RM B10 (Official Form 10) (4/98) FILE ORIGINAL FOR CHAPTERS 7 and 11, IN DUPLICATE FO	OR CHAPTER 13, FOR DATE-ST	USBC, Illinois Northern (4/1/ AMPED COPY, SEE #9 BELOW	
United States Bankruptcy Court		CH 7 CH 13 CH 1' PLEASE CHECK CHAPTER	
Northern District of Illinois, East			
Name of Debtor KMART CORPORATION	Case Number 02B 0002474	PROOF OF CLAIM	
NOTE: This form should not be used to make a claim for an administrative en f the case. A "request" for payment of an administrative expense may be fi	expense arising after the commencement iled pursuant to 11 U.S. C. § 503	File Claim Form With:	
lame of Creditor (The person or other entity to whom the debtor	Check box If you are aware that anyone else has filed a proof of claim	United States Bankruptcy Court P. O. Box A3613	
Equal Employment Opportunity Commission	relating to your claim. Attach copy of statement giving particulars.	Chicago, Illinois 60690-3612	
Name and Address Where Notices Should be Sent Equal Employment Opportunity Commission	Check box if you have never received any notices from the		
Equal Employment Opportunity Commission	bankruptcy court in this case.	Creditor #	
Lawrence Kenyon, Trial Attorney	البيا .	Ordanor "	
50 Vantage Way, Suite 202, Nashville, TN 37228	from the address on the envelope sent	THIS SPACE IS FOR	
Telephone No. (615) 736-5784	to you by the court.	COURT USE ONLY	
Account or other number by which creditor identifies debtor:	Check here if this claim amends replaces a previously filed claim dated:		
(MART		•	
1. BASIS FOR CLAIM Goods sold Services performed	Wages, salaries, and compe	nsation (Fill out below)	
	Your social security number		
Money loaned Personal injury/wrongful death	le VII of Unpaid compensation for s	=-	
Taxes Other Alleged VIO of The	1964. as		
Retiree benefits as defined in 11 U.S. C. § 1114 (a)	from(date)	to(date)	
amended, 42 USC, Sec 2000 et. seq. 2. DATE DEBT WAS INCURRED: On going from 8/1/00	3. IF COURT JUDGMENT, DATE		
or additional charges. 5. Secured claim	6. Unsecured Priority Claim		
Check this box if your claim is secured by collateral (including a right of setoff).	Check this box if you have an unsecured priority claim Amount entitled to priority \$ UNLIQUIDATED Specify the priority of the claim:		
Brief Description of Collateral:	Wages, salaries, or commissions (up to \$4,300), *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)		
Real Estate	Contributions to an employee benefit plan-11 U.S.C. § 507(a)(4)		
Motor Vehicle	Up to \$1,950+ of deposits toward purchase, lease, or rental of		
Other	property or services for personal, family, or household use -		
Value of collateral: \$	11 U.S.C. § 507(a)(6) Alimony, maintenance, or support owed to a spouse, former spou or child -11 U.S.C. § 507(a)(7)		
Amount of arrearage and other charges at time case filed included	Taxes or penalties owed to	governmental units11 U.S.C. § 507(a)(8	
in secured claim above, if any: \$	Other—Specify applicable paragraph of 11 U.S.C. § 507(a) *Amounts are subject to adjustment on 4/1/98 and every 3 years thereat with respect to cases commenced on or atter the date of adjustment.		
7. CREDITS: The amount of all payments on this claim has b	een credited and deducted for the	THIS SPACE ISEOR	
purpose of making this proof of claim. 8. SUPPORTING DOCUMENTS: Attach copies of supporting	•	UNITED STACEBUBANKSBURDWYCO' WORTHERN DISTRICT OF ILLING	
notes, purchase orders, invoices, itemized statements of run judgments, mortgages, security agreements, and evidence or	ning accounts, contracts, court	FEB 2 5 2002	
judgments, mortgages, security agreements, and evidence of SEND ORIGINAL DOCUMENTS. If the documents are not as	vailable, explain. If the documents		
are voluminous, attach a summary. ANY ATTACHMENT MU	JST BE 8-1/2" BY 11" K	ENNETH & GARDNER CLE	
DATE-STAMPED COPY: To receive an acknowledgment of stamped, self-addressed envelope and an additional copy of the stamped.	of the filing of your claim, enclose	MAILROOM - KC	
Date: Sign and print the name and title, if any, of the cred	ditor or other person authorized to file		
1 this claim (attach copy of power of attorney, if any) Lawrence Kenyon, Trial Attorney	me	2125102 mL3	
Fenalty for presenting traudulent claim: Fine of up to \$500,000 or im	nprisonment for up 10/5 years, or both.	474510	

IN THE UNITED STATES BANKRUPTCY COURT RECEIVED NORTHERN DISTRICT OF ILLINOIS

NORTHERN DISTRICT OF ILLINOIS

FEB 2 5 2002

IN RE: KMART CORPORATION Debtor.))))	KENNETH S. GARDNER, CLERK MAILROOM - KC Bankruptcy Case No. 02B 0002474
-		

MEMORANDUM IN SUPPORT OF PROOF OF CLAIM

In support of its Proof of Claim as a creditor in the above-referenced Chapter 11 petition, the Equal Employment Opportunity Commission submits the following:

- A Charge of Discrimination was filed with this agency on December 10,
 2001. A copy of the charge is attached as Exhibit 1.
- 2. Name of Charging Party

Donna L. Stephens

3. <u>EEOC Charge Number</u>

253-A2-00276

4. Date of Violation

February 21, 2001

5. Name and Location of Respondent

KMART CORPORATION 3100 West Big Beaver Road Troy, MI 48084

6. Nature of Unlawful Act

Disparate treatment in discharge on the basis of sex (female). Disparate treatment in terms and conditions on the basis of sex (female).

