

United States Bankruptcy Court **PROOF OF CLAIM**

NORTHERN DISTRICT OF ILLINOIS

In re (Name of Debtor)
KMART CORPORATION

Case Number
02-02474

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)
LANG ASSOCIATES INC.

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.

Name and Address Where Notices Should be Sent
LANG ASSOCIATES INC.
P.O. Box 905
Monmouth Junction, NJ 08852-0905
ATTN: DAVID MILLER
Telephone No. (732) 398-4522

THIS SPACE IS FOR COURT USE ONLY

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR
008965873

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

1 BASIS FOR CLAIMS
 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
5/3/01 TO 2/28/02

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

SECURED CLAIM \$ _____
Attach evidence of perfection of security interest
Brief Description of Collateral:
 Real Estate Motor Vehicle Other (Describe briefly)

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

UNSECURED NONPRIORITY CLAIM \$ **\$122,167.28**

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

UNSECURED PRIORITY CLAIM \$ _____

Specify the priority of the claim
 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)
 Contributions to an employee benefit plan--11 U.S.C § 507(a)(4)
 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)
 Alimony, maintenance, or support owed to a spouse, former spouse, or child - U.S.C § 507 (a) (7)
 Taxes or penalties of governmental units--11 U.S.C § 507(a)(7)
 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 CASE FILED: \$ **122,167.28** (UNSECURED) \$ _____ (SECURED) \$ _____ (Priority) **\$ 122,167.28** (Total)

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 **3/5/02** 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)
David D. Miller
DAVID MILLER
CLAIMS TECHNICIAN

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1CP872
FILED
3/28/02
RECEIVED 29 PM 1:14
BANKRUPTCY

3-22-202 3:24PM

FROM LANG*ASSOCIATES*INC 1+248+332+5556

LANG ASSOCIATES
1591 EAST HIGHWOOD
PONTIAC, MICHIGAN 48340
STATEMENT OF ACCOUNT
AS OF JANUARY 22, 2002

Date: March 15, 2002

TERMS
NET 30 DAYS

TO: Kmart International Headquarters
 Accounts Payable
 P.O. Box 5003
 Troy, MI. 48007

Customer Number:

DATE	INVOICE NO.	TR	EXPLANATION	CHARGES	CREDITS	BALANCE
05/03/01	17458			\$4,923.50		
06/27/01	18620			\$1,145.00		
07/05/01	1912			\$250.90		
07/12/01	1945			\$139.20		
08/10/01	20131			\$614.01		
08/16/01	2165			\$188.40		
08/16/01	2167			\$490.60		
08/27/01	2309			\$290.00		
08/28/01	2317			\$951.00		
09/10/01	2437			\$209.88		
09/14/01	2378			\$930.30		
09/14/01	2380			\$143.50		
09/14/01	2381			\$104.50		
09/14/01	2382			\$44.40		
09/14/01	2383			\$104.50		
10/09/01	2657			\$166.02		
10/09/01	2659			\$609.20		
10/12/01	2684			\$292.90		
10/12/01	2585			\$292.90		
10/15/01	2589			\$62.50		
10/15/01	2590			\$62.50		
10/15/01	2592			\$208.80		
10/15/01	2593			\$250.90		
10/26/01	2790			\$1,279.00		
10/26/01	2742			\$452.50		
10/26/01	2743			\$118.80		
10/30/01	2889			\$104.94		
10/30/01	2890			\$104.94		
11/13/01	2918			\$544.70		

3-22-202 3:24PM

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STATEMENT OF ACCOUNT
AS OF JANUARY 22, 2002**

Date: March 15, 2002

TERMS
NET 30 DAYS

TO: Kmart International Headquarters
Accounts Payable
P.O. Box 6003
Troy, Mi. 48007

Customer Number:

