

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

PROOF OF CLAIM



In re

Case Number

Bar Date Ref #

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.

Name of Creditor and Address

Copiah County Tax Collector
100 Caldwell Dr
Hazlehurst MS 39083-3023

0354653000000

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.

Creditor Telephone Number ()

CREDITOR TAX ID #

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR
See Attached

Check here 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 \$ 29,351.00 (unsecured) \$ _____ (secured) \$ _____ (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.

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.

Government Agencies Oct 1 2003 See attached
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 25 2003

BMC

Filing Companies Claim



14364

DATE SIGNED

9-15-03

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).

Deborah M. Quinnelly Deputy TAX Coll
Deborah M. Quinnelly

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

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07/17/03

PAGE 1
10:29:07

DISPLAY DEVICE : JO
USER : DEBORAH

PPWPCL01 PERSONAL PROPERTY COLLECTIONS PPWPCL01/M4

PPIN 5403 YEAR 2002 DBA NAME PIGGLY WIGGLY OF C SPCS
VOIDEN ADDRESS 75TH 509 W MARION AVE
JD & TAX DIST 4400 MAILING NAME PIGGLY WIGGLY OF CS 75 BOWMAN
RECEIPT NO 536 ADDRESS 509 W MARION AVENUE
TOTAL ASSESSED 53257 C/S/7 CRYSTAL SPRINGS MS 39050 -

----- 1ST ----- 2ND ----- 3RD -----
OPEN/PAID BY CHECK : YES Y Y/N/C/P: YES Y/N/C/P: YES Y/N/C/P: BALANCES
COLLECTION DATE : 1 7 2003 : : :
COLLECTION TIME : 2 4 51 : : :
DRAWER/ID : R CHANDLER : : :

COUNTY 4684.66 : 4684.00 : : :
CITY 1970.25 : 1970.25 : : :
SCHOOL : : : : :
PENALTIES: COUNTY : : : : :
CITY : : : : :
SCHOOL : : : : :
PRINT FEE : : : : :
TOTAL 6658.91 . 6658.91 : : :

PARTIAL PAYMENT AMT TOTAL ALL COLLECTIONS 6658.91
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*Estimated
2003
7073.23*

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DISPLAY DEVICE : WC
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LRMLCLO1	LANDROLL TAX COLLECTIONS - COUNTY		LRWLCLO1/M4
PPIN 3058 Y5 2002	NAME	PIGGLY WIGGLY OF C S INC	
ID 0 TAX DIST 4400	509 W MARJON AVENUE	CRYSTAL SPRINGS MS 3	
OPEN/PAY BY CHECK :	Y Y Y/N/C/P:	Y-N Y/N/C/P:	REMAINING
COLLECTION DATE :	1 7 2003 :		BALANCE
COLLECTION TIME/TYP:	1 15 28 0 :		
DRAWL/ID :	2 CHANDLER :		
AD VAL 604.11 :	604.11 :		
FOREST :			
LEVFE :			
UPAIN :			
DRAIN :			
DRAIN :			
PENALTY :			
CALCULATED PENALTY :			
PRINT FFC :			
EXCESS BID :			
COUNTY 604.11 :	604.11 :		
CTY/SCH 253.35 :	253.35 :		
TOTAL 857.97 :	857.97 + :	=	857.97

*Estimated
2003
898.86*

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LRWLCL01 LANDROLL TAX COLLECTIONS - COUNTY LRWLCL01/M4
PPIN 3059 YR 2002 NAME PIGGLY WINGLY OF C S INC

JOB TAX DIST 4400	509 W MARION AVENUE	CRYSTAL SPRINGS PS 3
OPEN/PAYD BY CHECK : YES Y Y/N/L/P: YES Y/N/C/P: YES		REMAINING
COLLECTION DATE : 1 7 2003		BALANCE
COLLECTION TIME/TYP: 3 14 54 K		
DRAWER/ID : CHANDLER		
AD VAL 12093.73	12093.73	
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DRAIN		
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PENALTY		
CALCULATED PENALTY		
PRINT FEE		
EXCESS BID		
COUNTY 12093.73	12093.73	
CTY/SCN 5082.06	5082.06	
TOTAL 17175.99	17175.99 +	= 17175.99

*Estimated
2003
17994.62*

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LRMLCLO1 LANDFILL TAX COLLECTIONS - COUNTY LRMLCLO1/M4
 PPIID 3553 YR 2002 MAIN PIGGLY WIGGLY OF C 3 INC
 D D TAX DIST 4400 509 W MARICHA AVENUE CRYSTAL SPRINGS MS 3
 PLAN/PAID BY CHECK : YES Y Y/N/C/P: YES Y/N/C/P: YES Y/N/C/P: REMAINING
 COLLECTION DATE : 7 2003 : PALANCE
 COLLECTION TIME/TYP : 15 17 K :
 PAHER/ID : CHANDLER :
 D VAL 433.38 : 433.38 :
 PRFST :
 FVFE :
 RAIN :
 RAIN :
 RAIN :
 ENALTY :
 ACCUMULATED PENALTY :
 RINT FFE :
 XC-SS PID :
 QUITY 433.38 : 433.38 :
 TY/SCH 152.11 : 152.11 :
 TOTAL 615.49 : 615.49 + = 615.49
 PARTIAL PAYMENT AMOUNT
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 F13-SPREAD PARTIAL PAYMENT F21-DELETE 1 F22-DELETE 2 F23-DELETE 3

*Estimated
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DDMPCL01 PERSONAL PROPERTY COLLECTIONS PPWPCL01/M4

PPIN 958 YEA 2002 OPA NAME PIGGLY WEGGLY - HAZLEHURST

VAIDED ADDRESS /STR 150 TRADE LAIR

JOB TAX DIST 3110 MAILING NAME PIGGLY WEGGLY

RECEIPT NO 435 ADDRESS 150 TRADE LAN-

TOTAL ASSESSED 27417 C/S/7 HAZLEHURST IS 39033 -

----- 1ST ----- 2ND ----- 3RD -----

OPEN/PAID BY CHECK : Y S Y Y/N/C/P: Y-S Y/W/C/P: Y-S Y/W/C/P: BALANCES

COLLECTION DATE : 7 31 2003 :

COLLECTION TIME : 13 43 11 :

DRAWER/TD : 5 CHANDLER :

COUNTY 2764.29 : 2764.29 :

CITY : : :

SCHOOL : : :

PENALTIES. COUNTY : : :

CITY : : :

SCHOOL : : :

PRINT FL : : :

TOTAL 2764.29 : 2764.29 :

PARTIAL PAYMENT AMT TOTAL ALL COLL-CTIONS 2764.29

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*Estimated
2003
2739.46*