UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIV

**PROOF OF CLAIM**

Name of Debtor
**Kmart Corporation, Inc.**

Case Number
**02 B 2474**

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

XEROX **Corporation**

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.

Name and address where notices should be sent
XEROX CORPORATION
ATTN: V.A. DAVIS
P O BOX 660506
DALLAS TX 75266-9937
*Telephone number: 972-420-5963*

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

FILED
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
APR - 3 2002
KENNETH S. GARDNER, CLERK
MAILROOM - KC

THIS SPACE IF FOR COURT USE ONLY

Account or other number by which creditor identifies debtor:
88171483

Check here if claim: replaces / amends a previously filed claim dated._____

**1. Basis for Claim**

Goods sold
Services performed
Money loaned
Personal injury / wrongful death
Taxes
Other X

Retiree benefits as defined in 11 U.S.C. 114(a)
Wages, salaries, and compensation [fill out below]
Your SS#: _____ ____ _____
Unpaid compensation for services performed
from _____ (date) to _____ (date)

**2. Date debt was incurred: [SEE ATTACHED]**

**3. If court judgment, date obtained:**

**4. Total Amount of Claim at Time Case Filed: 235.96**

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.

5. Secured Claim.

**Check this box if your claim is secured by collateral**
Brief Description of Collateral:
Real Estate
Motor Vehicle
Other _____
Value of Collateral: $_____

6. Unsecured Priority Claim

Check this box if you have an unsecured priority claim
Amount entitle to priority $ _____
Specify the priority of the claim
Wages, salaries or commissions up to $4,300. 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)
Contribution to an employee benefit plan - 11 U.S.C. 507 (a) (4)
Up to $1,950* 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- 11 U.S. C 507 (a)(7)
Taxes or penalties owed to governmental units - 11 U.S.C. 507 (a) (8)
Other- Specify applicable paragraph of 11 USC 507 (a ) (____),
**Amounts are subject to adjustment on 4/1/01 and every 3 years therafter with respect to cases commenced on or after the date of adjustment.*

**7. Credits:** The amountof 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 a promissory notes, purchase orders, invoices, itemized statements of runnig 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 acknowledgment of the filing of your claim, enclose a stamped self-addressed envelope and copy of this proof of claim.

THIS SPACE IF FOR COURT USE ONLY

1235
4-3-02 SS

Date 03/11/2002

Sign and print the name an title, if any, of the creditor or other person authorized to file this claim ( attach copy of power of attorney, if any):
Sharon Ivy Sharon Ivy

*Penalty for presenting fraudulent claim: Fine of up to $500,000 or imprisonment for up to 5 years, or obth. 18 U.S.C. 152 and 3571*

ate: March 8, 2002
tatement of Account

Customer Name : KMART STORE #3710
Customer Number: 088171483
Serial Number : 0MW114569
Recoveries : 0.00

| ıvoice No | Inv Date | BN | Invoice Amount | Account Balance |
|---|---|---|---|---|
| 86395871 | 01/10/02 | W1 | 235.96 | 235.96 |

# WRITE-OFF COVERSHEET

**This coversheet must be attached to all Write-off packages**

(Please attach the AC screen with PF5 listing customer address directly behind this coversheet / document)
A Write-off should be completed and submitted when all avenues of collections have been exhausted and the customer cannot or will not pay.

Customer Name: KMART

Write-off CN: [redacted]

Related Trade C/N: N/A
Or XEEP CN:

What State is the Customer Located in: PA

CBU Notification Date: N/A BANKRUPTCY
CBU Notification Sent To: "
Name

Amount of Write-off: 235.96

Adjustment to Write-off ☐

Replevin, Equipment Recovery Required ☐

Finance Information:

Noteminders billed # N/A

Noteminders Pd. # N/A

Write-off Reason Code: BNK/3BV

Equipment Inst. Date or Date of oldest invoice: 1/10/02

Cancel Date 12/10/01

Equip. Prod. Code or SUP (for supplies): OMW-114569

XEEP C/N # N/A

Equipment Picked Up: ☑ Date: 1/4/02

Please check the type of account written off and invoices included in pkg. EBS ☑ Supplies ☐ XBS ☐ XEEP ☐

PREPARER [signature] Date: 2/8/02

X 1st Line Manager: $1,000-$15,000 [signature] Date: 2/15/02

2nd Line Manager: $15,001-$50,000 _____ Date: _____
(Fundouts any $)

CBC Controller/Sr. Operations Manager: _____ Date: _____
$50,000-$100,000

National Account Manager _____ Date: _____
(Major Accts. Any $)

CBC Vice President: >$100,000 _____ Date: _____
(Major Accts. Any $)

Sales Entity Vice President _____ Date: _____
(Major Accts. Any $)

Legal Counsel _____ Date: _____
(For Political Entity Write-offs any $)

XCS Approved [signature] Date: 2-25-02

XCS Approved _____ Date: _____

XCS Approved _____ Date: _____

# Write Off Checklist (Greater than $1,000.)

## This checklist must be attached to the Write Off package

A Write-Off should be completed and submitted when all avenues of collections have been exhausted and the customer cannot or will not pay.

