



UNITED STATES BANKRUPTCY COURT <u>Northern (Eastern)</u> DISTRICT OF <u>Illinois</u>		PROOF OF CLAIM
Name of Debtor K - Mart Corp		ADMIN CLAIM Case Number 02-B02474
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 entity to whom the debtor owes money or property) Rosenthal & Rosenthal, Inc.		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">FILED</div> <div style="font-size: 0.8em; margin-bottom: 10px;">UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS</div> <div style="font-size: 1.5em; margin-bottom: 10px;">MAR 22 2002</div> <div style="font-size: 0.8em; margin-bottom: 10px;">KENNETH S. GARDNER, CLERK MAILROOM - LL</div> <div style="font-size: 0.7em;">THIS SPACE IS FOR COURT USE ONLY</div>
Name and address where notices should be sent Donald S. Leonard 1370 Broadway New York NY 10018		
Telephone Number: 1-212-356-1418		
Account or other number by which creditor identifies debtor: K-MAMIT01	Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated _____	
1. Basis for Claim <input checked="" type="checkbox"/> Goods sold Assignee for Stanley Roberts Co <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)		
2. Date debt was incurred: 12/01 - 1/02		3. If court judgement, date obtained:
4. Total Amount of Claim at Time Case Filed: 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 of additional charges.		\$ 26,812.80
5. Secured Claim <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 above, if any \$ _____		6. Unsecured Priority Claim <input checked="" type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ 26,812.80 See Attached Reclamation Specify the priority of the claim <input type="checkbox"/> Wages, salaries, or commissions (up to \$4300),* 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 \$1950* 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)(_____)
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 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. 9. Date-Stamped Copy: To receive an acknowledgement 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 LP 969 3/22/02
Date March 14, 2002	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) Donald S. Leonard Sr. Vice President	
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.		

ROSENTHAL & ROSENTHAL STATEMENT OF ACCOUNT 02/14/02 PAGE 1

K-MAMIT01 K-MART CORP
 3100 W BIG BEAVER
 TROY, MI
 248-463-1180

STANLEY ROBERTS CO.
 48084

TRANS	INV NO	INV DT	FOLIO	TERMS	AMOUNT
INV	035786	12/28/01	0107	0100045	1,881.60
INV	035787	12/28/01	0107	0100045	2,352.00
INV	035788	12/28/01	0107	0100045	4,704.00
INV	035789	12/28/01	0107	0100045	3,528.00
INV	035790	12/28/01	0107	0100045	1,568.00
INV	035791	12/28/01	0107	0100045	4,704.00
INV	035792	12/28/01	0107	0100045	1,960.00
INV	035823	12/28/01	0107	0100045	1,568.00
INV	035824	12/28/01	0107	0100045	2,665.60
INV	035825	12/28/01	0107	0100045	1,881.60

TOTAL DEBITS 26,812.80
 TOTAL CREDITS 0.00
 CLIENT TOTAL 26,812.80

MODE = MEMORY TRANSMISSION

START=JAN-25 11:40

END=JAN-25 11:41

FILE NO.= 077

STN NO.	COMM.	ONE-TOUCH/ ABBR. NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK		212484636822	002/002	00:00:43

-ROSENTHAL & ROSENTHAL -

***** -ROSENTHAL - ***** 212 356 1424- *****

Rosenthal & Rosenthal Inc. Factors

1370 BROADWAY  NEW YORK, N.Y. 10018

TEL: (212) 356-1400
FAX: (212) 258-0900

January 25, 2002

[Registered/Return Receipt requested; overnight mail]

Kmart Corporation.
3100 W Big Beaver
Troy, Michigan 48084-3163


FAX #: 248 463 6822

Attention: Mr. John T. McDonald, Jr.

Rosenthal & Rosenthal Inc., on behalf of itself and Stanley Roberts Co hereby exercises its and Stanley Roberts Co's rights under the Uniform Commercial Code, including, but not limited to, the provisions of section 2-702 of the Uniform Commercial Code and any other provisions of law, including, but not limited to, section 546(c) of title 11 of the United States Code, and hereby demands reclamation and the immediate return of all merchandise delivered to your company on credit as set forth in the attached statement.

Very truly yours,

ROSENTHAL & ROSENTHAL, INC.


Donald S. Leonard,
Senior Vice President

Rosenthal & Rosenthal Inc.
Factors

1370 BROADWAY



NEW YORK, N.Y. 10018

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NEW YORK, N.Y. 10018

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FAX: (212) 356-0900

STATEMENT OF ACCOUNT

January 24, 2002

**Kmart CORPORATION
3100 W BIG BEAVER
TROY, MICHIGAN**

8300 STANLEY ROBERTS CO:

INV DT	DUE DT	INV NUMBR	INV AMOUNT
12/28/01	02/11/02	035786	1,881.60
12/28/01	02/11/02	035787	2,352.00
12/28/01	02/11/02	035788	4,704.00
12/28/01	02/11/02	035789	3,528.00
12/28/01	02/11/02	035790	1,568.00
12/28/01	02/11/02	035791	4,704.00
12/28/01	02/11/02	035792	1,960.00
12/28/01	02/11/02	035823	1,568.00
12/28/01	02/11/02	035824	2,665.60
12/28/01	02/11/02	035825	1,881.60