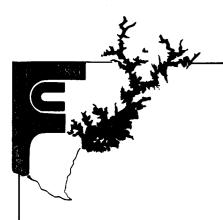
*FILE ORIGINAL FOR CHAPTERS 7 and 11, IN DUPLICATE FOR CHAPTER 13, FOR DA ...-STAMPED COPY, SEE #9 BELOW CH 7 CH 13 XXXCH 11 **United States Bankruptcy Court** PLEASE CHECK CHAPTER Division Northern District of Illinois, **PROOF OF CLAIM** Case Number Name of Debtor 02-B 02474 KMART CORPORATION, et al NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement File Claim Form With: of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S. C. § 503 United States Bankruptcy Court Name of Creditor (The person or other entity to whom the debtor Check box if you are aware that P. O. Box A3613 owes money or property) anyone else has filed a proof of claim relating to your claim. Attach copy of Chicago, Illinois 60690-3612 FORSYTH COUNTY TAX COMMISSIONER statement giving particulars. Name and Address Where Notices Should be Sent X Check box if you have never received any notices from the FORSYTH COUNTY TAX COMMISSIONER Creditor # ___ bankruptcy court in this case. 110 EAST MAIN STREET, SUITE 130 Check box if the address differs THIS SPACE IS FOR CUMMING GA 30040 from the address on the envelope sent Telephone No. **COURT USE ONLY** to you by the court. Check here if this claim Account or other number by which creditor identifies debtor: a previously filed claim dated: amends replaces C20-027; B039252; B275005 **BASIS FOR CLAIM** Wages, salaries, and compensation (Fill out below) Services performed Goods sold Your social security number Personal injury/wrongful death Money loaned Unpaid compensation for services performed X Taxes Other from Retiree benefits as defined in 11 U.S. C. § 1114 (a) (date) (date) 3. IF COURT JUDGMENT, DATE OBTAINED: 2. DATE DEBT WAS INCURRED: 01/01/01 - 12/31/02 \$ 156,493,44 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. 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. **Unsecured Priority Claim** 5. Secured claim Check this box if you have an unsecured priority claim Check this box if your claim is secured by collateral (including a Amount entitled to priority \$ 156,493.44 right of setoff). Specify the priority of the claim: Wages, salaries, or commissions (up to \$4,300), *earned within 90 **Brief Description of Collateral:** days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier-11 U.S.C. § 507(a)(3) Real Estate Contributions to an employee benefit plan-11 U.S.C. § 507(a)(4) Motor Vehicle Up to \$1,950* of deposits toward purchase, lease, or rental of Other _ property or services for personal, family, or household use -11 U.S.C. § 507(a)(6) Value of collateral: \$____ Alimony, maintenance, or support owed to a spouse, former spouse, or child -11 U.S.C. § 507(a)(7) XX Taxes or penalties owed to governmental units11 U.S.C. § 507(a)(8) Amount of arrearage and other charges at time case filed included 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 in secured claim above, if any: \$ _ with respect to cases commenced on or after the date of adjustment. THIS SPACE IS FOR 7. CREDITS: The amount of all payments on this claim has been credited and deducted for the COURT USE ONLY purpose of making this proof of claim. 8. SUPPORTING DOCUMENTS: <u>Attach copies of supporting documents</u>, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court FILED 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 INTED STATES BANKRUPTCY COURT ORTHERN DISTRICT OF, ILLINOIS are voluminous, attach a summary. ANY ATTACHMENT MUST BE 8-1/2" BY 11" 9. DATE-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and an additional copy of this proof of claim. Signand print the name and title, if any, of the creditor or other person authorized to file this slaim area copy or hower of attorney any Date: KENNETH B. GARDNER, CLERK 03/19/02 MAILEOOM - LL GILBERT TAX COMMISSIONER DBBY GENT 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.

