

United States Bankruptcy Court		PROOF OF CLAIM	
Northern DISTRICT of IL			
In re (Name of Debtor) KMART CORPORATION, ET AL.		Case Number 02 B 02474	
<small>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.</small>			
Name of Creditor (The person or other entity to whom the debtor owes money or property) Continental Casualty Company As Agent for: UIDC Altare Corp.		<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 checked="" 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.	
Name and Address Where Notices Should be Sent UIDC Altare Corp. C/o Continental Casualty Company P.O. Box 905 Monmouth Junction, NJ 08852-0905 ATTN: DENISE FIRELLI Telephone No. (732) 398-4514			
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 008965873		Check here if this claim replaces Amends a previously filed claim, Dated:	
1. BASIS FOR CLAIMS <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 (Describe briefly) <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 social security number _____ Unpaid compensation for services performed From _____ to _____ (date) (date)			
2. DATE DEBT WAS INCURRED 11/01/01		3. IF COURT JUDGMENT, DATE OBTAINED:	
4. CLASSIFICATION OF CLAIM. Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED. <input type="checkbox"/> SECURED CLAIM \$ _____ Attach evidence of perfection of security interest Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly) Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ _____ <input checked="" type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$207,239.56 A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim. <input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ _____ Specify the priority of the claim. <input type="checkbox"/> Wages, salaries, or commissions (up to \$2000), earned not more than 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 \$1,800* 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—U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties of governmental units—11 U.S.C. § 507(a)(7) <input type="checkbox"/> 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.			
CLAIM AT TIME \$207,239.56 \$ _____ CASE FILED: (Unsecured) (Secured) (Priority)		\$207,239.56 (Total)	
<input type="checkbox"/> Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.			
6. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this Proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.			
7. SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized Statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not Available, explain. If the documents are voluminous, attach a summary.			
8. TIME-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.			
DATE 3/13/02		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) Denise Firelli Claims Technician	

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

THIS SPACE IS FOR
COURT USE ONLY **KP 682**

3/16/02

anges:
Customer ID: KMART - KMART
Customer Class: First - Last
Salesperson ID: First - Last
Sales Territory: First - Last
User-Defined 1: First - Last
Account Type: Open Item
Customer Name: First - Last
ZIP Code: First - Last
State: First - Last
Telephone: First - Last
Posting Date: First - Last
Short Name: First - Last

Exclude: Zero Balance, No Activity, Fully Paid Documents, Unposted Applied Credit Documents

Customer: by Customer Name

Document: by Document Number

* - Indicates an unposted credit document that has been applied.

Customer	Name	Account Type	Aged As of						
Document Number	Type	Date	Amount	Discount	Writeoff	0-30 Days	31 - 60 Days	61 - 90 Days	91 and Over
KMART	KMART FASHIONS	Open Item	1/22/2002						
User-Defined 1:		Salesperson: HH	Territory: NATIONAL						
INV-15493	SLS 11/1/200/	\$289.20						\$289.20	
INV-15494	SLS 11/1/200/	\$32,679.60						\$32,679.60	
INV-15495	SLS 11/1/200/	\$85,198.32						\$85,198.32	
INV-15496	SLS 11/1/200/	\$1,446.00						\$1,446.00	
INV-15497	SLS 11/1/200/	\$30,770.88						\$30,770.88	
INV-15692	SLS 11/1/200/	\$2,892.00						\$2,892.00	
INV-15693	SLS 11/1/200/	\$12,233.16						\$12,233.16	
INV-15694	SLS 11/1/200/	\$40,863.96						\$40,863.96	
Contact:		(000) 000-0000	Ext. 0000						
Terms: NET 10 EOM + 30		Totals:	\$206,373.12			\$0.00	\$0.00	\$206,373.12	\$0.00
Credit:	Unlimited								
1 Customer(s)		Grand Totals:	\$206,373.12			\$0.00	\$0.00	\$206,373.12	\$0.00

UIDC/ALTARE,
1003 TIBBETTS LANE

NEW WINDSOR

MD 21776

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15493

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS
WHSE #03, DEPT #19, DIV #02
7373 WEST SIDE AVE
NORTH BERGEN NJ 07047

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290474	KMART	HH	ROADWAY	NET 10 EOM + 30	11/1/01	18,420			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
120	120		0 8410	MENS HK SKI GLOVE ITEM 4601	STYLE 193 \$0.00	\$2.41	\$289.20		

ALL INVOICES
SUBMITTED ARE/WERE
DUE UNDER TERMS
ON JAN. 10, 2002

APPT #1; APPT DATE 11/9/01
5 CARTONS 40#
WHSE#3
Thank You For Your Business...

Subtotal	\$289.20
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$289.20

UIDC/ALTARE
1003 TIBBETTS LANE

NEW WINDSOR

MD 21776

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15494

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS DEPT 19 DIV 2
CARSON DIRECT DC#8581
23000 S. AVALON BLVD.
CARSON CA 90745

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290474	KMART	HH	ROADWAY	NET 10 EOM + 30	11/1/01	18,421			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
13,560	13,560		0 8410	MENS HK SKI GLOVE ITEM 4601 STYLE 193	\$0.00	\$2.41	\$32,679.60		

DUE 1/10/02

APPT #2 APPT DATE: 11/9/01
565 CARTONS 4520#
WHSE #4
Thank You For Your Business...

