

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

**PROOF OF CLAIM**



s138704

Scheduled Claim Ref # 2 F2-26330

**YOUR CLAIM IS SCHEDULED AS**

\$11 300 75 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**  
  
LIL DRUG STORE \*  
PRODUCTS INC  
P O BOX 1883  
CEDAR RAPIDS IA 524060000

0354429411067

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 (319) 393-0454

CREDITOR TAX ID #  
42-1286385

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 IF COURT JUDGMENT, DATE OBTAINED**

**4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE** \$ 37,172.1 (unsecured) \$ \_\_\_\_\_ (secured) \$ \_\_\_\_\_ (unsecured priority) \$ 37,172.1 (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 11 2003

**BMC**

DATE SIGNED

9/9/03

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).

*[Handwritten signatures]*

Fleming Companies Claim



10308

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**

ACCOUNTS RECEIVABLE AGING REPORT

Aged As Of 04/29/2003

Printed In Customer Number, Apply-To Number Order, Detail, Open Items Only

Minimum Balance Due All

In Aging Period Or Older All

Document Types I = Invoice P = Payment C = Cr Memo D = Dr Memo B = Balance Forward F = Finance Charge

Notes Types I B And F Are Aged By Their Due Date Types P, C And D Are Aged By Due Date Of The Document To Which They Apply

On Types I B C And D Amount 1 Is Sale Amt On Type P Amount 1 Is Cash Receipt Amt On Type F Amount-1 Is Fin Charge Amt

On Types I, C, and D Amount 2 Is Other Charges On Type P Amount-2 Is Discount And Allowance (No Amount 2 For Types F & B)

Cust No	Name	***** Aged Customer Balance *****										
Bal Mthd	Contact											
Phone No	Terms	Slsman	Collectr	Terr	Loc	Crdt Lmt	CURRENT	1	30 DAYS	31	60 DAYS	OVER 60 DAYS

500210 FLEMING COMPANY INC

Opn Itm KAREN ROBINSON

715 384 3191 NET UPON RECEIP 19 A2 LDS 21,000

Doc No	Doc Date	Tp	Aply To	Due Date	Amount-1	Amount-2						
41603	04/16/2003	P	0	04/16/03	3,873 07-	00			3,873 07			
2081279	04/16/2003	C	0	04/16/03	173 28-	00			173 28			
<del>2048102</del>	<del>05/22/2002</del>	<del>C</del>	<del>2048102</del>	<del>05/22/02</del>	<del>26 64-</del>	00						26 64-
2053288	07/16/2002	C	2053288	07/16/02	121 00-	00						121 00-
2064420	11/21/2002	I	2064420	12/21/02	7,043 04	00						
90404622	12/16/2002	P	2064420	12/16/02	5,415 55	140 86-						1,486 63
2077754	03/11/2003	I	2077754	04/10/03	4,413 60	00			4,413 60			
2082228	04/25/2003	I	2082228	05/25/03	88 96	00	88 96					
Customer Total					1,795 20		88 96			367 25	00	1,338 99
1 Cust Printed Grand Totals					1,795 20		88 96			367 25	00	1,338 99
/ Of Balance							4 96				00	
									20 46			74 59
Outstand B,D,I					5,989 19		88 96				00	
									4,413 60			1,486 63
Unapplied C,P					4,193 99-		00				00	
									4,046 35-			147 64-
Finance Charges					00		00				00	00
									00			00

5,752<sup>59</sup>

A C C O U N T S R E C E I V A B L E A G I N G R E P O R T

Aged As Of 04/29/2003

Printed In Customer Number, Apply-To Number Order, Detail, Open Items Only

Minimum Balance Due All

In Aging Period Or Older All

Document Types I = Invoice P = Payment C = Cr Memo D = Dr Memo B = Balance Forward F = Finance Charge

Notes Types I, B And F Are Aged By Their Due Date Types P, C And D Are Aged By Due Date Of The Document To Which They Apply

On Types I, B, C And D Amount-1 Is Sale Amt On Type P Amount-1 Is Cash Receipt Amt On Type F Amount 1 Is Fin Charge Amt