FORM B10 (Official Form 10) (4/98)

USBC, Illinois Northern (4/1/98)



Forsyth CountyBoard of Tax Assessors

FORSYTH COUNTY
PROPERTY EVALUATION OFFICE
110 EAST MAIN STREET
SUITE 260

CUMMING, GEORGIA 30040 (770) 781-2106

March 18, 2002

To Whom It May Concern:

For tax year 2002, it is estimated that KMART Corporation, etal, will owe \$ 38,650.22 in taxes for business personal property number B275005 and \$ 24,006.90 in taxes for business personal property number B039252. It is also estimated that they will owe \$ 32,118.46 in taxes for real property located on Old Atlanta Rd. in Cumming, GA, with the following map and parcel number C20-027.

If you should have any questions, please contact me at (770) 886-2800, extension 2617.

Regard

Mary Kirkpatrick, Chief Appraiser

MK/td

2001 Property Tax Statement

Bobby Gene Gilbert
Forsyth County Tax Commissioner
110 E. Main St
Suite 130
Cumming, GA 30040

Map: C20 027

Bill No.

2001-323861

Payment Good Through:

Due Date

MAKE CHECK OR MONEY ORDER PAYABLE TO:

Forsyth County Tax Commissioner

KMART CORPORATION % BURR WOLFF L P PO BOX 560907 #3846R DALLAS, TX 75356-0907



TOTAL DUE

36,076.40

RETURN THIS PORTION WITH PAYMENT

(1% interest per month will be added if not paid by due date)

(If taxes are paid by your mortgage company, send them this portion only)

Bobby Gene Gilbert

Forsyth County Tax Commissioner

110 E. Main St Suite 130

>< -

Cumming, GA 30040

Tax Payer:

KMART CORPORATION % BURR W

Map Code:

C20 027

Description: 2-1 207

2-1 207 K-MART @ LAKELAN

Bill No:

2001-323861

Due Date:

District:

001 FORSYTH COUNTY AT LARGE

Homestead Exemptions: Payment Good Through:

Phone:(770) 781-2110 Fax:(770) 886-2828

		` /			I dymont d	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o u b.i.		
Building Value	Land Value	Acres	Fair Market Value	Gross Assessment	County Exemption		County	School Exemption	Net School Assessment
2,830,100	1,309,000	7.4800	4,139,100	1,655,640	0	1,0	655,640	0	1,655,640
	ENTITY		MILLAGE RATE	TAXABLE VALUE	GROSS TAX		CRED	п	NET TAX
STATE TAX			.250	1,655,640	413	3.91			413.9°
COUNTY M&O			6.879	1,655,640	11,388	3.98			4,933.8
SALES TAX (CREDIT		3.899	1,655,640				-6,455.17	
COUNTY BOND			.500	1,655,640	827	7.82			827.82
SCHOOL M&O			15.082	1,655,640	24,970	0.36			24,970.36
SCHOOL BOND	•		1.978	1,655,640	3,274	.86			3,274.86
FIRE DISTRICT			1.000	1,655,640	1,655	.64			1,655.64
	TOTALS		21.790		42,531	.57		-6,455.17	36,076.40

Current Due	36,076.40
Penalty	.00
Interest	.00
Other Fees	.00
Prev. Payments	.00
Back taxes	.00
TOTAL DUE	36,076,40

2001 Property Tax Statement

Bobby Gene Gilbert Forsyth County Tax Commissioner 110 E. Main St Suite 130 Cumming, GA 30040

2001-606817	Due Date	25 641 46
2001-000817		25,641.46

Map: B039252

Payment Good Through:

MAKE CHECK OR MONEY ORDER PAYABLE TO:

Forsyth County Tax Commissioner

KMART CORPORATION # 3846 % BURR WOLFF L P P O BOX 6568 SILOAM SPRINGS, AR 72761-6568



RETURN THIS PORTION WITH PAYMENT

(1% interest per month will be added if not paid by due date)

(If taxes are paid by your mortgage company, send them this portion only)

%< -

Bobby Gene Gilbert

Forsyth County Tax Commissioner

110 E. Main St

Suite 130

Cumming, GA 30040

Tax Payer:

KMART CORPORATION # 3846 % B

Map Code:

B039252

Description:

STORE EQUIPMENT AND INVENTO

Bill No:

2001-606817

Due Date:

District:

001 FORSYTH COUNTY AT LARGE

Homestead Exemptions:

