

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

PROOF OF CLAIM



662380

Bar Date Ref # 1-NV 6569

In re Core-Mark Int'l Portland, OR Case Number 03-10944

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

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

\$2136.96

Name of Creditor and Address

0354653662380

Elki Corp
2215 Merrill Crk
Parkway
Everett WA 98203

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 (1 425 261 1002)

CREDITOR TAX ID #
91-1287098

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

Check here if this claim 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 \$ 2136.96 (unsecured) \$ _____ (secured) \$ _____ (unsecured priority) \$ 2136.96 (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 12 2003

DATE SIGNED 9/8/03
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)
Elizabeth Yee (Elizabeth Yee) President

Fleming Companies Claim
11465

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



2215 MERRILL CREEK PARKWAY
 EVERETT, WA 98203-5853
 (425) 261-1002 FAX (425) 261-1001

INVOICE

BILL TO

CORE MARK
 13251 S.E. JOHNSON RD.
 PORTLAND OR 97222

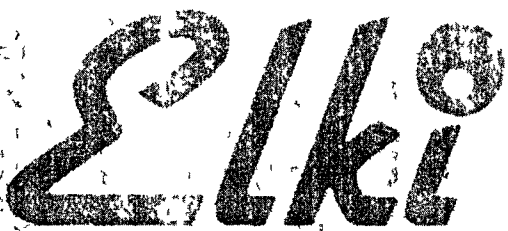
SHIP TO

CORE MARK
 13251 S.E. JOHNSON RD.
 PORTLAND OR 97222

CUSTOMER NUMBER	CUSTOMER P.O. NUMBER	SALESPERSON	INVOICE NUMBER	INVOICED DATE	INVOICE DUE DATE
0200440	44-1706690	0000981	36714	3/05/03	3/25/03

PAYMENT TERMS	SHIP VIA	SPECIAL INSTRUCTION	ORDER NUMBER
Pay due after 30 days	UPS	THANK YOU	41229

QUANTITY			ITEM	DESCRIPTION	LIST PRICE	NET PRICE PER	EXTENSION
ORDERED	SHIPPED	BACK ORD.					
216	216		114LL	FRUITES 12 TINS / BOX	8.280	6.360 EA	
72	72		115EL	SOUR APPLE 12 TINS / BOX	8.280	6.360 EA	
48	48		118EL	LITMON 12 TINS / BOX	8.280	6.360 EA	
				UPS 1WT / 14 BXS	Product Subtotal:		



ALL CLAIMS FOR MISSING OR DAMAGED GOODS MUST BE MADE WITHIN 5 DAYS OF RECEIPT OF THIS INVOICE.

DO NOT RETURN ANY ARTICLES WITHOUT PRIOR AUTHORIZATION FROM THIS OFFICE.

A MONTHLY SERVICE CHARGE WILL BE APPLIED ON THE PREVIOUS BALANCE LESS CREDITS ON THE BILLING DATE AT THE MAXIMUM ALLOWABLE LEGAL RATE.

INVOICE TOTAL
 2,136.96

Fleming

FLEMING CONVENIENCE

PURCHASE ORDER

REGISTER #

45299

SHIP TO PORTLAND 044		VENDOR ELKI		ORDER DATE 2003-03-03	425-261-1002		PAGE 1 OF 1						
13551 S.E. JOHNSON ROAD		2215 MERRILL CREEK		ARRIVAL DATE 2003-03-17 Monday	425-261-1001		PURCHASE ORDER # 44-1706690						
PORTLAND OR 97222 USA		EVERETT WA 98203 ELIZEBETH		PAYMENT TERMS DISCOUNT BRACKET 20 Days		THE ABOVE PURCHASE ORDER NUMBER MUST APPEAR ON ALL INVOICES, BILLS OF LADING, SHIPPING CONTAINERS AND PACKING LIST.							
CS RCVD		PURCHASED BY		VENDOR # 06569	SUB # 00	BUYER # 441	STANDING ORDER #						
				JOB		WEIGHT 277		CASES 14					
QUANTITY ORDERED	PURCH UNIT	WIC CODE	ITEM NUMBER	ITEM DESCRIPTION	PACKING DESCRIPTION	PAGE FACT	BILL UNITS ORDERED	ONE INVOICE ALLOWANCE	OTHER ALLOWANCES	UNIT COST	EXTENDED COST	AVE	STORE LOCATION
9	CS	82876 11400	309195	AREKA TINS FRUITIES	12 CT	24	216			6 36	1373 76		5-170204
2	CS	82876 11800	309203	AREKA TINS LEMON	12 CT	24	48			6 36	305 28		5-410304
3	CS	82876 11500	309211	AREKA TINS SOUR APPLE	12 CT	24	72			6 36	457 92		5-330104
				***** ##ORDER SENT VIA FAX##									
14							336	00	00		2136 96		

INSTRUCTIONS: SEND ORIGINAL INVOICE AND BILL OF LADING TO THE ABOVE DISTRIBUTION CENTER
 NOTICE: SUBSTITUTIONS EITHER IN PACKING OR PRICE, WILL NOT BE ACCEPTED WITHOUT PRIOR AUTHORITY FROM ISSUING 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 DEDUCT FROM PAYMENT ANY EXPENSE OR LOSS INCURRED THROUGH ERROR ON THE PART OF THE SHIPPER.

To Fax 14252611001 From Core-Mark International, Inc Date 03/03/03 05:07PM Page 2 of 2



September 10, 2003

To: United States Bankruptcy Court (DE)
Re: **Late Charges and Fees for lack of payment**
From Fleming Companies, Core-Mark,
Head Distributing and Minter-Weisman

This form states the late charges for lack of payment

Invoice # 36714

Debtor Core-Mark

Location where product was shipped to Debtor Portland, OR

Case # 03-10944

Principal Amount \$ 2136.96

Late Charges / Fees \$ 160.28

If you have any questions, please contact Elizabeth Lie at 425-261-1002 or elie@elki.com

Best Regards,

Elizabeth Lie
ELKI Corp
elie@elki.com

2215 Merrill Creek Parkway •
Everett Washington 98203 •
Telephone 425 261 1002
Facsimile 425 261 1001