

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

**PROOF OF CLAIM**



s131412

Scheduled Claim Ref # 2-F2-19038  
**YOUR CLAIM IS SCHEDULED AS**

In re  
**Fleming Companies, Inc**

Case Number  
**03-10945** *3*

\$5 132 16 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.

**Name of Creditor and Address**  
  
0354429379625  
  
BAGCRAFT PACKAGING  
135 S LASALLE DEPT 2210  
CHICAGO IL 60674

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 ( )  
  
CREDITOR TAX ID #  
*36-4254430*

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       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**      \$ *4,319.80*      \$ \_\_\_\_\_      \$ \_\_\_\_\_      \$ *4,319.80*

(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

THIS SPACE FOR COURT USE ONLY

*FILED*  
SEP 11 2003

**BMC**

Fleming Companies Claim



10193

DATE SIGNED *9-10-03*      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)  
*Nancy M. Bolger Credit Manager*

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**

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773-254 8000 FAX 773 254 8204

**INVOICE**

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135 S LASALLE DEPT 2210  
CHICAGO IL 60674 2210

**SOLD TO**

FLEMING COMPANIES INC  
CTP/TULSA DIVISION  
P O BOX 268959  
OKLAHOMA CITY OK 73126-895

**SHIPPED TO**

FLEMING COMPANIES  
420 S 145TH EAST AVE  
TULSA OK 74108

BAGCRAFT ORDER NO	REG/TERR	BAGCRAFT CUST NO	SHIP TO #	CUSTOMER PO#	PO DATE	INV DATE	INVOICE #
562491	100001	104008	1	892987-TU	3/11/03	3/24/03	462796

BOL #	VIA	FOB	TERMS
K75935	1441DEL <i>ains</i>	PREPAID J1	1% 10 Net 30

BAGCRAFT PROD NO	GTIN CODE	DESCRIPTION	CODE	CASE PACK	CASES ORDERED	CASES B/O	CASES SHIPPED	NET PRICE PER CASE	EXTENDED AMOUNT
403343	10072181033433	ALBRTSONS FRNATWX 5 25X3 25X20	001	1000	33		33	24 35	803 55
401677	10072181016771	ALBRTSN BAGEL 6LB	001	500	13		13	10 71	139 23
403203	10072181032030	**ALBERTSONS SEE 3320**	001	1000	10		10	31 00	310 00
403344	10072181033440	ALBRTSONS FL 5 25X3 25X20 25	001	1000	4		4	83 88	335 52

NOTE MAKE CHECKS PAYABLE TO  
BAGCRAFT PACKAGING L L C

<b>"Please note that our customer service department has a new 800 number "</b>	PHONE# 800-434-0088	<b>PAY THIS AMOUNT</b>	<b>\$ 1588 30</b>
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<small>DO NOT RETURN MERCHANDISE OR MAKE DEDUCTIONS FROM THIS INVOICE WITHOUT PRIOR AUTHORIZATION FROM BAGCRAFT WE MAKE NO WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE OR ANY OTHER IMPLIED WARRANTY CLAIMS MUST BE MADE WITHIN FIVE (5) DAYS OF RECEIPT OF GOODS</small>	<small>CASH DISCOUNT MAY BE DEDUCTED FROM INVOICE IF PAYMENT IS MADE IN ACCORDANCE WITH THE ABOVE TERMS NO CASH DISCOUNT ON ART PREP OR FREIGHT</small>	<b>CASH DISCOUNT</b>	<b>\$ 15 88</b>
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Bagcraft Packaging  
3900 W 43rd St  
Chicago, IL 60632

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**A PACKAGING DYNAMICS COMPANY**  
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 TULSA OK 74108

BAGCRAFT ORDER NO	REG/TERR	BAGCRAFT CUST NO	SHIP TO #	CUSTOMER PO#	PO DATE	INV DATE	INVOICE #
562370	100001	104008	1	882827-TU	3/10/03	3/24/03	462786