	0) 781-2110 F	Fax:(770) 886-282				ood Through:	•	
Building Value	Land Value	Acres	Fair Market Value	Gross Assessment	County Exemption	Net County Assessment	School Exemption	Net School Assessment
0	0	.0000	2,941,886	1,176,754	0	1,176,754	0	1,176,754
	ENTITY	M	LLAGE RATE	TAXABLE VALUE	GROSS TAX	CREI	п	NETTAX
STATE TAX			.250	1,176,754	294	.19		294.19
COUNTY M&O			6.879	1,176,754	8,094	.77		3,506.72
SALES TAX (CREDIT		3.899	1,176,754			-4,588.05	
COUNTY BOND			.500	1,176,754	588	.38		588.38
SCHOOL M&O			15.082	1,176,754	17,747	.80		17,747.80
SCHOOL BOND			1.978	1,176,754	2,327	.62		2,327.62
FIRE DISTRICT			1.000	1,176,754	1,176	.75		1,176.75
	TOTALS		21.790		30,229	.51	-4,588.05	25,641.46

ı	Current Due	25,641.46
Į	Penalty	.00
ſ	Interest	.00
	Other Fees	.00
ſ	Prev. Payments	.00
Ì	Back taxes	.00
	TOTAL DUE	25,641.46

BUSINESS PERSONAL PROPERTY	TAXYEAR		STANCE NEEDED CALL		UNT NUMBER
TAX RETURN		404-781-2106		9396-BF	
THIS RETURN IS CONSIDERED PUBLIC INFORMATION AND WILL BE OPEN FOR PUBLIC INSPECTION	DUE C		MAP AND PARCEL I.D.	NO.	NAICS NO.
RETURN COMPLETED FORM TO ADDRESS LISTED BELOW	APRI	1.6	K 600 2072		5350
COUNTY NAME AND RETURN ADDRESS	ļ	TAXPA	YER NAME AND ADDRES	SS	
FORSYTH COUNTY ASSESSOR	KMART CO	ORPORATION		4	•
110 EAST MAIN ST, STE 260, 12 0 4 2002	C/O BURI	R WOLFF		NE.	
CUMMING, GA 30040-0110	PO BOX	5568			- ~ ~ ~
ARD OF	SILOAM S	SPRINGS, A	R 72761-6568	2 75	N -005
assessors					
·		BUS	INESS PHYSICAL LOCAT	ПОИ	
To avoid a 10% penalty on items not previously returned,	MEDLOCK B	RIDGE RD &	ACGINN		
file not later than the due date listed above. This return is] 1		DRESS OR NAME IS INCOF	-	ASE
subject to audit by the Board of Tax Assessors under		CORREC	T IN THE SPACE PROVIDED	D BELOW.	
O.C.G.A. §48-5-299 and §4-5-300. The return and	NAME:		PR		
supporting schedule must be completed and returned in					
order for property to be property returned. Department of	ADDRESS	S: 8/	AR - 7 2002		
Revenue Rule 560-11-10-08 (3) (C)		- Wi	MIX - 1 ZUUZ		
	CITY, STA	TE, ZIP	TÁ CIVI ÉKED		
		UA	IN CHICKED		
	I ne value	2 II om 2016	iules A, D and C should I		
DEDOCALAL DECERTIVATE ATA			do not reflect fair market nder the column headed Ta		
PERSONAL PROPERTY STRATA	your castin	CONTROL VENIER CO	KASI UIG CASILIIIII I III III III III	мрауса з т с	torness veides.
,	TAXPAYER	RETURNED	INDICATED VALUE FROM		TAX
,	VALUE, A	S OF JAN. 1	SCHEDULE A, B & C	OFFI	CE USE
				N. A.	
Furniture/Fixtures/Machinery/Equipment — includes all					
fixtures, furniture, office equipment, computer hardware, production machinery, off-road vehicles, farm equipment and					
implements, tools and implements of manual laborers' trade,					200
leasehold improvements personal property in nature and					
construction in progress personal property in nature.		1,761,100	1,761,100		1334
inventory — includes all raw materials, goods in process,					1000
finished goods, livestock and agricultural products, all					16.7
consumable supplies used in the process of manufacturing,					
distributing, storing or merchandising of goods and services,	-				
floor planned inventory and spare parts. Does not include inventory receiving Freeport Exemption under O.C.G.A. § 48-					
5-48.2.		2,673,299	2,673,299		
Freeport Inventory — Includes inventory receiving exemption	···········	2,0,3,233	2,013,233		
Under O.C.G.A. § 48-5-48.2					
. Other Personal — Includes all personal property not otherwise					
defined above.					
TOTALS		4,434,399	4,434,399	100	155
It shall be the duty of the county Decad of Tour Assessment				ONE CONTRACTOR	
It shall be the duty of the county Board of Tax Assessors to investigate ascertaining what property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and the property is subject to taxation and to require the property is subject to taxation and to require the property is subject to taxation and the property is subject.	ate and to in	quire into the	property owned in the cou	unty for the	purpose of
about the property to bublious to stakes of a feet to require the p	proper return	to the prope	ity for taxation.		
TAXPAYER'S	S DECLA	RATION			
"I do solemnly swear that I have carefully read (or have hear	d rood) on	d boug duby	noncidored the model		
foregoing tax list, and that the value placed by me on the prop	u reauj ari	a nave unity t	orisidered trie question	s propoun	ided in the
and I further swear that I returned, for the purpose of being	berry return	ieu, as snow	ri by the list, is the true h	narket vall	le thereor;
or have control of either as agent, executor, administrator, or	taxeu tilei t	on, every sp	edes of property triat i	own in my	own right
taxed thereon, I have not attempted either by transferring	TURIEI WISE		making this return, for t	ne purpos	e of being
governing taxation in this state. I do further swear that in making	ing proper	y to another	or by any other mean	s to evade	e the laws
of every species of property contained therein."	ing instell	im i nave do	ne so by estimating the	true wortn	and value
t	Ĵ	. 1	<i>ل</i> ، ب	,	
TAXPAYER OR AGENT X	<u>a</u> Zm	xtt	10 July A	over	
	Signa	ure			
PLEASE PRINT OR TYPE NAME WILLA LOVETT			· · · · · · · · · · · · · · · · · · ·		
TITLE AUTHORIZED AGENT DATE: 02/27/	02	DHOM	E NUMBER: 918-422-4	444	
un Date: 02/27/02, Acct No: 9396-BPP, LOCATION #/NAME		PHON	E NOWREK: 510-455-4		
Duce. OZ/Z//OZ, ACCU NO: 3390-BPP, LUCATION #/NAME	,,,,,,, CL	I CNT: KMART			PAGE 1