Customer Name: KMART

Customer Number: 088171483

Amount of Write-Off: 235.96

Please check YES or NO in the appropriate column to ensure all collection activity has taken place. If a collection step is not applicable to the w/o check N/A. Attach all AC / AH / AS screens

| Collection Activity | YES | NO | N/A |
|---|---|---|---|
| Was direct customer contact established?<br>If No, reason was:<br>❑ Customer has skipped<br>❑ Telephone disconnected without forwarding number<br>❑ Mail returned without forwarding address<br>Other: | ✓ | | |
| Is the Invoice(s) valid? | ✓ | | |
| Was problem resolved with memo from sales/ service | | | ✓ |
| Was problem identified and clearly updated on text history screen? | ✓ | | |
| Was problem properly elevated within customer location and within Xerox, i.e. Notification to CBO, NAM, ANAM? | | | ✓ |
| If payment commitment was broken, was contact re-established? | | | ✓ |
| Have all the related customer numbers (e.g. Trade and Financed) been researched and identified to be written off? (Needs discussion and review). | ✓ | | |
| Have the appropriate administrators been notified of the write-off action? (both Trade and Finance) | ✓ | | |
| Was the CBU Business Manager or if XBS account, XBS Operations Controller notified of the Write-off action? (includes notification of stop service/stop supplies).<br>Note: This action is not required for write-offs involving bankrupt accounts. | | | ✓ |
| Was a final letter sent? (Not older than 45 days) | | | ✓ |
| Was a final call made to the decision-maker? Or were at least two attempts made to contact the decision-maker (over two business days) after sending the final letter? | | | ✓ |
| Was the account placed on stop service in the FWSS system and placed on a stop supplies status in APEX? (Attach FWSS Screen showing Stop Service Message and C2 screen page 2 showing COD) | | | ✓ |
| If Supply invoices, is POD included? If Service invoices, is Service History included? | | | ✓ |
| Is Executive Summary attached for w/o's over $15K [Trade] 25K [Finance]? | | | ✓ |
| If Chapter 11, will customer assume or reject? PREPETITION | | | ✓ |
| Were pre-petition invoices isolated into individual Customer Numbers? | ✓ | | |
| If Chapter 7, is contract being rejected Y/N –Was machine picked-up? | | | ✓ |
| If Bankruptcy, is Proof of Claim Worksheet included? | ✓ | | |
| Was cancellation processed? | ✓ | | |
| Was CAPS Bill Code changed to X195? | ✓ | | |
| Were bill outs completed for all Finance & CPC units? | | | ✓ |
| Is XEFP in final status? | | | ✓ |
| If XBS – Was machine picked-up? | | | ✓ |

| | | | |
|---|---|---|---|
| Fundouts 1. Was it approved by CBC Controller or CBC Operations Manager? | | | |
| 2. Is the fundout letter enclosed? | | | |
| 3. Per process, was machine picked-up? | | | |
| | | | |
| | | | |
| Ensure all approval levels have been obtained. | | | |

GOVT

The above action has been completed:
Administrator: Kathleen D. Andres Date: 2/8/02

X The above action has been reviewed:
First Line Manager: [signature] Date: 2/15/02

☐ W/O rejected Comments: _____

## Paperwork Requirements

### $100 -$5,000 band (Almost Paperless)

with the exception of: Cost per Copy, Bankruptcy, Skip, Fund Outs, Failures

| Trade | ✓ | Finance | ✓ |
|---|---|---|---|
| Batch sheet | ✓ | Batch sheet | |
| AC Screen with write off reason code and appropriate signatures [PF5 Listing custo- mer address] | ✓ | Write off cover sheet (FQWO screen) with reason code, notes billed and paid, and appropriate signatures | |
| Any relevant correspondence: Customer letters; sales / service dispute documentation, returned checks; check research; JE / DC back up And Commission Chargeback Memo | | Any relevant correspondence: Customer letters; sales / service dispute documentation; returned checks; check research; JE / DC back up | |

