

UNITED STATES BANKRUPTCY COURT <u>Northern</u> DISTRICT OF <u>Illinois</u>		<b>PROOF OF CLAIM</b>
Name of Debtor <b>KMART CMBS FINANCING, INC.</b>		Case Number <b>02-02474</b>
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) <b>Department of Utilities</b>		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="font-size: 1.2em; font-weight: bold; margin-bottom: 10px;">MAR 25 2002</div> <div style="font-size: 1.1em; font-weight: bold; margin-bottom: 10px;">KENNETH B. GARDNER, CLERK</div> <div style="font-size: 1.1em; font-weight: bold; margin-bottom: 10px;">MAILROOM - LL</div> <div style="font-size: 0.8em; font-weight: normal;">THIS SPACE IS FOR COURT USE ONLY</div>
Name and address where notices should be sent: <b>Department of Utilities P. O. Box 1080 Norfolk, VA 23501</b>		
Telephone number		
Account or other number by which creditor identifies debtor <b>051461 01, 051462 01, 073131 02, 071366 02, 071424 02</b>		Check here if this claim <input type="checkbox"/> replaces a previously filed claim, dated: _____ <input type="checkbox"/> amends
<b>1. Basis for Claim</b> <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 _____		
<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 SS #: _____ Unpaid compensation for services performed from _____ to _____ (date) (date)		
<b>2. Date debt was incurred:</b>		<b>3. If court judgment, date obtained:</b>
<b>4. Total Amount of Claim at Time Case Filed:</b> \$ <u>3,993.81</u> If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> 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.		
<b>5. Secured Claim.</b> <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral: \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ _____		<b>6. Unsecured Priority Claim.</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,650)* 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) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$2,100* 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 - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(____) *Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment
<b>7. Credits:</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. <b>8. Supporting Documents:</b> 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 the documents are not available, explain. If the documents are voluminous, attach a summary. <b>9. Date-Stamped Copy:</b> To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.		THIS SPACE IS FOR COURT USE ONLY  <div style="font-size: 1.5em; font-weight: bold; margin-bottom: 20px;">KP 954</div> <div style="font-size: 1.5em; font-weight: bold;">3/25/02</div>
Date <b>3/20/02</b>	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) <b>Charles Stanley Prentice, Deputy City Attorney</b>	
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.		

UR31  
MPRIEST

Utility Billing and Information System  
Display Customer Bill

03-06-02  
14:34:34

Enter Account Number and press Enter.	*	Date	Transaction	Amount
Account Nbr: 051461 01 +	*	02-14-02	WATER COMMERCIA	138.22
Bill Period: 01-14-02 to 01-22-02	*	02-14-02	TAX	28.23
Nbr of Days: 8 Acct Stat: I	*	02-14-02	SEWER MAINT. FE	84.15
Present Rdg: 14190 Bill Stat: B	*	02-14-02	SERVICE CHARGE	1.00
Previous Rdg: 14135	*	02-14-02	CURRENT TOTAL	251.60
Consumption: 55 Bill Type: F	*	02-14-02	PREVIOUS BALANC	432.82
Due Date: 03182002 Dup Rqsts:	*	02-14-02	TOTAL DUE	684.42
Cutoff Date: 04022002 Msg Code: 01	*			