Date Printed: 03/13/2002

Personal Property Account Summary

Forsyth County, GA

Page

Tax Year Account
County ID #
Name
Address

2002	2 Account #
	275005
*	00000000
	KMART CORPORATION
	d/b/a BIG KMART # 9396
	% BURR WOLFF
	P O BOX 6568
	SII OAM SPRINGS AR 727616568

Account #	275005		
	Owner #	6002072	Flag
	Parcel Number	140 001	
DRATION	Physical	3630 PEACHTREE PKWY	
XT # 9396	Tax District	County	
ш.	Phone	(918)422-4444	
	NAICS	45211	
GS AR 727616568	Digest Class	C	
	•		

88

03/04/2002

Field Audit Desk Audit Field Check Asmt Notice Return Made

						•		7
Values		Boats	0	Total	4,434,399	x 40% =	1,773,760 4	areasey
Inventory	2,673,299	Aircraft	0					
Mach & Equip	1,761,100	Other	0	Exemptions: SF:	0			

	Raw Material	in-Process	Finished	Transit V	Warehoused	Consigned	þe	Floor Plan		Spare Parts	Packing
2672270	0	0	0	0	0	•	0		0	0	1029
				COST APPROACH	ОАСН					;	
Year	Description	on	Group	Cost	ă	Disposals	Depr	pr Func	Econ	Ę	Value
2001 EQUIPMENT	MENT		•	_ั	3,030	•	0	0.87 0.0		00	2,636
2001 EQUIPMENT	MENT		2	1,761,555	,555	_	0	0.92 0.00		0.00	1,620,631
2001 EQUIPMENT	MENT		4	205,	205,721	•	0	0.67 0.0		8	137,833
15c+	50+5 cm 196 CC	_ =	<u> </u>	ah da go	<u></u>	•			(
- -								4	2004	ı	