On Types I, C, and D Amount 2 Is Other Charges On Type P Amount 2 Is Discount And Allowance (No Amount 2 For Types F & B)

Cust No	Name					***** Aged Customer Balance *****				
Bal Mthd	Contact					CURRENT	1 - 30 DAYS	31	60 DAYS	OVER 60 DAYS
Phone No	Terms	Slsman	Collectr	Terr	Loc	Crdt-Lmt				

390006 FLEMING COMPANIES INC  
 Opn Itm PATTY KRUS  
 814 944 9374 NET UPON RECEIP 42 A1 LDS 34,500

Doc-No	Doc-Date	Tp	Aply-To	Due-Date	Amount 1	Amount-2			
2045613	04/23/2002	C	2045613	04/23/02	230 00	00			230 00-
2067202	12/27/2002	I	2067202	01/26/03	4,525 40	00			
90405746	01/20/2003	P	2067202	01/20/03	4,289 42	90 51			145 47
2070702	01/31/2003	I	2070702	03/02/03	3,856 04	00			
2080866	04/11/2003	C	2070702	04/11/03	30 80-	00		3,825 24	
2071430	02/06/2003	I	2071430	03/08/03	2,675 60	00		2,675 60	
2073579	02/17/2003	I	2073579	03/19/03	3,147 30	00		3,147 30	
2077315	03/06/2003	I	2077315	04/05/03	6,252 56	00		6,252 56	
Customer Total					15,816 17	00		9,648 14	84 53
1 Cust Printed Grand Totals					15,816 17	00		9,648 14	84 53
/ Of Balance						00		61 00	
								39 53	53-
Outstand B,D,I					16,046 17	00		9,648 14	
								6,252 56	145 47
Unapplied C,P					230 00-	00		00	230 00
Finance Charges					00	00		00	00
								00	00

ACCOUNTS RECEIVABLE AGING REPORT

Aged As Of 04/29/2003

Printed In Customer Number Apply To Number Order, Detail, Open Items Only

Minimum Balance Due All

In Aging Period Or Older All

Document Types I = Invoice P = Payment C = Cr Memo D = Dr Memo B = Balance Forward F = Finance Charge

Notes Types I B And F Are Aged By Their Due Date Types P, C And D Are Aged By Due Date Of The Document To Which They Apply

On Types I, B C And D Amount-1 Is Sale Amt On Type P Amount-1 Is Cash Receipt Amt On Type F Amount 1 Is Fin Charge Amt

On Types I C and D Amount 2 Is Other Charges On Type P Amount 2 Is Discount And Allowance (No Amount-2 For Types F & B)

Cust No	Name	***** Aged Customer Balance *****				
Bal Mthd	Contact	CURRENT	1 - 30 DAYS	31 - 60 DAYS	OVER 60 DAYS	
Phone No	Terms	Slsman	Collectr	Terr	Loc	Crdt Lmt

240220 FLEMING CSD PLYMOUTH  
 Opn Itm BUTCH FLEMING  
 763 545-3706 NET UPON RECEIP 08 A2 LDS 36,000

Doc-No	Doc Date	Tp	Aply-To	Due-Date	Amount 1	Amount-2			
2066523	12/19/2002	C	0	12/19/02	646 75-	00			646 75-
2080376	04/07/2003	C	0	04/07/03	474 35	00	474 35		
240220	04/08/2003	P	0	04/08/03	121 91	00	121 91-		
2077746	03/11/2003	I	2077746	04/10/03	4,509 12	00	4,509 12		
2078108	03/14/2003	I	2078108	04/13/03	203 04	00	203 04		
2078369	03/18/2003	I	2078369	04/17/03	7,840 80	00	7,840 80		
2078681	03/20/2003	I	2078681	04/19/03	3,642 24	00	3,642 24		
2080387	04/07/2003	C	2080376	04/07/03	52 50	00	52 50-		
Customer Total					14,899 69	00		00	646 75-
							15,546 44		
1	Cust Printed	Grand Totals			14,899 69	00		00	646 75-
							15,546 44		
% Of Balance						00		00	
							104 34		4 34-
Outstand B,D,I					16,195 20	00		00	
							16,195 20		00
Unapplied C,P					1,295 51-	00		00	
							648 76		646 75
Finance Charges					00	00		00	
							00		00