7. Basis of Violation

Sex Discrimination

8. Statute Violated

Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. §2000e et. seq.

9. <u>Demand</u>

The EEOC's Proof of Claim requests all applicable back pay and benefits, with pre-petition interest; all applicable post-petition wages, salary, or benefits; all compensatory and punitive damages allowable.

Respectfully Submitted,

NICHOLAS M. INZEO

Acting Deputy General Counsel

GWENDOLYN YOUNG REAMS

Associate General Counsel

KATHARINE W. KORES

Regional Attorney BPR No. 6283

FAYEA. WILLIAMS

Supervisory Trial Attorney BPR NO. 11730

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION 1407 Union Avenue Suite 621 Memphis, Tennessee 38104 (901) 544-0088

LAWRENCE KENYON

Trial Attorney MS Bar No. 10105

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION 50 Vantage Way, Suite 202 Nashville, Tennessee37228 (615) 736-5784

CERTIFICATE OF SERVICE

I, Lawrence Kenyon, do hereby certify that I have this day served a true and correct copy of the above and foregoing, <u>Proof of Claim</u>, <u>Memorandum in Support of Proof of Claim</u>, and Supporting documents by U. S. Mail, proper postage prepaid, addressed to their usual business address, to the following:

John WM Butler, Esq. Attorney for Debtor 333 W Wacker Drive Chicago, IL 60606-1220

Ms. Donna L. Stephens 7877 Elm Springs Road Orlinda, TN 37141

Dated: _

Lawrence Kenyon

Trial Attorney

MS Bar No. 10105

Equal Employment Opportunity Commission 50 Vantage Way, Suite 202 Nashville, TN 37228 (615) 736-5784

CHARGE OF DISCRIMINAT		GENCY	CHARGE NUMBER			
This form is affected by the Privacy Act of 1974; See Privacy completing this form.		FEPA EEOC	253A200276			
TENNESSEE HUMAN RIGHTS COMMISSION and EEOC State or local Agency, if any						
NAME (Indicate Mr., Ms., Mrs.)	H		HONE (Include Area Code)			
Ms. Donna L. Stephens street address city, state an	D ZIP CODE	(615) 654-9020 DATE OF BIRTH			
7877 Elm Springs Road, Orlinda, TN 37	141		10/27/1962			
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY APPRENTICESHIP COMMITTEE,						
STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.) NAME NUMBER OF EMPLOYEES, MEMBERS TELEPHONE (Include Area Code)						
	Cat D (501 +)		615) 384-1141			
street address city, state an 2106 Memorial Blvd., Springfield, TN			COUNTY 147			
NAME	71.4.5		JMBER (Include Area Code)			
K-Mart Corporation, Legal Dept. STREET ADDRESS CITY, STATE AN	D ZIP CODÉ	(248) 643-1000 county			
3100 West Big Beaver, Troy, Mi 48084 CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es)) DATE DISCRIMINATION TOOK PLACE						
		DATE DISCF EARLIEST	IMINATION TOOK PLACE LATEST			
RACE COLOR X SEX RELIGION NATIONAL ORIGIN RETALIATION AGE DISABILITY OTHER (Specify)			001 02/28/2001			
			NUING ACTION			
THE PARTICULARS ARE (If additional space is needed, attach exti	ra sheet(s)):					
I. I began working for the K-Mart Corporation on 9/12/1985, and transferred to the Springfield, TN, Store, # 3782, on 3/17/00, as the Store Manager. On 2/27/Q1, my employment was terminated. They employ more than 15 people.						
II. I was accused of "strong arming" an employee and my employment was terminated after a cursory investigation was conducted. A male manager at the Charlotte Pike Store in Nashville was accused of grabbing an employee, and no investigation was conducted into the complaint filed, nor was any type of disciplinary action ever taken against this male manager.						
III. I feel that I was discriminated against because of my gender (female), in violation of Title VII of the Civil Rights Act of 1964, as amended.						
I want this charge filed with both the EEOC and the State or	NOTARY - (When necessary	y for State a	nd Local Requirements)			
local Agency, if any. I will advise the agencies if I change my		have read the	above charge and that			
address or telephone number and cooperate fully with them in the processing of my charge in accordance with their procedures.	it is true to the best of	my knowledge	, information and belief.			
I declare under penalty of perjury that the foregoing is true and correct.	SIGNATURE OF COMPLA					
Date Charging Party (Signature)	SUBSCRIBED AND SWO (Month, day and year)	DRN TO BEI	ORE ME THIS DATE			
EEOC FORM 5 (Rev. 07/99)		P11 1	E CORV			