Addr: 741 E LITTLE CREEK RD, NOR

Billing Address:  
KMART CORPORATION #3365  
ATTN: VENDOR PAYMENT DEPT  
3100 W BIG BEAVER RD  
TROY, MI 480843163

F2=RDG HIST F5=TRAN HIST F6=CUST REC F9=MSG F10=LIST BILL  
F1=HELP F3=END F4=PROMPT F7=PREV F8=NEXT F12=MAINMENU

UR31<sup>6</sup>  
MPRIEST

Utility Billing and Information System  
Display Customer Bill

03-06-02  
14:43:32

Enter Account Number and press Enter.	*	Date	Transaction	Amount
Account Nbr: 051462 01 +	*	02-21-02	FIRE PROT CHG	
Bill Period: 01-14-02 to 01-22-02	*	02-21-02	TAX	
Nbr of Days: 8 Acct Stat: I	*	02-21-02	FIRE SERV CHG	9.68
Present Rdg: 987 Bill Stat: B	*	02-21-02	FINANCE CHARGE	0.05
Previous Rdg: 987	*	02-21-02	CREDIT ADJUSTME	36.30-
Consumption: Bill Type: F	*	02-21-02	CURRENT TOTAL	26.57-
Due Date: 03252002 Dup Rqsts:	*	02-21-02	PREVIOUS BALANC	78.88
Cutoff Date: 04092002 Msg Code:	*	02-21-02	TOTAL DUE	52.31

Addr: 741 E LITTLE CREEK RD, NOR

Billing Address:  
KMART CORPORATION  
ATTN: VENDOR PAYMENT DEPT  
741 E LITTLE CREEK RD  
NORFOLK, VA 235183709

F2=RDG HIST F5=TRAN HIST F6=CUST REC F9=MSG F10=LIST BILL  
F1=HELP F3=END F4=PROMPT F7=PREV F8=NEXT F12=MAINMENU

UR31  
MPRIEST

Utility Billing and Information System  
Display Customer Bill

03-06-02  
14:44:20

Enter Account Number and press Enter.	*	Date	Transaction	Amount
Account Nbr: 071366 02 +	*	02-21-02	WATER COMMERCIA	346.79
Bill Period: 01-15-02 to 01-22-02	*	02-21-02	TAX	59.52
Nbr of Days: 7 Acct Stat: I	*	02-21-02	SEWER MAINT. FE	211.14
Present Rdg: 20290 Bill Stat: B	*	02-21-02	STORM WATER	354.14
Previous Rdg: 20290	*	02-21-02	SERVICE CHARGE	1.00
Consumption: 138 Bill Type: F	*	02-21-02	CREDIT ADJUSTME	2,106.29-
Due Date: 03252002 Dup Rqsts:	*			
Cutoff Date: 04092002 Msg Code: 25	*	02-21-02	CURRENT TOTAL	1,133.70-
	*	02-21-02	PREVIOUS BALANC	7,585.34
	*	02-21-02	TOTAL DUE	6,451.64

Addr: 6101 N MILITARY HWY, NOR

Billing Address:  
SUPER KMART  
ATTN: ACCOUNTS PAYABLES  
6101 N MILITARY HWY  
NORFOLK, VA 235180000

(3592.03)  
2859.61

F2=RDG HIST F5=TRAN HIST F6=CUST REC F9=MSG F10=LIST BILL  
F1=HELP F3=END F4=PROMPT F7=PREV F8=NEXT F12=MAINMENU

UR31  
MPRIEST

Utility Billing and Information System  
Display Customer Bill

03-06-02  
14:44:34

Enter Account Number and press Enter.	*	Date	Transaction	Amount
Account Nbr: 071424 02 +	*	02-21-02	FIRE PROT CHG	2.51
Bill Period: 01-15-02 to 01-22-02	*	02-21-02	TAX	0.63
Nbr of Days: 7 Acct Stat: I	*	02-21-02	FIRE SERV CHG	18.41
Present Rdg: 143 Bill Stat: B	*	02-21-02	CREDIT ADJUSTME	77.36-
Previous Rdg: 143	*			
Consumption: 1 Bill Type: F	*	02-21-02	CURRENT TOTAL	55.81-
Due Date: 03252002 Dup Rqsts:	*	02-21-02	PREVIOUS BALANC	244.69
Cutoff Date: 04092002 Msg Code: 25	*	02-21-02	TOTAL DUE	188.88

Addr: 6101 N MILITARY HWY, NOR

Billing Address:  
SUPER KMART  
ATTN: ACCOUNT PAYABLES  
6101 N MILITARY HWY  
NORFOLK, VA 235180000

F2=RDG HIST F5=TRAN HIST F6=CUST REC F9=MSG F10=LIST BILL  
F1=HELP F3=END F4=PROMPT F7=PREV F8=NEXT F12=MAINMENU