### Write Offs over $5,000+,

plus all: Cost per Copy, Bankruptcy, Skips, Fund Outs, Failures

| Trade | ✓ | Finance | ✓ |
|---|---|---|---|
| Batch sheet | ✓ | Batch sheet | |
| AC Screen with write off reason code and appropriate signatures [PF5 Listing customer address] | ✓ | Write off cover sheet (FQWO screen) with reason code, notes billed and paid, and appropriate signatures | |
| Executive Summary for write-off's over | ✓ | Executive Summary for write-off's over | |

| | | | |
|---|---|---|---|
| $15K (text notation is acceptable) | | $25K (text notation is acceptable) | |
| XOA and all other documents in customer's original file | ✓ | XOA and all other documents in customer's original file | |
| Copy of reversed Promissory Note | N/A | Copy of reversed Promissory Note | |
| FWSS screen showing machine on DNS | N/A | FWSS screen showing machine on DNS | |
| Any relevant correspondence: Customer letters; sales / service dispute documentation; returned checks; check research; JE / DC back up | ✓ | Any relevant correspondence: Customer letters; sales / service dispute documentation; returned checks; check research; JE / DC back up | |
| Proof of Claim worksheet for Bankruptcies | ✓ | Proof of Claim worksheet for Bankruptcies | |
| XBS Contract XBS – Machine Picked-Up | N/A | | |
| Commission Chargeback memo for outright sales | N/A | | |
| Replevin letters if appropriate | N/A | | |
| Invoices on Pooling contracts | N/A | | |

TO. Collection Services

FROM:

Manager, XFC Receivables

*Central Operations*
*Customer Administration*
*4058/MSB2*

DATE: FEBRUARY 8, 2002

SUBJECT:
Lost Contract File For:

| CUSTOMER NAME | |
|---|---|
| Customer Numbers | Customer Numbers |
| 088171483 | |
| | |
| | |
| | |
| | |
| | |

We are submitting this customer as a write-off to Collection Services. In searching for the necessary documents, we are unable to locate the purchase order/service agreement/cancellation paperwork/contract.

Kathleen M. Andris
COLLECTOR

RECEIVABLES MANAGER

```
CN 088171483 B  KMART STORE #3710     MANUAL CALL        ISOL5012 13:46 02/07/02
CRID   42MG  I                        ESTB 04/96 XNAC KMM00 BAL          235.96
PRTY         L  PRESS PF5 FOR         ASGN       TERR PB23  PMT 01/14/02 CT  1
BR 6M1G/42M0 L  CUSTOMER ADDRESS      MOS.    MSC CMA  REAS
    INV-DATE A INVOICE-# CD  INVOICE-AMT  S/N - S/O#  P.O.#-XREF CUST(PF9) BILL
1   01/10/02   086395871 21       235.96  0MW-114569  TH1675               5W13


02/07  KH6624-************  WRITE OFF  ************  BNK  ************    SUBMI
       TTING THIS ACCOUNT TOXCS FOR WRITE OFF DUE TO THE CUSTOMER FILING CHAPTE
02/07  R 11. THE INVOICES ON THIS ACCOUNT ARE ALL PRE PETITION. THE FILING DATE
        WAS 01/22/02
02/06  KH6624-REC'D COPY OF CHAPTER 11 FILING FOR KMART, FILED WITH THE U S BAN
       KRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION. A
02/07  KH6624

F/U: 0301 BNKRP K       A/P:  PN   -   -   -    NM
     MMDD NOTES U       USER: PN   -   -   -    NM
LTR: 02/01/97 SI: X     PUR:  PN   -   -   -    NM
ACT    KEY                                                          PAGE 01
```

C/N 088171483 A/R TEXT HISTORY ISOL5015 13:46 02/07/02
KMART STORE #3710 CRID 42MG PRIORITY #
C/N
02/07 KH6624-********** WRITE OFF ********** BNK ********** SUBMI
TTING THIS ACCOUNT TOXCS FOR WRITE OFF DUE TO THE CUSTOMER FILING CHAPTE
02/07 R 11. THE INVOICES ON THIS ACCOUNT ARE ALL PRE PETITION. THE FILING DATE
WAS 01/22/02
02/06 KH6624-REC'D COPY OF CHAPTER 11 FILING FOR KMART, FILED WITH THE U S BAN
KRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION. A
02/06 CTUAL PACKET RECEIVED BY FAX 01/31/02, FAXED FROM KMART VENDOR RELATIONS
@ 877-453-5693
12/21 X06623-REC'D EMAIL FROM OTI ON PENDING P/U OF 0MW--114569 12/21/01
12/12* KH6624- ********ALL FUTURE TEXT FOR KMART ACCOUNTS TO BE UPDATED ON MAIN
C/N 307428912 DUE TO LARGE VOLUMN OF CUSTOMER ACCOUNTS**********
12/12* ONLY TEXT SPECIFIC TO AN ACCOUNT WILL BE UPDATED ON THESPECIFIC ACCOUNT*
*******
12/11 0MW11456903/REFUSES TO GIVE READ MARY JAY AT (724) 775-3400 EXT. 2100: P
ER MARY JAY, THIS MACH IS SITTING IN THEIR STOCK ROOM. THEY ARE USING A
KH6624
MMDD