15,548<sup>45</sup>

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

**In re. Fleming Companies, Inc et al  
Case No. 03-10945-(MFW)-11**

**DOCUMENTS APPENDED TO CLAIM**

On August 9, 2006, document(s) were appended to Claim Number **10308** for the following reason(s)

- Stipulation/Order
- New Supporting Documents
- Change of Address
- Notice of Transfer of Claim per Docket Number 13131
- Other Docket Number ###

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

In re	)	Chapter 11	
Fleming Companies, Inc , <i>et al</i> , <sup>1</sup>	)	Case No 03-10945(MFW)	
Debtors	)	Jointly Administered	

**NOTICE OF TRANSFER RE DOCKET 13131**

TO LIL DRUGS STORE PRODUCTS INC  
PO BOX 1883  
CEDARS RAPIDS, IA 52406

Pursuant to Rule 3001(e)(2) of the Federal Rules of Bankruptcy Procedure, you are advised that there has been filed with the United States Bankruptcy Court for the District of Delaware, a Transfer to **REVENUE MANAGEMENT** of your **Claim No 10308** in the amount of **\$37,117 21**

If you do not object to this Transfer on or before twenty (20) days from the date of the mailing of this Notice (*ie*, **August 10, 2006**), by filing a written objection with the Office of the Clerk, United States Bankruptcy Court, 824 Market Street, 5th Floor, Wilmington, Delaware 19801, and serving a copy of the objection on the Official Claims and Noticing Agent listed below, **REVENUE MANAGEMENT** will be substituted in your place as the original claimant

DATED July 21, 2006

**THE BMC GROUP, INC F/K/A  
BANKRUPTCY MANAGEMENT  
CORPORATION**  
1330 East Franklin Avenue  
El Segundo, California 90245-4306

Official Claims and Noticing Agent for the  
Clerk of the Court in the Fleming  
Companies, Inc , et al Cases

---

<sup>1</sup> The Debtors are the following entities Core-Mark International, Inc , Fleming Companies, Inc , ABCO Food Group, Inc , ABCO Markets, Inc , ABCO Realty Corp , ASI Office Automation, Inc , C/M Products, Inc , Core-Mark Interrelated Companies, Inc , Core-Mark Mid-Continent, Inc , Dunigan Fuels, Inc , Favarr Concepts, Ltd , Fleming Foods Management Co , L L C , Fleming Foods of Texas, L P , Fleming International, Ltd , Fleming Supermarkets of Florida, Inc , Fleming Transportation Service, Inc , Food 4 Less Beverage Company, Inc , Fuelserv, Inc , General Acceptance Corporation, Head Distributing Company, Marquise Ventures Company, Inc , Minter-Weisman Co , Piggly Wiggly Company, Progressive Realty, Inc , Rainbow Food Group, Inc , Retail Investments, Inc , Retail Supermarkets, Inc , RFS Marketing Services, Inc , and Richmar Foods, Inc

**PROOF OF SERVICE**

I, Lisa Ruppenar, am over the age of eighteen years and not a party to the within action I am employed by The BMC Group, Inc f/k/a Bankruptcy Management Corporation, the Official Claims and Noticing Agent for the Clerk of the Court, whose business address is 1330 East Franklin Avenue, El Segundo, California 90245-4306 On July 21, 2006, I served a copy of the "Notice of Transfer re Docket 13131" upon the following parties

LIL DRUGS STORE PRODUCTS INC  
PO BOX 1883  
CEDARS RAPIDS, IA 52406

REVENUE MANAGEMENT  
ONE UNIVERSITY PLAZA  
STE 312  
HACKENSACK, NJ 07601

by placing a true copy thereof enclosed in a sealed envelope, with postage thereon fully pre-paid, and deposited in the mail in El Segundo, California

I declare under penalty of perjury that the foregoing is true and correct

DATED July 21, 2006

/s/Lisa Ruppenar

LISA RUPPNER