BUSINESS PERSONAL PROPERTY		ISTANCE NEEDED CALL	ACCOUNT NUMBER
TAX RETURN THIS RETURN IS CONSIDERED PUBLIC INFORMATION	2002 404-781-2106	44AB 444B 64555	025979
THIS RETURN IS CONSIDERED PUBLIC INFORMATION AND WILL BE OPEN FOR PUBLIC INSPECTION	DUE DATE APRIL 01	MAP AND PARCEL I.D. NO	
RETURN COMPLETED FORM TO ADDRESS LISTED BELOW.			5350
COUNTY NAME AND RETURN ADDRESS.		YER NAME AND ADDRESS	<u> </u>
FORSYTH COUNTY ASSESSOR	KMART CORPORATION	1	
110 EAST MAIN ST, STE 260R 0 4 2002	C/O BURR WOLFF		
CUMMING, GA 30040-0110	PO BOX 6568		
BOARD OF	SILOAM SPRINGS, A	AR 72761-6568	
TAX ASSESSORS			
	BUS	INESS PHYSICAL LOCATION	ON
To avoid a 10% penalty on items not previously returned,	520 LAKELAND PLAZA,	CUMMING, GA 30130	
file not later than the due date listed above. This return is	IF MAILING AD	DRESS OR NAME IS INCORR	ECT, PLEASE
subject to audit by the Board of Tax Assessors under	CORREC	CT IN THE SPACE PROVIDED I	BELOW.
O.C.G.A. §48-5-299 and §4-5-300. The return and	NAME:	1 1	
supporting schedule must be completed and returned in		\$44D ~ 0000	
order for property to be property returned. Department of	ADDRESS:	MAR - 7 2002	
Revenue Rule 560-11-10-08 (3) (C)	CITY, STATE, ZIP:	DATA ENTERED	
1	The values from Sche	dules A. B and C should be	listed below If these
<u>.</u> 1	values, in your opinion	, do not reflect fair market vi	alue then you may list
N PERSONAL PROPERTY STRATA	your estimate of value u	nder the column headed Taxp	payers Returned Value.
E PERSONAL PROPERTY OF THE PERSON NAMED IN CONTROL OF THE PERS		len:	englingung of the company of the com
•	TAXPAYER RETURNED	INDICATED VALUE FROM	FOR TAX OFFICE USE
▼	VALUE, AS OF JAN. 1	SCHEDULE A, B & C	
F. Furniture/Fixtures/Machinery/Equipment — includes all			
fixtures, furniture, office equipment, computer hardware,			
production machinery, off-road vehicles, farm equipment and			
implements, tools and implements of manual laborers' trade,	•		
leasehold improvements personal property in nature and			
construction in progress personal property in nature.	729,986	729,986	
		MAC NO.	
 Inventory — Includes all raw materials, goods in process, 			
finished goods, livestock and agricultural products, all			
consumable supplies used in the process of manufacturing,			
distributing, storing or merchandising of goods and services, floor planned inventory and spare parts. Does not include			
inventory receiving Freeport Exemption under O.C.G.A. § 48-			
5-48.2.	2,024,361	2,024,361	
P. Freeport Inventory — Includes inventory receiving exemption		3,021,301	
Under O.C.G.A. § 48-5-48.2			
Z. Other Personal — Includes all personal property not otherwise defined above.			
TOTALS	2,754,347	2,754,347	
No. 1 - March 1 - March 2011 - Control 2011 - Contr			
It shall be the duty of the county Board of Tax Assessors to investigate ascertaining what property is subject to taxation and to require the	ate and to inquire into the proper return of the prope	property owned in the coun crty for taxation.	ty for the purpose of
TAXPAYER'S	S DECLARATION		
		nonaldorad the acceptance	manna,
"I do solemnly swear that I have carefully read (or have hear	onthe column and a second	considered the questions	propounded in the
foregoing tax list, and that the value placed by me on the proj	perty returned, as snow	in by the list, is the true ma	irket value thereof;
and I further swear that I returned, for the purpose of being	taxeu triereon, every s	bedies of property that I of	wn in my own right
or have control of either as agent, executor, administrator, o	i ulieiwise, and inal in	making this return, for the	purpose of being
taxed thereon, I have not attempted either by transferring	my property to anothe	or by any other means	to evade the laws
governing taxation in this state. I do further swear that in mak	ing this return i have do	one so by estimating the tri	ue worth and value
of every species of property contained therein."	. 0	. • 4	
TAXPAYER OR AGENT X	o Zonett	_ WULL LANGE	t
PLEASE PRINT OR TYPE NAME WILLA LOVETT	Signature		
TITLE AUTHORIZED AGENT DATE: 02/27/	702 DLION	IE NUMBER: 918-422-444	14
Run Date: 02/27/02, Acct No: 025979, LOCATION #/NAME:	FIUN 3846. CLIENT:KMART	L NUMBER.	
TOTAL TOTAL CONTROL OF THE CONTROL O	JOHO, CDIENT: NPART		PAGE 1

