

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

PROOF OF CLAIM
Chapter 11

In Re Kmart Corporation, et al

Case Numbers 02-02462 through
02-02499

Your claim is scheduled as follows:

Name of Debtor: (see attached for complete list of debtors)

Case Number:

Class

NOT SCHEDULED

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the bankruptcy case. For payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Amount

NOT SCHEDULED

Name of Creditor (The person or other entity to whom the debtor owes money or property):

08 3342095

MEADOWBROOK FUNCH ASSOCIATES
79 NANCY STREET
W.BABYLON, NY 11704

- 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.

10152065

This Space is for Court Use Only

If address differs from above, please complete the following:

Creditor Name:

Telephone: # 631-2643-2443

Address:

City/ST/Zip:

Account or other number by which creditor identifies debtor: # 426 # 444

Check here if this claim replaces or amends a previously filed claim, dated

1. Basis for Claim

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

- Retiree benefits as defined in 11 U.S.C. §1114(a)
Wages, salaries, and compensation (fill out below)
Your SS #:
Unpaid compensation for services performed from to (date) (date)

2. Date debt was incurred:

8/31/01 + 2 from 12/31/01

3. If court judgment, date obtained:

4. Total Amount of Claim at Time Case Filed:

\$ 4271.65

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 (including a right of setoff).

Brief Description of Collateral:

- Real Estate
Motor Vehicle
Other

Value of Collateral: \$

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

6. Unsecured Priority Claim

Check this box if you have an unsecured priority claim.

Amount entitled to priority \$

Specify the priority of the claim:

- 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).
Contributions to an employee benefit plan - 11 U.S.C. §507(a)(4).
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).
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 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 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

Handwritten initials and number 2622

Date

4-4-02

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):

Handwritten signature and name PRES

APR 11 2002

COURT CLERK

4-9-02

AGED RECEIVABLES REPORT  
MEADOWBROOK PARKING AREA CONT.

DATE: 02/28/02  
PERIOD: 02/28/02

TRX#	DOC#	APLYTO	DATE	TYPE	0-30	31-60	61-90	OVER 90
[REDACTED]								
00426		K-Mart Corporation	08/31/01	INV				
72051	036226	036226	02/04/02	PMT				
74510	951748	036226	12/31/01	INV				
73826	037155	037155	01/31/02	INV				
74374	037465	037465	02/28/02	INV				
74789	037667	037667	4,185.93					
[REDACTED]								
00444		K-Mart Corporation	12/31/01	INV				
73825	037154	037154	02/04/02	PMT				
74509	951748	037154	01/31/02	INV				
74373	037464	037464	02/28/02	INV				
74788	037666	037666	2,965.48					

(516) 520-3947 FAX:

1,395.31  
-1,395.31

1,395.31

1,395.31  
1,395.31  
2,790.62

0.00

0.00

(516) 520-3947 FAX:

1,481.03  
-1,477.61

1,481.03  
1,481.03  
2,962.06

3.42

0.00

28,129.92

Open pmgs  
1-22-02  
CPT 11

# INVOICE

PAGE NO.	INVOICE NUMBER	INVOICE DATE	CUSTOMER NO.
1	036226	08/31/01	00426
WORK ORDER NO.		B.O.	
036226			

K-Mart  
 111 Jericho Turnpike  
 DUNS #332593  
 Syosset, NY 11791

K-Mart Corporation  
 111 Jericho Tpke.  
 DUNS #332593  
 Store# 7492  
 Syosset, NY 11791

O T P H S

MEADOWBROOK PARKING AREA CONT.  
 79 NANCY STREET  
 WEST BABYLON NY 11704  
 (631) 643-2443

DATE SHIPPED	PURCHASE ORDER NO.	DATE REQUESTED	SHIP VIA	F.O.B.
08/31/01		08/31/01		
BUYER	DEPT.	TERMS	SALESPERSON	STATE
		NET 30		NY
ITEM NO.	DESCRIPTION	QUANTITY	ORDERED	BACK ORD
EXTENDED AMOUNT	UNIT PRICE	QUANTITY	ORDERED	BACK ORD
1286.00	1286.00	1	1	1
109.31				

SUB-TOTAL 1286.00  
 8.5% SALES TAX 109.31

PLEASE REMIT THIS AMOUNT TOTAL 1395.31

INVOICE NO. 036226

DUPLICATE

VOICE: (516) 520-3947 FAX

# INVOICE

PAGE NO.	INVOICE NUMBER	INVOICE DATE	CUSTOMER NO.
1	037154	12/31/01	00444
WORK ORDER NO.	B.O.	037154	

K-Mart Corporation - #4871  
 2280 North Ocean Avenue  
 DUNS #332593  
 Farmingville, NY

K-Mart Corporation  
 2280 North Ocean Avenue  
 DUNS #332593  
 Store #4871  
 Farmingville, NY 11738

MEADOWBROOK PARKING AREA CONT.  
 79 NANCY STREET  
 WEST BABYLON NY 11704  
 (631) 643-2443

O T P H S

O T P H S

DATE SHIPPED	12/31/01	PURCHASE ORDER NO.		DATE REQUESTED	12/31/01	SHIP VIA		F.O.B.	
BUYER		DEPT.		TERMS	NET 30	SALESPERSON		STATE	NY

