


UNITED STATES BANKRUPTCY COURT _____ DISTRICT OF <u>DELAWARE</u>		<b>PROOF OF CLAIM</b>
Name of Debtor <u>Core-Mark International, Inc</u>		Case Number <u>03-10944</u>
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 USC § 503		
Name of Creditor (The person or other entity to whom the debtor owes money or property) <u>Johnson &amp; Johnson</u>		<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 checked="" 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 <u>Johnson &amp; Johnson 199 Grandview Road Skillman, NJ 08558-9418</u>		
Telephone number		THIS SPACE IS FOR COURT USE ONLY
Account or other number by which creditor identifies debtor <u>Vendor# 899828 &amp; Vendor# 167516 RE# 2725 PF#s 359,1488,3742,6716,114, 652,2575,2903 &amp; 5185</u>		Check here if this claim <input type="checkbox"/> replaces a previously filed claim dated _____ <input type="checkbox"/> amends
<b>1 Basis for Claim</b> <input checked="" type="checkbox"/> Goods sold <input 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 USC § 1114(a) <input type="checkbox"/> Wages, salaries and compensation (fill out below) Your SS # _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
<b>2 Date debt was incurred</b> <u>Prior to 4/1/2003</u>		<b>3 If court judgment, date obtained</b>
<b>4 Total Amount of Claim at Time Case Filed</b> \$ <u>828,908.35</u>		
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.		
<b>5 Secured Claim</b> <input type="checkbox"/> Check this box if your 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 \$ _____		<b>6 Unsecured Priority Claim</b> <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 \$4 650) * earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier. 11 USC § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan. 11 USC § 507(a)(4) <input type="checkbox"/> Up to \$2 100* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 USC § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child. 11 USC § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 USC § 507(a)(8) <input type="checkbox"/> Other. Specify applicable paragraph of 11 USC § 507(a)(____). <i>Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</i>
<b>7 Credits</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. <b>8 Supporting Documents</b> 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. <b>9 Date-Stamped Copy</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		THIS SPACE IS FOR COURT USE ONLY
Date <u>9-10-2003</u> 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) <u>Melissa A. Pietret Sr Credit Analyst</u>		<b>FILED</b> SEP 12 2003 <b>BMC</b> Filing Companies Claim  11707
Penalty for presenting fraudulent claim: Fine of up to \$500 000 or imprisonment for up to 5 years, or both. 18 USC §§ 152 and 3511		

**Johnson & Johnson**  
SALES AND LOGISTICS COMPANY

September 10, 2003

**Via Federal Express**

**Receipt Requested**

Bankruptcy Management Corporation  
1330 East Franklin Avenue  
El Segundo, California 90245

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

Dear Sirs

We enclose [29] Proofs of Claim for filing in these cases, one for each of the procedurally consolidated debtors. A single summary of the detail is attached, additional copies can be provided upon request.

We have chosen to file in all [29] cases because the debtors' transaction documents and their filings and notices in these cases are obscure and confusing as to which of them they consider to be our debtors. Thus, to protect our interests and without any intent to obtain multiple recoveries, we have chosen to file against all of them. We reserve all of our rights to amend or withdraw any or all of these Proofs of Claim and to contend in accordance with the relevant evidence as to which of the debtors are our proper debtors.

If for any reason any of these Proofs of Claim is not in form acceptable for filing, please call me (collect) immediately so that I can correct the deficiency.

Also enclosed are extra copies of the Proofs of Claim for filed-stamping and returning to me in the prepaid FedEx envelope which is also enclosed.

Sincerely yours,



Melissa A. Petriet  
Sr. Credit Analyst  
Phone 908-904-3478  
Fax 908-904-3794  
[mpetriet@cscus.jnj.com](mailto:mpetriet@cscus.jnj.com)

Enclosures

Division of Johnson & Johnson Consumer Companies, Inc

199 Grandview Road, Skillman, NJ 08558-9418 (908) 874-1000