B10 (Official Form 10) (4/98)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

PROOF OF CLAIM

Name of Debtor: In re: Kmart Corporation, et al.

Case Number: 02-B02474

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 (The person or other entity to whom the debtor owes money or property): Daniel G. Kamin

Name and address where notices should be sent:
c/o John Michael Studeny, Esq.
Kabala & Geeseman
625 Liberty Avenue, 29th Floor
Pittsburgh, Pennsylvania 15222

Telephone number:

☐ 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 the address differs from the address on the envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

Account or other number by which creditor identifies debtor: 8031-82

Check here ☐ replaces if this claim ☐ amends a previously filed claim, dated: _____

1. Basis for Claim

☐ Goods sold
☐ Services performed
☐ Money loaned
☐ Personal injury/wrongful death
☐ Taxes
☒ Other Lease Rejection Damage Claim - Store No. 7546

☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
☐ Wages, salaries, and compensation (fill out below)

Your SS #: _____ _____ _____

Unpaid compensation for services performed from _____ (date) to _____ (date)

2. Date debt was incurred: 1-25-02

3. If court judgment, date obtained: N/A

4. Total Amount of Claim at Time Case Filed: $ 1,104,158.69

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 Desription of Collateral:

☐ Real Estate ☐ Motor Vehicle
☐ Other _____

Value of Collateral: $ _____

Amount of arrearage and other charges at time case filed included in secured claim, if any: $ _____

6. Unsecured Priority Claim.

☐ Check this box if you have an unsecured prioity claim
Amount entitled to priority $ _____
Specify the priority of the claim:

☐ Wages, Salaries, or commissions (up to $4300),* 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 $1,950.* 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 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

7. Credits: The amounts of all payments on this claim has been credited and deducted for 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 documents are not available, explain. If the documents are voluminous, attach a summary.

9. Date-Stamped Copy: To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

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2/25/02

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Date: 2-22-02

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): John Michael Studeny, Attorney for Claimant

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.

KMART STORE
RENO, PENNSYLVANIA

KMART NO. 7546

LANDLORD: DANIEL G. KAMIN
TENANT: KMART OF PENNSYLVANIA, L.P.
TERM OF LEASE ENDS 10-25-06

ITEM	**PERIOD**	**AMOUNT**
Rent ($14,750 per month)	2-1-02 - 10-25-06	$ 838,291.67
R.E. Taxes ($21,184 per year)	1-1-02 - 10-25-06	$ 102,031.43
CAM ($24,113 per year, computed at $ .35 per square foot per year)	1-22-02 - 10-25-06	$ 114,685.39
Insurance ($10,334 per year, computed at $ .15 per square foot per year)	1-22-02 - 10-25-06	$ 49,150.20
Total		**$** 1,104,158.69

625 Liberty Avenue, 29th Floor
Pittsburgh, PA 15222-3115
412.391.1334
Fax 412.391.6984
www.kglawpgh.com

John Michael Studeny
jstudeny@kglawpgh.com

February 22, 2002

Kmart Corporation
c/o Trumbull Services
P. O. Box 426
Windsor, Connecticut 06095

RE: Kmart Store No. 7546
Reno, Pennsylvania
Our File Number: 8031-82

Gentlemen:

Enclosed for filing is an original Proof of Claim for rejection damages on behalf of Daniel G. Kamin.

Kindly docket the claim, date-stamp the enclosed duplicate and return it to me in the enclosed envelope.

Very truly yours,

KABALA & GEESEMAN

John Michael Studeny

JMS/asg

Enclosures

KABALA & GEESEMAN
A Professional Corporation
Attorneys-At-Law