BOL #	VIA	FOB	TERMS
K75935	1441DEL	PREPAID J1	1% 10 Net 30

BAGCRAFT PROD NO	GTIN CODE	DESCRIPTION	CODE	CASE PACK	CASES ORDERED	CASES B/O	CASES SHIPPED	NET PRICE PER CASE	EXTENDED AMOUNT
401325	10072181013251	ALBERTSON S FRIED CHICKEN	001	500	29		29	21 00	609 00
402673	10072181026732	ALBERTSONS AS 4LB	001	500	33		33	14 30	471 90

**NOTE MAKE CHECKS PAYABLE TO**  
**BAGCRAFT PACKAGING L L C**

<b>"Please note that our customer service department has a new 800 number "</b>	<b>PHONE# 800-434-0088</b>	<b>PAY THIS AMOUNT \$ 1080 90</b>
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BAGCRAFT ORDER NO	REG/TERR	BAGCRAFT CUST NO	SHIP TO #	CUSTOMER PO#	PO DATE	INV DATE	INVOICE #
562038	100001	104008	1	030503-TU	3/05/03	3/13/03	461904

BOL #	VIA	FOB	TERMS
K75673	DUGNLT	PREPAID J1	1% 10 Net 30

BAGCRAFT PROD NO	GTIN CODE	CODE	CASE PACK	CASES ORDERED	CASES B/O	CASES SHIPPED	NET PRICE PER CASE	EXTENDED AMOUNT
401325	10072181013251	001	500	40		40	21 00	840 00
ALBERTSON S FRIED CHICKEN								

NOTE MAKE CHECKS PAYABLE TO  
 BAGCRAFT PACKAGING L L C

<b>"Please note that our customer service department has a new 800 number "</b>	PHONE# 800-434-0088	<b>PAY THIS AMOUNT</b>	<b>\$ 840 00</b>
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 TULSA OK 74108

BAGCRAFT ORDER NO 563178	REG/TERR 100001	BAGCRAFT CUST NO 104008	SHIP TO # 1	CUSTOMER PO# 032003 TU	PO DATE 3/20/03	INV DATE 3/21/03	INVOICE # 462707
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BOL # K75905	VIA UPS LTL	FOB PREPAID J1	TERMS 1% 10 Net 30
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BAGCRAFT PROD NO DESCRIPTION	GTIN CODE	CODE	CASE PACK	CASES ORDERED	CASES B/O	CASES SHIPPED	NET PRICE PER CASE	EXTENDED AMOUNT
401325 ALBERTSON'S FRIED CHICKEN	10072181013251	001	500	10		10	21 00	210 00

NOTE MAKE CHECKS PAYABLE TO  
 BAGCRAFT PACKAGING L L C

<b>"Please note that our customer service department has a new 800 number "</b>	PHONE# 800-434-0088	<b>PAY THIS AMOUNT</b>	<b>\$ 210 00</b>
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**\*\* SENT VIA EDI \***  
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 TULSA OK 74108

BAGCRAFT ORDER NO 558816	REG/TERR 100001	BAGCRAFT CUST NO 104008	SHIP TO # 1	CUSTOMER PO# 470692-TU	PO DATE 1/20/03	INV DATE 1/30/03	INVOICE # 458249
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BOL # K74710	VIA DUGNLTL	FOB PREPAID J1	TERMS 1% 10 Net 30
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BAGCRAFT PROD NO DESCRIPTION	GTIN CODE	CODE	CASE PACK	CASES ORDERED	CASES B/O	CASES SHIPPED	NET PRICE PER CASE	EXTENDED AMOUNT
402673 ALBERTSONS	10072181026732 AS 4LB	001	500	42		42	14 30	600 60

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<b>"Please note that our customer service department has a new 800 number "</b>	PHONE# 800-434-0088	<b>PAY THIS AMOUNT</b>	\$ 600 60
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