22288 Forsyth County, GA Page Personal Property Account Summary 39252 Account # Date Printed: 03/13/2002 Tax Year 2002

Account	39252	Owner #	25979	Flags	Field Audit
County ID #	00000000	Parcel Number			Desk Audit
Name	KMART CORPORATION # 3846	Physical	520 LAKELAND PLZ		Field Check
Address	% BURR WOLFF L P	Tax District	County		Asmt Notice
	P O BOX 6568	Phone	(918)422-4444		Return Made
		NAICS	45211		03/04/2002
	SILOAM SPRINGS AR 727616568	Digest Class	C		
Business					

	2,0	Boats 2,024,361 Aircraft	0 Total 0	2,754,348	1 C1 '101'1 = 0104 X
--	-----	-----------------------------	------------------	-----------	----------------------

	Row Material		7 (4:1:1							
	מא ואופובוופו	In-Process		I ransit Wareh	Warehoused C	Consigned	<u>F</u>	Floor Plan	Spare Parts	ts Packing
2023231	0	0	0	0	0	0		0		0 1130
				COST APPROACH						
Year	Description	ion	Group	Cost	Disposals	als	Depr	Func	Econ	Value
1993 EQUIPMENT	N		τ-	8,264		0	0.20	0.00	0.00	1,653
1998 EQUIPMENT	H		τ	614		0	0.43	0.00	0.00	264
1999 EQUIPMENT	, FN		-	47		0	0.58	0.00	0.00	27
1990 EQUIPMENT	N		2	357,090		0	0.20	0.00	0.00	71,418
1991 EQUIPMENT	K		2	108,932		0	0.25	0.00	0.00	27,233
1992 EQUIPMENT	N _T		2	10,382		0	0.25	0.00	00.00	2,596
1993 EQUIPMENT	N TN		2	32,014		0	0.28	0.00	0.00	8,964
1994 EQUIPMENT	Ä		2	17,723		0	0.34	0.00	0.00	6,026
1995 EQUIPMENT	L		2	13,506		0	0.44	0.00	0.00	5,943
1996 EQUIPMENT	N		7	10,126		0	0.54	0.00	0.00	5,468
1997 EQUIPMENT	N		2	75,886		0	0.63	0.00	0.00	47,808
1998 EQUIPMENT	LN		2	415,606		0	0.70	0.00	0.00	290,924
1999 EQUIPMENT	N		2	66,974		0	0.78	0.00	0.00	52,240
2000 EQUIPMENT	INT		2	65,114		0	0.85	0.00	0.00	55,347
2001 EQUIPMENT	IN		2	99,556		0	0.92	0.00	0.00	91,592
1998 EQUIPMENT	LN.		4	109,167		0	0.10	0.00	0.00	10,917
	N _T		4	18,536		0	0.31	0.00	0.00	5,746
2000 EQUIPMENT	N		4	42,598		0	0.54	0.00	0.00	23,003
2001 EQUIPMENT	H		4	34.057		0	0.67	0.00	0.00	22,818