONS IN HIGH IN PACKING OR PRICE WILL NOT BE ACCEPTED WITHOUT PRIOR NOTICE FROM US. DISTRIBUTION CENTER WE RESERVE THE RIGHT TO RETURN ANY OR ALL MERCHANDISE SUBSTITUTED WITHOUT PRIOR AUTHORITY TO REFUSE ANY OR ALL MERCHANDISE SHIPPED LATER THAN 30 DAYS FROM DATE OF ORDER AND TO RETURN. FROM PAYMENT AN EXPENSE OR LOSS INCURRED THROUGH CHECK ON THE PART OF THE SHIPPER.

**PACKING LIST**

SPELLBOUND DEVELOPMENT GROUP INC

1820 East McGaw Ave  
IRVINE CA 92614

TELE (949) 474 8577  
FAX (949) 474 8470

SOLD TO Fleming Convenience (Altoona)  
Attn Randy Coffman  
3000 7th Avenue  
Altoona PA 16602 USA

ORDER # 10510  
SHIPPING DATE 3/21/2003

NUMBER OF PACKAGES 1

ORDER DATE 3/21/2003

PER Randy Coffman

PURCHASE ORDER NUMBER

143 0039040

SHIPPED TO Fleming Convenience (Altoona)  
3010 7th Avenue  
Altoona PA 16602 USA

ATTN	DESCRIPTION OF ARTICLES	QUANTITY	SHIPPED VIA	TRACKING #
Landon - PO# 143 0039040	LZ-036-R-S-OR Case	1	FedEx Grd	0926208 90086802 ✓

Track 092620890086802  
Mode FedEx Ground Ground

Invoice	Date 03/21/2003	Shipping	20 81
Customer 18324	Weight	32 00 Special	0 00
Dept	COD	0 00 Handling	0 00
	DV	0 00 Total	20 81

THANK YOU



Spellbound Development Group Inc

RECEIVED BY