4011489

FORM B10 (Official Form 10)

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
Name of Debtor: (see attached for complete list of debtors) KMart Corporation	**Case Number:** 02-02474

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):

11 3340366

CITY OF CLINTON
PRIVILEGE LICENSE SECTION
P O BOX 199
CLINTON, NC 28329- 019

☐ 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.

Your claim is scheduled as follows:

Class
UNSECURED PRIORITY

Amount
CONTINGENT, UNLIQUIDATED

10105622

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If address differs from above, please complete the following:
Creditor Name:

Address:

City/St/Zip:

Telephone: # 910-592-1961 ext. 3012

Account or other number by which creditor identifies debtor:
#2110

Check here if this claim ☐ replaces ☐ 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 _____ (date) to _____ (date)

2. Date debt was incurred:
7-1-2002

3. If court judgment, date obtained:

4. Total Amount of Claim at Time Case Filed: $ 729.00
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 $ 729.00
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 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.

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RECEIVED
TRUMBULL SERVICES
BANKRUPTCY
2002 APR 12 PM 3:25
3734

04-12-02
98

Date	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):
4-8-02	Lisa A. Carter Tax Collector

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.

CITY OF CLINTON PRINT SCREEN
1.01 DATE 04/08/2002 TIME 10:33:16 PAGE 0001

USER ID LISA

TERMINAL 10

ACCOUNTS RECEIVABLE HISTORY INQUIRY ARHISINQ 2.06

Customer 2110 K MART OF NORTH CAROLINA LLC
Invoice 1489 PRIVILEGE LICENSE

Description	Date	Reference	Principal	Interest	Balance
					729.00
BILLING	06/01/2001		729.00		.00
PAYMENT	06/25/2001	65022	729.00-		

End of history transactions <CR> to continue

Billing for 2002 - $729.00

CITY OF CLINTON PRINT SCREEN
1.01 DATE 04/08/2002 TIME 10:34:10 PAGE 0001

USER ID LISA

TERMINAL 10

BILLING MASTER FILE INQUIRY PLBILINQ 2.05

Customer 2110 K MART OF NORTH CAROLINA LLC 403 SOUTHEAST BLVD.

Ref	Code	License Description	Units/Receipts	Invoice	License
1.	5	MISC. ITEMS-NOT OTHERWISED TAXED/SEC. 14	1	1489	758
2.	120	AUTOMOTIVE SERVICE STATIONS/SEC. 14-103.	1	1489	758
3.	145	AWNINGS & TENTS/SEC. 14-42	1	1489	758
4.	181	SALE OF BEER "OFF PREMISES"/SEC. 14-47	1	1489	758
5.	185	SALE OF WINE "FORTIFIED"/SEC. 14-47	1	1489	758
6.	190	SALE OF WINE "UNFORTIFIED"/SEC. 14-47	1	1489	758
7.	195	GEN. BUS. LIC.-TAXED SEP. BICYCLES/SEC.	1	1489	758
8.	240	BOOK STORES/SEC. 14-53	1	1489	758
9.	280	CHAIN STORE/SEC. 14-58	1	1489	758
10.	285	CLOTHING STORE/SEC. 14-59	1	1489	758
11.	300	CONFECTIONARY OR FRUIT STANDS/SEC. 14-63	1	1489	758
12.	385	SELLING FLOWERS, PLANTS, ETC./SEC. 14-79	1	1489	758
13.	400	FURNITURE DEALERS/SEC. 14-84	1	1489	758
14.	410	GROCERY STORE; FRUITS & VEGETABLES/SEC.	1	1489	758
15.	415	GUNSMITH & LOCKSMITH/SEC. 14-87	1	1489	758
16.	420	HARDWARE STORES/SEC. 14-88	1	1489	758
17.	450	SELLING & DIST. RETAIL ICE CREAM/SEC. 14	1	1489	758

Select Reference Number __ <CR> For More Records / <F1>=Add

CITY OF CLINTON PRINT SCREEN
1.01 DATE 04/08/2002 TIME 10:34:20 PAGE 0001

USER ID LISA

TERMINAL 10

BILLING MASTER FILE INQUIRY PLBILINQ 2.05

Customer 2110 K MART OF NORTH CAROLINA LLC 403 SOUTHEAST BLVD.

Ref	Code	License Description	Units/Receipts	Invoice	License
1.	470	SELLING JEWELRY, WATCHES, & TRINKETS/SEC	1	1489	758
2.	480	KNIVES, DAGGERS, SLINGSHOTS, ETC./SEC. 1	1	1489	758
3.	520	METALLIC CARRIAGES/SEC. 14-101	1	1489	758
4.	535	NEWSSTAND/SEC. 14-96	1	1489	758
5.	536	PERIODICALS & COMIC BOOKS/SEC. 14-106	1	1489	758
6.	550	OFFICE SUPPLIES/SEC. 14-108	1	1489	758
7.	560	SELLING PAINTING SUPPLIES/SEC. 14-110.02	1	1489	758
8.	590	SALE OF RADIOS,RECORDS,PIANOS,TV'S,CDS/S	1	1489	758
9.	600	SELLING FIREARMS/SEC. 14-116	1	1489	758
10.	614	SELLING SHOES/SEC. 14-	1	1489	758
11.	650	SUNDRIES/DISP.MACHINES-DRINKS,CIGAR,/SEC	1	1489	758
12.	683	SELLING OR RENTING VIDEOS&RECORDERS/SEC.	1	1489	758
13.	695	MISC. SERVICES-NOT OTHERWISE TAXED/SEC14	1	1489	758

Select Reference Number __ <CR> For More Records / <F1>=Add