UNITED STATES BANKRUPTCY COURT **PROOF OF CLAIM** FOR THE DISTRICT OF DELAWARE Bar Date Ref # 2-NVM-43314 In re Case Number NOTE This form should not be used to make a claim for an administrative Check box if you are expense arising after the commencement of the case. A request for payment aware that anyone else has of an administrative expense may be filed pursuant to 11 U S C § 503 filed a proof of claim relating to your claim Attach copy of Name of Creditor and Address statement giving particulars Check box if you have never received any notices 0354653582451 from the bankruptcy court in Delta Fire Systems Inc. this case PO Box 26587 1507 Pioneer Rd Check box if this address differs from the address on the Salt Lake City UT 84126 0587 envelope sent to you by the If you have already filed a proof of claim with the Creditor Telephone Number (60) 9 72 Bankruptcy Court or BMC you do not need to file again CREDITOR TAX I D # ACCOUNT OR OTHER NUMBER BY WHICH replaces Check here CREDITOR IDENTIFIES DEBTOR a previously filed claim dated or 10-FLEMT if this claim amends BASIS FOR CLAIM Goods sold Personal injury/wrongful death Retiree benefits as defined in 11 U S C § 1114(a) Services performed Taxes Wages salaries and compensation (Fill out below) Your social security number Money loaned 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 80 **AS OF PETITION DATE** (unsecured priority) (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 6 UNSECURED PRIORITY CLAIM 5 SECURED CLAIM Check this box if your claim is secured by collateral (including a Check this box if you have an unsecured priority claim right of setoff) Specify the priority of the claim Brief description of collateral Wages salaries or commissions (up to \$4 650*) earned within 90 days Real Estate before filing of the bankruptcy petition or cessation of the Debtor's business whichever is earlier 11 U S C § 507(a)(3) Motor Vehicle Contributions to an employee benefit plan 11 U S C § 507(a)(4) Other 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) Alimony maintenance or support owed to a spouse former spouse or Value of collateral \$ child 11 USC § 507(a)(7) Amount of arrearage and other charges at time case filed Taxes or penalties owed to governmental units 11 U S C § 507(a)(8) included in secured claim above if any \$ 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 THIS SPACE FOR COURT 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 **USE ONLY** BY HAND OR OVERNIGHT DELIVERY TO BY MAIL TO **Bankruptcy Management Corporation Bankruptcy Management Corporation**

SEP 1 5 2003

1330 East Franklin Avenue

El Segundo CA 90245

SIGN and print the name and title if any of the creditor or other person authorized to file this plaim (attach copy of power of attorney if any)

PO BOX 900

DATE SIGNED

El Segundo CA 90245-0900

Delta Fire Systems, Inc

Reconciliation of Billings and Payments Through April 30, 2003

Fleming Foods - SLC 900 W Pump Replacement Customer PO # 20020164 Job Number 1-30-48972

Original Contract

64,041 00

Change Orders

Revised Contract

\$ 64,041 00

Billing Date	Draw #	Amount	Payment Date	Check #	Amount
11/22/2002	1	41,774 11	12/19/2002	5505294175	41,774 11
12/19/2002	2	16,870 09	2/21/2003	5505312689	16 870 09
1/22/2003	3	684 00	3/3/2003	5505315611	684 00
2/21/2003	4	1,510 74			
2/21/2003	5	3 202 06			
Total Contract Bil	llings	\$ 64,041 00	Total Payments		\$ 59,328 20
			Remaing Balance	Due	\$ 4,712 80

e 09/08/2003 Accounting date No

ре	ID	Date	Amount	Current Column	Over 30 Column	Over 60 Column	Over 90 Column	Over 120 Column) <u>R</u>
eming Foods ()	ľexas)			972-906-2327	Filed	Bankruptcy 04	/01/03		
ce	304897200001	11/22/2002	41 774 11					41 774 1	1
receipt	5505294175	12/19/2002	41 774 11-					41 774 1	11-
ce	304897200002	12/19/2002	16 870 09					16 870 0)9
receipt	5505312689	02/21/2003	16 870 09-					16 870 0	9-
ce	304897200003	01/22/2003	684 00					684 0	0
receipt	5505315611	03/03/2003	684 00-					684 0	00-
се	304897200004	02/21/2003	1 510 74					1 510 7	4
ce	304897200005	02/21/2003	3 202 06					3 202 0)6
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REQUEST FOR PAYMENT

