FORM B10 (Official Form 10) 4007816

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)

Case Number:

Your claim is scheduled as follows

Class

UNSECURED NON PRIORITY

Amount

CONTINGENT, DISPUTED, UNLIQUIDATED

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)

DENNIS, REGINA 11 2970460
C/O LAW OFFICES OF ZERILLA SAM P
ZERILLA SAM P
243 ADAMS AVE
MEMPHIS, TN 38103

☐ 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

10098577

If address differs from above, please complete the following:

Creditor Name Telephone #

Address

City/St/Zip

This Space is for Court Use Only

Account or other number by which creditor identifies debtor

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:

3. If court judgment, 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
☐ 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 $ _,___ 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

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)
4/11/02	Sam P. Zerilla, atty for Regina Dennis

A.B. 4-15-02 4201

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

***Please see attached letter for further details.

Court of General Sessions
State of Tennessee, County of Shelby

CIVIL WARRANT No. 858275

To Any Lawful Officer to Execute and Return:

Summon the Defendant (s) Kmart Corporation - by serving the agent for service of process: CT Corporation Systems

530 Gay Street, Knoxville, TN, 37902

to appear before the Court of General Sessions of Shelby County, Tennessee, to be held at the Courtrooms of said Court in said County and there to answer in a civil action brought by the Plaintiff (s) Regina Dennis

for damages and personal injuries sustained by the Plaintiff when a flag pole fell off of a shelf in the Kmart store on Austin Peay Highway in Memphis, TN, on or about July 1, 2000, injuring your Plaintiff. In accordance with TCA 24-5-113, medical bills are attached to this Civil Warrant.

under _____ Dollars

Issued this _____ day of _____ ,19

CHRIS TURNER, Clerk of General Sessions

By _____ Deputy Clerk

Atty for Pltf. Sam P. Zerilla

Address 243 Adams Avenue, Memphis, TN, 38103

Phone (901) 525-1616

Code No. Z83403

B.P.R No 8605

JUDGMENT

_____ Judgment for _____

IRBY CLINIC
3572 HICKORY HILL
MEMPHIS, TN 38115
(901)365-2500

Statement Date	Page
9/14/2000	1

REGINA DENNIS 206
1595 WAVERLY
MEMPHIS, TN 38016

Chart Number
DENRE000

Date	Document	Description	Case Number	Amount
		Previous Balance		**0.00**
Patient REGINA DENNIS 206		Chart # DENRE000	Case Description F/D	
8/22/2000	0008220000	Comprehensive Visit & Physical Exam	247	185 00
8/22/2000	0008220000	Hot Pack - One Day Therapy	247	30 00
8/22/2000	0008220000	ULTRA SOUND	247	40 00
8/22/2000	0008220000	Cervical Spine - 5v	247	150 00
8/30/2000	0008300000	Office Visit - Recheck	247	65 00
8/30/2000	0008300000	Hot Pack - One Day Therapy	247	30 00
8/30/2000	0008300000	ULTRA SOUND	247	40 00
9/6/2000	0009060000	Office Visit - Discharge	247	90 00
9/6/2000	0009060000	Hot Pack - One Day Therapy	247	30 00
9/6/2000	0009060000	ULTRA SOUND	247	40 00

Total Charges	Total Payments	Total Adjustments	Balance Due
$700 00	$0 00	$0 00	**700.00**

Bill for Services

Patient No.: DENNRE-CI REGINA DENNIS
1595 WAVERLY
MEMPHIS TN 38106

Date: 10/26/00

Bill No.:

Date	Place of Service	Proc Code	Procedure	Charge
07/02/00	OFFICE	99202	NEW PT VISIT TYPE 2	73.00
07/02/00	OFFICE	J8499	RELAFEN 500MG 20 TAB 500 MGS #20 TABS	29.00

Total: 102.00
Payments: 102.00
Balance Due: 0.00

Diagnosis 1. 524.62 4.
2. 723.1 5.
3. 6.

Date of first symptom: 07/01/00
Date first consulted for this condition: 07/02/00
Was illness or injury employment related: YES
Was condition related to an auto accident: NO
Emergency: NO

Insurance Release: Sign here to authorize the physician to release any information to the insurance company that is needed to process this claim.

Assignment of Insurance: I hereby assign my insurance benefits to be paid to the undersigned physician. I am financially responsible for non-covered services.

Patient or authorized persons signature

Date:

Policyholder signature Date

STAGE-BAPTIST MINOR MEDICA
C/O BAPT & PHYS MGMT SERVICES
P.O. BOX 1000,DEPT 343
MEMPHIS TN 38148-0343

Phone: 901-725-2941

Doctor's signature

Date:

Employer I.D. No. 62-1538114
Social security #:

ZERILLA, MOON & GILMORE
ATTORNEYS AT LAW
AN ASSOCIATION OF ATTORNEYS
NOT A PARTNERSHIP
243 ADAMS AVENUE
MEMPHIS, TENNESSEE 38103

SAM P ZERILLA
PHIL ZERILLA, JR
MICHAEL A. MOON
BARRY GILMORE

PHONE: (901) 525-1616
FACSIMILE: (901) 525-3938

April 11, 2002

RE: Regina Dennis vs. Kmart

Dear Sirs

The claim of Regina Dennis arises out of accident that occurred when a flag pole fell off a shelf in the Kmart store on Austin Peay Highway in Memphis, Tennessee on or about July 1, 2000, injuring Ms. Dennis

Certain medical bills were incurred and other losses sustained by her as a result of this incident. A General Sessions Civil Warrant was filed by the undersigned in the General Sessions Court of Shelby County, Tennessee, Docket No. 858275. A copy of the filed Civil Warrant and the attachments to the warrant are enclosed herein

Following the filing of the enclosed Civil Warrant, a settlement was negotiated with the adjuster for Kmart in the amount of $2500.00, however, before the check could be received for this amount, Chapter 11 bankruptcy was filed on behalf of the Kmart Corporation

Please file this Proof of Claim and advise me if there is anything else you need to have in order for this claim to be perfected and filed in accordance with the local rules

Yours very truly,

Sam P. Zerilla

Sam P. Zerilla

SPZ/jp

Enclosures