DATE	INVOICE NO.	TR	EXPLANATION	CHARGES	CREDITS	BALANCE
11/27/01	3029			\$290.00		
11/27/01	3030			\$104.94		
11/27/01	23793			\$5,963.16		
11/29/01	3031			\$1,279.00		
11/30/01	3039			\$1,279.00		
11/30/01	23998			\$512.03		
11/30/01	23999			\$512.03		
11/30/01	24000			\$512.03		
11/30/01	24002			\$512.03		
11/30/01	24003			\$512.03		
11/30/01	24004			\$512.03		
11/30/01	24005			\$512.03		
11/30/01	24006			\$512.03		
11/30/01	24007			\$512.03		
11/30/01	24008			\$512.03		
11/30/01	24013			\$512.03		
12/04/01	24047			\$512.03		
12/05/01	3061			\$1,279.00		
12/06/01	3067			\$1,569.00		
12/06/01	3068			\$290.00		
12/07/01	3077			\$1,569.00		
12/10/01	24177			\$6,197.31		
12/10/01	24178			\$6,111.44		
12/10/01	24179			\$5,725.00		
12/10/01	24180			\$6,197.31		
12/10/01	24181			\$4,866.26		
12/10/01	24182			\$4,369.32		
12/11/01	3094			\$580.00		
12/11/01	3123			\$441.00		

3-22-202 3:25PM

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1591 EAST HIGHWOOD
PONTIAC, MICHIGAN 48340
STATEMENT OF ACCOUNT
AS OF JANUARY 22, 2002**

Date: March 15, 2002

TERMS
NET.30 DAYS

TO: Kmart International Headquarters
Accounts Payable
P.O. Box 5003
Troy, MI. 48007

Customer Number:

DATE	INVOICE NO.	TR	EXPLANATION	CHARGES	CREDITS	BALANCE
12/12/01	3124			\$290.00		
12/13/01	3125			\$290.00		
12/13/01	3126			\$290.00		
12/13/01	3127			\$290.00		
12/13/01	3128			\$1,279.00		
12/14/01	3132			\$1,279.00		
12/14/01	3133			\$11.55		
12/17/01	3134			\$290.00		
12/17/01	3135			\$290.00		
12/18/01	3136			\$1,279.00		
12/18/01	24397			\$4,854.80		
01/01/02	3177A			\$139.20		
01/01/02	3178A			\$774.00		
01/02/02	3170			\$3,503.33		
01/03/02	3171			\$1,279.00		
01/07/02	3160			\$198.00		
01/09/02	3179			\$125.00		
01/09/02	3180			\$125.00		
01/09/02	3181			\$62.50		
01/09/02	3182			\$150.00		
01/09/02	24631			\$6,197.31		
01/09/02	24638			\$6,125.75		
01/09/02	24639			\$6,068.50		
01/10/02	3172			\$2,025.00		
01/10/02	3173			\$290.00		
01/10/02	3174			\$1,569.00		
01/10/02	3175			\$6,685.00		
01/11/02	3176			\$102.00		
01/16/02	3188			\$198.00		

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Date: March 15, 2002

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NET 30 DAYS

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 Troy, MI. 48007

Customer Number:

DATE	INVOICE NO.	TR	EXPLANATION	CHARGES	CREDITS	BALANCE
01/17/02	3187			\$1,279.00		
01/18/02	3184			\$1,279.00		
01/18/02	3185			\$1,279.00		
01/18/02	3186			\$1,279.00		
01/18/02	3189			\$103.60		
02/28/02	3292			\$159.36		
02/28/02	3348			\$114.00		
02/28/02	3352			\$1,279.00		
TOTALS:				\$122,167.28		



INSURANCE IN TOUCH WITH BUSINESS

PO Box 905 Monmouth Junction NJ 08852-0905

David J. Miller

Bankruptcy Claims
CNA Credit Department

Telephone 732-398-4522

Facsimile 732-398-5232

Internet David J. MILLER@CNA.COM

MARCH 25, 2002

KMART CORPORATION
C/O TRUMBULL SERVICES
CREDIT MANAGER
P.O. BOX 426
WINDSOR, CT 06095

RE: DEBTOR: KMART CORPORATION
CREDITOR: THE CONTINENTAL CASUALTY COMPANY AS AGENT FOR: LANG ASSOCIATES INC.
CASE # 02- 02474

Dear Sir or Madam:

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.

Thank you for your cooperation.

Sincerely yours,

David J. Miller