e Systems Inc outh Pioneer Road 26587 e City, UT 84126-0587	То	Fleming Foods (Tex 1945 Lakepoint Dr Lewisville, TX 7505		Invoice Drav Invoice date Period ending date Customer PO :	v 304897200 e 2/21/2003 e 2/28/2003)004
ming Foods 900 West Pump Repair		stomer Job #			+ 20020164	
ıyment						
amount	\$64,041 00					
anges	\$0 00	•	Project	30-48972		
ract amount		\$64,041 00		Fleming Foods 90	00 W Pump R	ер
ed to date		\$64,041 00	Contract date	10/8/2002		
ate	\$0 00			10/0/2002		
э	\$0 00		Architect			
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leted less retainage		\$60,838 94	Scope			
is requests	\$59,328 20					
est for payment		\$1,510 74				
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	\$0 00		CHANGE ORDER SUMMAI	₹ ,	ADDITIONS	DEDUCT
nt retainage	\$79 51		Changes approved in previous	ous		
t due		\$1,510 74	months by Owner			
act to bill	\$3,202 06		Total approved this Month	TOTALS		ļ
	40,202 00		NET CHANGES by Change			<u> </u>
			INCT CHANGES by Change	Older		
at the work performed and the materials s as thereof) between the undersigned and the owner						
Delta Fire Systems Inc	0	State Of UTA	АH	County Of SALT I	_AKE	
un / Mitchel	4	Subscribed an	d sworn to before me this	day of		
/8/03		Notary Public My commissio	n expires			

REQUEST FOR PAYMENT DETAIL

2 / Fleming Foods 900 W Pu Invoice 1760

Description	Total Contract Amount	Previously Completed Work	Work Completed This Period	Completed To Date	% Comp	Retair Balar
aterial	2 641 00	1 980 75	660 25	2 641 00	100 00	
ngineering	250 00		250 00	250 00	100 00	
brication	200 00		200 00	200 00	100 00	
eld	4 800 00	4 320 00	480 00	4 800 00	100 00	
bcontractor	56 150 00	56 150 00		56 150 00	100 00	2

Draw 304897200004

Detail Page 2

Period Ending Date 2/28/2003

otals	64,041 00	62 450 75	1,590 25	64 041 00	100 00	3

REQUEST FOR PAYMENT

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e Systems Inc uth Pioneer Road 26587 e City, UT 84126-0587	То	Fleming Foods (Tex 1945 Lakepoint Dr Lewisville, TX 7505	,	Invo Di Invoice d Period ending d	raw 30 date 2/	780 048972000 21/2003 28/2003	005
ning Foods 900 West Pump Repair	Cus	stomer Job #		Customer P	0# 20	0020164	
yment			Manager				
amount	\$64,041 00						
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act amount		\$64,041 00		Fleming Foods	900 W	Pump Re	p
ed to date		\$64,041 00	Contract date	10/8/2002			
ate	\$0 00	•	oomaa: aata	10/0/2002			
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eted less retainage		\$64,041 00	Scope				ļ
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onal charges	\$0 00	*****					
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retainage	-\$3,202 06		Changes approved in previous	ous			
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ct to bill	\$0 00	,	Total approved this Month	TOTALO			
	ΨΟΟΟ		NET CHANGES by Change	TOTALS Order		<u> </u>	
the work performed and the materials si thereof) between the undersigned and ie owner	applied to date the Fleming Fo	as shown on the above re ods (Texas) relating to the	present the actual value of the ac above referenced project I also	ccomplishment unde certify that the cont	er the tern tractor has	ns of the Cor s paid all amo	ntract (and all ounts previous
Delta Fire Systems Inc	2 ()	State Of UTA	н	County Of SAL	T LAKE		
zun Mitchl		Subscribed and	d sworn to before me this	day of			
1/8/03		Notary Public My commission					

REQUEST FOR PAYMENT DETAIL

2 / Fleming Foods 900 W Pu Invoice 1780

Description	Total Contract Amount	Previously Completed Work	Work Completed This Period	Completed To Date	% Comp	Retain Balan
aterial	2 641 00	2 641 00		2 641 00	100 00	
ngineering	250 00	250 00		250 00	100 00	
abrication	200 00	200 00		200 00	100 00	
eld	4 800 00	4 800 00		4,800 00	100 00	
ubcontractor	56 150 00	56 150 00		56 150 00	100 00	

Draw 304897200005

Detail Page 2

Period Ending Date 2/28/2003

otals	64 041 00	64 041 00	64 041 00	100 00	