ACT KEY

C/N 088171483 A/R TEXT HISTORY ISOL5015 13:46 02/07/02
KMART STORE #3710 CRID 42MG PRIORITY #
C/N
12/11 KONICA COPIER.
08/11 X06623-****CUSTOMER ACCOUNTS UNDER RESEARCH////NO DIRECT CONTACT WILL BE MADE TO THE CUSTOMER UNTIL RESEARCH IS COMPLETED*****

KH6624
MMDD

ACT KEY

C/N 088171483 CRID 42MG A/R ACCOUNT SUMMARY ISOL5010 13:46 02/07/02

KMART STORE #3710 OUTSTDG BAL 235.96

BRN 42M0 XNAC KMM00 PMT1 01/14/02 DEALER

TER PB23 ESTB 04/96 PMT2 11/28/01

D/U PB23 SALE 01/10/02 PMT3 11/13/01

FEB: PRIORITY REAS

JAN: PRIORITY 99700 REAS 21

DEC: PRIORITY REAS

| AGING: | DEBIT | CREDIT | NET AMT |
|---|---|---|---|
| TOT | 235.96 | | 235.96 |
| CURR MO | | | |
| 0-30 | 235 | | 235 |
| 31-60 | | | |
| 61-90 | | | |
| 91-120 | | | |
| 121-150 | | | |
| 151-180 | | | |
| 60+ | | | |
| 180+ | | | |
| 331-360 | | | |
| 360+ | | | |

ACT KEY

| CURRENT YEAR: | |
|---|---|
| BEG BAL | 44.52 |
| PMT ON BB | 44.52 |
| SALES | 235.96 |
| PMT CYSLS | |
| JE ADJ | |
| ACCOM CR | |
| CK REFUND | |
| DISCOUNTS | |
| UNERN DIS | |
| RET CKS | |
| WRITE-OFF: | |
| NM: | |
| YTD AMT | |
| ACCUM AMT | |
| PRIOR YEAR: | |
| SALES | 1,072.68 |
| PAYMENTS | 1,130.55 |
| DISCOUNTS | |
| JE ADJ | |
| ACCOM CR | |

```
PRIVATE DATA                EQUIPMENT INFORMATION              DATE 02/07/02 13:35
TRANS ISTF5810               SERIAL # 0MW114569               SCREEN SWITCH    /
                                                                       PAGE 0001
MF SN-M 0MW114569     CUSTOMER #  088171483 XEEP CUST #              L/L INIT
MARKET CD             CURRENT STATUS    002 OLD STATUS      024  CHARGE TO  M466
MRKT CD V/L           STATUS DT    01/16/02 LST ACTIV  01/16/02  SUBLOC     ESSO
ORDER #               ORDER TYPE            CONDIT CD        06  SHIP TO BR M466
BILL CD/MT            ORDER DATE            MTR SRC CD           SHIP FR BR T603
SW BILL CD        CTRL REF                     PRACH             MSC         CMA
MA BILL CD/MT         FSMA FEED IND     MAINT ASSUR DT           CO-TERM MO
ORIG REV DT           QDI       MPA #         BID #              INS EMP#
INSTALL DT            CONTR EXP DT            SUMM OV IND        ORD EMP#
WARR EXP DT           SW WARR EXP DT          LINK CN-INV GRP #            -
CONVER DT             NTWK ID/TYP            /     CLUSTR ID/TYP           /
CANC CD/DT 98 /           POOL ID/TYP           /     MRC/FEED      /      ESP
CONTR/TYPE            /   GRP/GRP SUM     /   XBS CONT/AMEND           /
LAST MF ATTACHED TO           LAST MRKT CD           INTRM CD/DATE   /
INST NAME/  KMART STORE #3710
 ADDRESS    300 BRIGHTON AVENUE   ROCHESTER         PA  ZIP CODE  15074
PHN# (     )            EXT            REF  RFSCP011602           PCB
PHYS: STAT   002   STAT DT  01/16/02  BUDG  M466  PHY MTR     REF M/F
PRC CD   FIN BON GDS   WRKSHT        /     CPC IND   CPC CD   FIN PLN   SBI
INQUIRY COMPLETE                        NO ADDITIONAL ACCESSORIES
```