UNITED STATES BANKRUPICY COURT Northern District, Eastern Division New of Check or the short see by used requires a time the an abundance expense adding after the countercease of the co	ORM B10 (Official Form 10)(4/98)	CVCOUPT	PROOF OF CLAIM
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Check box if you are awarehuled statement of all powers of profits of the claim. Attach itemized statement of all interest or additional charges. Check this box if your claim is secured by collateral (including a right of action). Check this box if your claim is secured priority, also complete tiem 5 or 6 below. Attach Amount of Collateral: \$	(J) E. This form emption are to use a distillustrative expenses may be illed	F	ILED
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Attach copy of statement group particulars	wes money or property); od i no	claim relating to your claim.	CD 2 5 2002
Gold Silverman & Goldenberg 1500 John F. Kennedy Blvd. Solite 1506 Phila., PA 19102 Check box if you have newell process from the bankruptcy court in this case. Check box if the address of iffers from the address of iffers from the address of ithe newelope sent to you by the court. Check box if you have newelope sent to you by the court. Check box if you have newelope sent to you by the court. Check box if the address of iffers of the address of the newelope sent to you by the court. Check box if you have newelope sent to you by the court. Check there is Creptee the you by the court. Check box if you have newelope sent to you by the court. Check there is Creptee the your sent to you by the court. Check there is Creptee the your sent to you by the court. Check the you have a compensation (fill out below) Your SS #: Unpaid compensation for services performed from (date) Check this box if you relaim is secured or entitled to priority, also complete ltem 5 of 6 below. Check this box if your claim is secured or entitled to priority, also complete ltem 5 of 6 below. Check this box if your claim is secured by collateral (including a right of sector). Check this box if your claim is secured by collateral (including a right of sector). Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check this box if you have an unsecured priority claim Check	Mary Danc Courses should be sent.	Attach copy of statement giving	FB 7 2 7007
Suite 1506 Phila., PA 19102 Telephone # (215) 563-6067 Recover or other number by which creditor identifies debtor: Check box if the address on the envelope sent to you by the court.	Gold. Silverman & Goldenberg		NED OLEDK
Phila., PA 19102	1500 John F. Kennedy Blvd.	Check box if you have next NNETH	S. GARDNER, CLERK
Phila., PA 19102 Check box if the address differs from the address on the envelope sent to you by the count.	Suite 1506	received any notices from the	IFBOOM = KO
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Account or other number by which creditor identifies debtor: Check here if	Telephone # (215) 563-6067	sent to you by the court.	Only
Basis for Claim		Charle have if	
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Services performed Money loaned Personal injury/wrongful death - Settlement Loane Loan		Wages, salaries, and compensation (fi	ill out below)
Personal injury/wrongful death — settlement from		Your SS #:	rformed
Personal injury/wrongful death		Unpaid compensation for services per	Holika
2. Date debt was incurred: 5/8/96 4. Total Amount of Claim at Time Case Filed: 1 also part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. 1 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. 1 Check this box if your claim is secured by collateral (including a right of setoff). 2 Breal Fistate Didor Vehicle 2 Other 3 If court judgment, date obtained: 5 37,500.00 6 Unsecured Priority Claim. 1 Check this box if you have an unsecured priority claim Amount entitled to priority 5. Specify the priority of the claim: 2 Pacify the priority of the claim: 3 Wages, salaries, or commissions (up to \$4,300), *earned within 90 de before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. \$507(a)(3). 2 Contributions to an employee benefit plan - 11 U.S.C. \$507(a)(4). 3 Up to \$1,950 of deposits owed to a spouse, former spouse, while -11 U.S.C. \$500 of (a)(3). 4 Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ 4 Amounts are subject to adjustment an 41/101 and every 3 years there with respect to cases commenced on or after the date of adjustment. 5 Amounts are subject to adjustment an 41/101 and every 3 years there with respect to cases commenced on or after the date of adjustment. 6 Amounts are subject to adjustment an 41/101 and every 3 years there 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 or running accounts, contracts, court judgments, mortgages, security agreements are not available, explain. If the documents are volumious, attach a summary. 5 Dat	Personal injury/wrongful death	(date) (date)	
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• 1 S years or both, 18 U.S.C. §§ 152 and 3571.	12/20/02/ 1/18 . 6/18 6/		1810000 1116
Grandel and the Company of the Compa	Dine of up to \$00.00	or imprisonment for up to 5 years, or both.	18 U.S.C. §§ 152 and 3571.

GROUND PRINTING CONTAINS ARTIFICIAL WATER MARK - IF NOT PRESENT, DO NOT CASH.

