


UNITED STATE BANKRUPTCY COURT DISTRICT OF DELAWARE		PROOF OF CLAIM Bar Date Ref# 2 NVM 16775
Name of Debtor FLEMING FOODS MANAGEMENT CO LLC		Case Number 03-10954(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		
Name of Creditor (The person or other entity to whom the debtor owes money or property) CROWN EQUIPMENT CORPORATION dba CROWN LIFT TRUCKS 40 SOUTH WASHINGTON STREET NEW BREMEN OHIO 45869		<input type="checkbox"/> 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 <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court
Name and address where notices should be sent CROWN EQUIPMENT CORPORATION dba CROWN LIFT TRUCKS ATTN RODNEY J HINDERS ESQ 40 SOUTH WASHINGTON STREET NEW BREMEN OHIO 45869 Telephone number 419 629 2220 ext 2062		
CREDITOR TAX ID # 34 4412691		Check here if this claim <input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim dated _____
1 Basis for Claim <input checked="" type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____		<input type="checkbox"/> Retiree benefits as defined in 11 U S C § 1114(a) <input type="checkbox"/> Wages salaries and corporation (fill out below) Your SS # _____ Unpaid compensation for services performed from _____ to _____ (date) (date)
2 Date debt was incurred 03/06/2003 to 03/31/2003		3 If court, judgment, date obtained _____
4 Total Amount of The Claim as of Petition Date \$ 7,141 73 (unsecured) \$ _____ (secured) \$ _____ (unsecured priority) \$ 7,141 73 (total)		
If all or part of your claim is secured or entitled to priority also complete Item 5 or 6 below <input type="checkbox"/> 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 <input type="checkbox"/> Check this box if claim is secured by collateral (including a right of setoff) Brief Description of Collateral <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral \$ _____ Amount of arrearage and other charges at time case filed included in secured claim if any _____		6 Unsecured Priority Claim <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim <input type="checkbox"/> Wages salaries or commissions (up to \$4 300) * 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) <input type="checkbox"/> Contributions to an employee benefit plan—11 U S C § 507(a)(4) <input type="checkbox"/> Up to \$1 950* of deposits toward purchase lease or rental of property or services for personal family or household use—11 U S C § 507(a)(6) <input type="checkbox"/> Alimony maintenance or support owed to a spouse former spouse or child—11 U S C § 507(a)(7) <input type="checkbox"/> Taxes or penalties of governmental units—11 U S C § 507(a)(8) <input type="checkbox"/> 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 case 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		THIS SPACE IS FOR COURT USE ONLY FILED SEP 11 2003 BMC
8 Supporting Documents Attach copies of supporting documents such as promissory notes 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 ATTACHED		
9 Date-stamped Copy To receive an acknowledgment of the filing of your claim enclose a stamped self addressed envelope and 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 California 90245
Date September 8 2003	<i>Peter J. Donahue</i> PETER J DONAHUE ATTORNEY & AGENT for CROWN EQUIPMENT CORPORATION dba CROWN LIFT TRUCKS Sign & Print the Name & Title of Creditor	
		Fleming Companies Claim  10298
Penalty for presenting fraudulent claim Fine of up to \$500 000 or imprisonment for up to 5 years or both 18 U S C §§ 152 and 3571		

DATE 05 SEP 03 13 47 03 RID 32B 05 SEP 03 TMOELLER
 Open AR items from TFACR200 Table

*Com	Cust	Trn	Invoice	Invoice	Open	Balance	Fin		Fisc	l			
*No	Number	Typ	Number	Date	in	Home	Curr	Grp	Customer	Name	Year	Pd	Company Name
713	I02732	IRI	13605	20020114	-324	57	010		FLEMING	FOODS	2001	10	Ft Wayne
713	I02732	IRI	649390	20030331	7200	00	010		FLEMING	FOODS	2002	12	Ft Wayne
* SUBTOT					6875	43							

DATE 05 SEP 03 13 47 03 RID 32B 05 SEP 03 TIOELLBR
 Open AR items from TFACR200 Table

*Com	Cust	Trn	Invoice	Invoice	Open Balance	Fin	Fisc	l	Year	Pd	Company Name
*No	Number	Typ	Number	Date	in Home Curr	Grp.	Customer	Name			
720	SB2084	IRI	208529	20030306	157 62	020	FLEMING	FOODS	2002	12	Milwaukee
720	SB2084	IRI	208975	20030320	131 84	020	FLEMING	FOODS	2002	12	Milwaukee
720	SB2084	IRI	210070	20030331	249 84	020	FLEMING	FOODS	2002	12	Milwaukee
*	SUBTOT				539 30						