Subtotal	\$32,679.60
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$32,679.60

UIDC/ALTARE
1003 TIBBETTS LANE

NEW WINDSOR

MD 21776

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15495

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS DEPT 19 DIV 02
DC FOREST PARK #8937
5265 OLD DIXIE HIGHWAY
FOREST PARK GA 30050

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290474	KMART	HH	ROADWAY	NET 10 EOM + 30	11/1/01	18,422			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
35,352	35,352		0 8410	MENS HK SKI GLOVE ITEM 4601 STYLE 193	\$0.00	\$2.41	\$85,198.32		

Due 1/10/02

APPT #3; APPT DATE 11/9/01
1473 CARTONS 11784#
WHSE #6
Thank You For Your Business...

Subtotal	\$85,198.32
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$85,198.32

UIDC/ALTARE
1003 TIBBETTS LANE

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15496

NEW WINDSOR

MD 21776

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS # 8936
WHSE #17 DEPT #19 DIV #02
4400 S. HAMILTON ROAD
GROVEPORT OH 43125

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290474	KMART	HH	ROADWAY	NET 10 EOM + 30	11/1/01	18,423			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
600	600		0 8410	MENS HK SKI GLOVE ITEM 4601 STYLE 193	\$0.00	\$2.41	\$1,446.00		

DUE 1/10/02

APPT #4 APPT DATE: 11/9/01
25 CARTONS 200 #
WHSE #17
Thank You For Your Business...

Subtotal	\$1,446.00
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$1,446.00

UIDC/ALTARE
1003 TIBBETTS LANE

NEW WINDSOR

MD 21776

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15497

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS #8580
WHSE #03, DEPT #19, DIV #02
7373 WEST SIDE AVE
NORTH BERGEN NJ 07047

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290399	KMART	HH		NET 10 EOM + 30	11/1/01	18,424			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
12,768	12,768		0 8410	MENS HK SKI GLOVE ITEM 4302 STYLE 193	\$0.00	\$2.41	\$30,770.88		

DUE 1/10/02

WHSE #3 DEPT 19, DIV 02
APPT DATE: 11/9/01; APPT #1
1064 CARTONS 4256#
Thank You For Your Business...

Subtotal	\$30,770.88
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$30,770.88

UIDC/ALTARE
1003 TIBBETTS LANE

NEW WINDSOR

MD 21776

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15692

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS
CARSON DIRECT DC#8581
23000 S. AVALON BLVD.
CARSON CA 90745

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290399	KMART	HH		NET 10 EOM + 30	11/1/01	18,619			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
1,200	1,200		0 8410	MENS HK SKI GLOVE ITEM 4602 STYLE 193	\$0.00	\$2.41	\$2,892.00		

DUE 1/10/02

WHSE #4 DEPT 19, DIV 02
APPT DATE: 11/9/01; APPT #2
100 CARTONS 400 #
Thank You For Your Business...

Subtotal	\$2,892.00
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$2,892.00

UIDC/ALTARE
1003 TIBBETTS LANE

NEW WINDSOR

MD 21776

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15693

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS
DC FOREST PARK #8937
5265 OLD DIXIE HIGHWAY
FOREST PARK GA 30050

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290399	KMART	HH		NET 10 EOM + 30	11/1/01	18,620			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
5,076	5,076		0 8410	MENS HK SKI GLOVE ITEM 4602 STYLE 193	\$0.00	\$2.41	\$12,233.16		

DUE 11/10/02

WHSE #06 DEPT 19, DIV 02
APPT DATE: 11/9/01; APPT #6
423 CARTONS 1692#
Thank You For Your Business...

Subtotal	\$12,233.16
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$12,233.16

UIDC/ALTARE
1003 TIBBETTS LANE

NEW WINDSOR

MD 21776

REMIT TO:
UIDC ALTARE CORP.
P.O. BOX 890576
CHARLOTTE, NC. 28289

Invoice INV-15694

Date
11/1/01

Page: 1

Bill To:
KMART FASHIONS
7373 WEST SIDE AVENUE

NORTH BERGEN NJ 07047

Ship To:
KMART FASHIONS
WHSE #17 DEPT #02 DIV #19
4400 S. HAMILTON ROAD
GROVEPORT OH 43125

Purchase Order No.	Customer ID	Salesperson ID	Shipping Method	Payment Terms	Req Ship Date	Master No.			
290399	KMART	HH		NET 10 EOM + 30	11/1/01	18,621			
Ordered	Shipped	B/O	Item Number	Description	Discount	Unit Price	Ext. Price		
16,956	16,956		0 8410	MENS HK SKI GLOVE ITEM 4602 STYLE 193	\$0.00	\$2.41	\$40,863.96		

DUE 11/10/02

WHSE #17 DEPT 19, DIV 02
APPT DATE: 11/9/01; APPT #4
1413 CARTONS 5652#
Thank You For Your Business...

Subtotal	\$40,863.96
Misc	\$0.00
Tax	\$0.00
Freight	\$0.00
Trade Discount	\$0.00
Total	\$40,863.96



INSURANCE IN TOUCH WITH BUSINESS

PO Box 905 Monmouth Junction NJ 08852-0905

Denise Firelli

Claims Technician

Telephone 732-398-4514

Facsimile 732-398-5232

March 13, 2002

Kmart Corporation
C/o Trumbull Services
PO Box 426
Windsor, CT 06095

Re: Continental Casualty Co. As Agent for:
UIDC Altare Corp.

Vs: Kmart Corporation
Case #02- B 02474
Our file #008965873

Dear Clerk:

We insure the accounts receivable of the captioned creditor by virtue of a Policy of Credit Insurance. We are enclosing our insured's executed proof of claim in duplicate together with supporting documentation. Please acknowledge receipt of this filing by stamping & returning the duplicate claim form in the enclosed postage paid envelope. Our address should be used in all future correspondence.

Sincerely yours,

Denise Firelli

Enc.