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PAY TO THE ORDER OF FIRST REPUBLIC BANK PHILADELPHIA, PA 19103 036002247 FOR DEPOSIT ONLY Gold Silverman & Goldenberg Escrow Account 109 004 6

REPUBLIC BANK (215) 563-3600

NOTICE OF RETURNED DEPOSITED ITEMS

1090046 DATE

1/29/02

IHE_DEPOSITED_ITEMS_LISTED_WERE_RETURNED_AND_CHARGED_ID_YOUR_ACCOUNI RFT!!RN REASON 37,500.00 RETURN REASON NO REASON GIVEN ACCOUNT KMART PAYOR

TOTAL ITEMS CHARGED BACK TO YOUR ACCOUNT: PLEASE DEDUCT A HANDLING CHARGE OF:

37,500.00

2 PENN CENTER PLAZA SUITE 1506 GOLD SILVERMAN & GOLDENBERG ESCROW ACCOUNT

1500 JOHN F KENNEDY BLVD PHILADELPHIA PA 19102



01/10/2002 831845

CHECK NO. 0001333449

\$37500.00

THIRTY SEVEN THOUSAND FIVE HUNDRED AND OG/100 DOLLARS

SILVERMAN & GOLDENBERG THEIR ATTORNEYS MARY JANE AND FRANK GODINO & GOLD

ORDER

First Union Bank of Delaware

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Law Offices

Gibley and McWilliams

A Professional Corporation

610 E. Baltimore Pike, Suite 200

P.O. Box 1107

Media, PA 19063-0807

(610) 627-9500 (610) 627-2400 (fax)

November 20, 2001

Via Fax and Regular Mail 215-563-5293 Wayne R. Goldenberg, Esquire GOLD, SILVERMAN & GOLDENBERG Two Penn Center Plaza Suite 1506 1500 JFK Blvd. Philadelphia, PA 19102

> RE: Godino v. Kmart Corporation MCCP No.98-07388

Dear Mr. Goldenberg:

This will confirm that we have reached a full and final settlement of all claims in this matter for \$37,500.00. Enclosed please find a General Release for signature by Mr. and Mrs. Godino. Enclosed is an Order To Settle, Discontinue and End to be signed and returned for filing. I also enclose a W-9 Form to be completed and returned to me. Thank you.

Very truly yours,

GIBLEY AND McWILLIAMS, P.C.

/: W Kally MaWi

WKM/mt Encl.

Sedgwick Claims Management Services, Inc 3270 West Big Beaver Suite 2W Troy, MI 48084

CHECK NO. CHECK AMT DATE 0001333449 37,500.00 01/10/2002

TAX ID PAYEE MARY JANE AND FRANK GODINO & GOLD 231900000

PAGE SCMS UNIT

183 Sedgwick Claims Management Services

02000953183183 6,496

001 OF 001

GIBLEY AND MCWILLIAMS 610 E BALTIMORE PIKE SUITE 200 PO BOX 1107 MEDIA, PA 19063-0807

TSSN Claim Number Loss Date Claimant Name

O5/OB/1996 B118022878-0001-01
Description: Settlement of all claims GODINO, MARY JANE

Comment: FULL AND FINAL SETTLEMENT OF ALL CLAIMS 37500.00 Amt Paid: Dates: 05/08/1996 - 05/08/1996

E1991 FRM (02-28-0



ORIGIN 1831845

DATE 01/10/2002

CHECK NO. 0001333449

\$37500.00

311

THIRTY SEVEN THOUSAND FIVE HUNDRED AND 00/100 DOLLARS

MARY JANE AND FRANK GODING & GOLD SILVERMAN & GOLDENBERG THEIR ATTORNEYS

THE ORDER OF

Wilmington, DE

TO

First Union Bank of Delaware

VOID AFTER 60 DAYS

Law Offices

Gibley and McWilliams

A Professional Corporation

610 E. Baltimore Pike, Suite 200

P.O. Box 1107

Media, PA 19063-0807

(610) 627-9500 (610) 627-2400 (fax)

January 15, 2002

Wayne R. Goldenberg, Esquire GOLD, SILVERMAN & GOLDENBERG Two Penn Center Plaza Suite 1506 1500 JFK Blvd. Philadelphia, PA 19102

> RE: Godino v. Kmart Corporation MCCP No.98-07388

Dear Mr. Goldenberg:

Enclosed please find the check of Kmart Corporation in the sum of \$37,500.00 representing full and final settlement of the above captioned matter.

Very truly yours,

GIBLEY AND McWILLIAMS, P.C.

W. Kelly McWilliams

WKM/mt Encl.