


<b>UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE</b>		<b>PROOF OF CLAIM</b>
Name of Debtor <b>IN RE FLEMING COMPANIES, INC , et al</b>		Case Number <b>03-10945 (MFW)</b>
<p><b>Note</b> 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</p>		
Name of Creditor (The person or other entity to whom the debtor owes money or property) <b>New York Apple Sales, Inc</b> Name and Address where notices should be sent <b>Mary E Gardner, Esq</b> <b>Keaton &amp; Associates, P C</b> <b>1278 W Northwest Highway, Suite 903</b> <b>Palatine, Illinois 60067</b> Telephone number <b>847/934-6500</b>		<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
Account or other number by which creditor identifies debtor <b>Fleming - 4300</b>		Check here if <input type="checkbox"/> replaces this claim <input type="checkbox"/> amends a previously filed claim dated _____
<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 U.S.C. § 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> See attached chart		<b>3 If court judgment, date obtained</b>
<b>4 Total Amount of Claim at Time Case Filed</b> <u><b>\$807 08</b></u>		
If all or part of your claim is secured or entitled to priority also complete Item 5 or 6 below <input checked="" 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 checked="" 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 checked="" type="checkbox"/> Other <u><b>PACA Trust Assets pursuant to 7 USC §499e</b></u>  Value of Collateral <u><b>\$807 08</b></u>  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 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 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 U.S.C. § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse or child - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____) *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
<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 Sept 11 2003	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)  Mary E Gardner, Attorney	
Penalty for presenting fraudulent claim Fine of up to \$500,000 or imprisonment for up to 5 years, or both 18 U.S.C. §§ 152 and 3571		

**FILED**  
**SEP 15 2003**  
**BMC**  
 Fleming Companies Claim  
  
 13625

**PROOF OF CLAIM - EXHIBIT 1**

Claimant New York Apple Sales  
Date 09/15/03

Debtor Fleming Companies  
Terms Net 10 + 1 0% interest per month + collection costs per contract

P O NUMBER	INVOICE NUMBER	DATE OF TRANSACTION	PAYMENT DUE	NOTICE DATE	ELAPSED DAYS	INVOICE AMOUNT	ACCRUED INTEREST*	TRANSACTION TOTAL	TRUST AMOUNT
995336	58494	03/03/03	03/13/03	03/03/03	0	\$ 2,030 00	\$ 124 89	\$ 2,154 89	\$ 2,154 89
704201	59369	03/11/03	03/21/03	03/11/03	0	\$ 1,960 00	\$ 120 58	\$ 2,080 58	\$ 2,080 58
995929	59373	03/12/03	03/22/03	03/12/03	0	\$ 1,215 00	\$ 74 75	\$ 1,289 75	\$ 1,289 75
<b>704203</b>	59393	03/18/03	03/28/03	03/18/03	0	\$ 6,200 00	\$ 381 42	\$ 6,581 42	\$ 6,581 42
<b>995739</b>	59396	03/20/03	03/30/03	03/20/03	0	\$ 1,395 00	\$ 71 16	\$ 1,466 16	\$ 1,466 16
<b>995899</b>	59203	03/31/03	04/10/03	03/31/03	0	\$ 672 00	\$ 34 28	\$ 706 28	\$ 706 28
Collection Costs**								**	**
<b>TOTALS</b>						<b>\$ 13,472 00</b>	<b>\$ 807 08</b>	<b>\$ 14,279 08</b>	<b>\$ 14,279 08</b>
<b>Payments Received</b>									<b>\$ (13,472 00)</b>
<b>TOTAL REMAINING CLAIM</b>									<b>\$ 807 08</b>

\* Interest calculated through the date set forth above

\*\* Collection costs to be calculated through date of payment

**Proof of Delivery is attached for invoices in bold**