

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

PROOF OF CLAIM



562562

Bar Date Ref # 2-NVM-21184

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

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

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again

Name of Creditor and Address

0354653562562

Jackson Twp Mua
135 Manhattan St
Jackson NJ 08527

Creditor Telephone Number *(732) 928-2222*

CREDITOR TAX ID #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

Check here replaces or amends a previously filed claim dated _____ if this claim

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)

Water and Sewer
1) 348485
\$ 1553.04
subject to 58

Your social security number _____
Unpaid compensation for services performed from _____ to _____ (date) (date)

2 DATE DEBT WAS INCURRED *5/20/2002*

3 IF COURT JUDGMENT, DATE OBTAINED

4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE

\$ _____ (unsecured)	\$ <i>5113.47</i> (secured)	\$ _____ (unsecured priority)	\$ <i>5113.47</i> (total)
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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 *Water & Sewer to be x. b/c*

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.

FILED
SEP 15 2003
BMC

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.

THIS SPACE FOR COURT USE ONLY

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

11/7

2 3 0 1 12

AUG 4 2003

DATE SIGNED
9/2/03

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)

Juan Garcia Supervisor of Billing

Fleming Companies Claim



12223

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

Utility Charge Search

Page 1
 Property 2080 WEST COUNTY LINE RD
 Owner SUPER FOODTOWN
 Blk/Lot 122 01/10 01/3002
 Date 09/12/03
 Include Subs Y
 Calculate Interest Y

JTMUA

Sub	Account	Service Location	Type	Yr/Prd	Due Date	Charges	Interest	Total Due
0	443002	2080 WEST COUNTY LINE RD	W	01/01	05/29/01	385 45	00	00
			S	01/01	05/29/01	290 98	00	00
			W	01/02	09/11/01	362 34	00	00
			S	01/02	09/11/01	251 56	00	00
			W	01/03	12/04/01	243 54	00	00
			S	01/03	12/04/01	30 00	00	00
			W	01/04	03/25/02	243 54	00	00
			S	01/04	03/25/02	30 00	00	00
			W	02/01	06/10/02	587 53	13 04	600 57
			S	02/01	06/10/02	281 77	00	281 77
			W	02/02	09/11/02	586 33	12 74	599 07
			S	02/02	09/11/02	262 68	00	262 68
			W	02/03	11/19/02	613 24	13 66	626 90
			S	02/03	11/19/02	297 15	00	297 15
			W	02/04	02/12/03	589 32	12 84	602 16
			S	02/04	02/12/03	266 51	00	266 51
			W	03/01	05/14/03	588 60	12 83	601 43
			S	03/01	05/14/03	266 51	00	266 51
			W	03/02	08/14/03	519 83	10 47	530 30
			S	03/02	08/14/03	178 42	00	178 42
		Total				6875 30	75 58	5113 47