ITEM NO.	DESCRIPTION	QUANTITY	ORDERED	BACK ORD.	SHIPPED	UNIT PRICE	EXTENDED AMOUNT
	For December parking lot sweeping and perimeter clean up	1				1365.00	1365.00
	SUB-TOTAL						1365.00
	8.5% SALES TAX						116.03
	<b>TOTAL</b>						<b>1481.03</b>

PLEASE REMIT THIS AMOUNT

INVOICE NO. 037154

DUPLICATE

VOICE: (516) 520-2947 FAX

MEADOWBROOK PARKING AREA CONT.  
 79 NANCY STREET  
 WEST BABYLON NY 11704  
 (631) 643-2443

K-Mart Corporation  
 111 Jericho Tpke.  
 DUNS #332593  
 Store# 7492  
 Syosset, NY 11791

K-Mart  
 111 Jericho Turnpike  
 DUNS #332593  
 Syosset, NY 11791

O T P I S

PAGE NO.	INVOICE NUMBER	INVOICE DATE	CUSTOMER NO.
1	037155	12/31/01	00426
WORK ORDER NO.		B.O.	
037155			

**INVOICE**

DATE SHIPPED	12/31/01	PURCHASE ORDER NO.		DATE REQUESTED	12/31/01	SHIP VIA		F.O.B.	
BUYER		DEPT.		TERMS	NET 30	SALESPERSON		STATE	0001 NY

ITEM NO.	DESCRIPTION	ORDERED	QUANTITY	BACK ORD.	SHIPPED	UNIT PRICE	EXTENDED AMOUNT
	For December parking lot sweeping and perimeter clean up	1	1			1286.00	1286.00
	SUB-TOTAL						1286.00
	8.5% SALES TAX						109.31
	<b>TOTAL</b>						<b>1395.31</b>

PLEASE REMIT THIS AMOUNT  
 INVOICE NO. 037155  
 DUPLICATE  
 VOICER: (516) 520-3947 FAX

**The Bank of New York**

Date: Feb 11, 2002 Advice D-590226

Acct: 020/06900769790

Please be advised your account has been debited for the enclosed check(s) and is subject to a \$10.00 fee for each item returned/redeposited. Contact your branch if you have any questions.

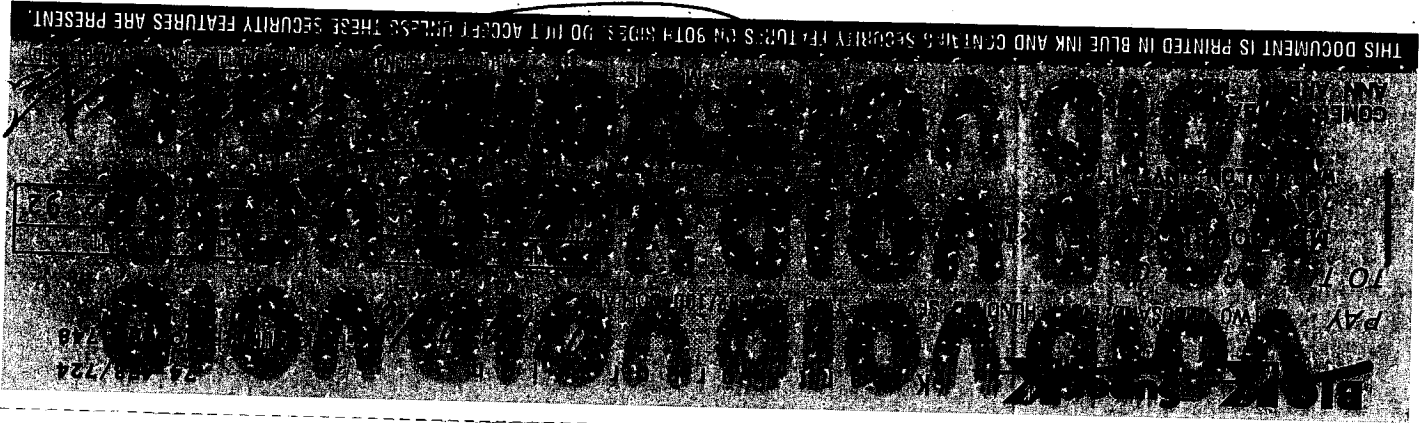
**REASON**  
Stop Pay

SEQ # ITEM AMOUNT  
01405 2,872.92

FUNCH ASSOCIATES, INC.  
DBA MEADOWBROOK PKG AREA CONTRACTOR  
DBA/ MR SWEEPIT  
79 NANCY ST  
WEST BABYLON NY 11704-1403

1 Item charged totaling \$2,872.92  
Advice Total \$2,872.92

⑆0000590225⑆ ⑆402333198⑆ 000006900769790⑆ ⑆0000287292⑆



⑆003951748⑆ ⑆022404286⑆ 217696539⑆ ⑆0000287292⑆

THIS DOCUMENT IS PRINTED IN BLUE INK AND CONTAINS SECURITY FEATURES ON BOTH SIDES. DO NOT ACCEPT UNLESS THESE SECURITY FEATURES ARE PRESENT.