

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
UNSECURED NON PRIORITY

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 2288992

AMERICAN MAINTENANCE INC
1936 BRENDEL AVENUE
ORLANDO, FL 32808

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.

Amount
~~55,029.30~~
\$ 10,623.80

If address differs from above, please complete the following:
Creditor Name Telephone #
Address
City, St./Zip

10570891
This Space is for Court Use Only

Account or other number by which creditor identifies debtor

Check here if 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 _____ to _____ (date) (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 \$ 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
4768
TRUST
2002 APR 15 11 15 AM '02
4-15-02
BANKRUPTCY
283

Date
4-15-02

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)

Invoice

AMERICAN MAINTENANCE MID FLORIDA SWEEPING

1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE

INVOICE #

1/1/02

27301

BILL TO

K-Mart #3179
7825 S Orange Blossom Trail
Orlando, FL 32809

PO NUMBER

TERMS

PROJECT

Net 30

QUANTITY

DESCRIPTION

RATE

AMOUNT

Parking Lot Sweeping

DUNS #00-066-5760

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL

\$729 (0)

Invoice

AMERICAN MAINTENANCE MID FLORIDA SWEEPING

1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE

INVOICE #

1/1/02

27296

BILL TO

K-Mart #7231
1715 N Citrus Blvd
Leesburg, FL 34748

PO NUMBER

TERMS

PROJECT

Net 30

QUANTITY

DESCRIPTION

RATE

AMOUNT

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL

\$822 (X)

Invoice

AMERICAN MAINTENANCE MID FLORIDA SWEEPING

1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE

INVOICE #

1/1/02

27300

BILL TO

K-Mart #7339
2620 N Hiwassee Rd
Orlando, FL 32811

PO NUMBER

TERMS

PROJECT

Net 30

QUANTITY

DESCRIPTION

RATE

AMOUNT

Landscape Maintenance

DUNS #00-066-5760

364.00

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL

\$364.00

Invoice

AMERICAN MAINTENANCE MID FLORIDA SWEEPING

1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE

INVOICE #

9/1/01

24777

BILL TO

K-Mart #3676
810 Saxon Blvd
Orange City, FL 32763

P.O. NUMBER

TERMS

PROJECT

Net 30

QUANTITY

DESCRIPTION

RATE

AMOUNT

DUNS #00-066-5760

\$40.00

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL

\$640.00

Invoice

AMERICAN MAINTENANCE MID FLORIDA SWEEPING

1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE

INVOICE #

1/1/02

27302

BILL TO

K-Mart #3676
810 Saxon Blvd
Orange City, FL 32763

PO NUMBER

TERMS

PROJECT

Net 30

QUANTITY

DESCRIPTION

RATE

AMOUNT

~~Parting Lot Sweeping~~

650.00

650.00

DUNS #00-066-5760

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL

\$650.00

Invoice

AMERICAN MAINTENANCE MID FLORIDA SWEEPING

1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE

INVOICE #

10/1/01

25378

BILL TO

K-Mart #7233
2211 Irls Bronson Memorial Highway
Kissimmee, FL 32741

PO NUMBER

TERMS

PROJECT

Net 30

QUANTITY

DESCRIPTION

RATE

AMOUNT

1,435.00

DUNS #00-066-9760

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL

\$1,435.00

Invoice

AMERICAN MAINTENANCE MID FLORIDA SWEEPING

1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE

INVOICE #

11/20/01

26356

BILL TO

K-Mart #7233
2211 Irlo Bronson Memorial Highway
Kissimmee, FL 32741

PO NUMBER

TERMS

PROJECT

Net 30

QUANTITY

DESCRIPTION

RATE

AMOUNT

of building in same area - 13,252 sq ft total

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL

\$662.60

Invoice

**AMERICAN MAINTENANCE
MID FLORIDA SWEEPING**
1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE INVOICE #

12/1/01 26684

BILL TO

K-Mart #7233
2211 Irl Bronson Memorial Highway
Kissimmee, FL 32741

PO NUMBER TERMS PROJECT

Net 30

QUANTITY DESCRIPTION RATE AMOUNT

PAIDING
DEB# 402-066-5760

1,240.00

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL \$1,240.00

Invoice

**AMERICAN MAINTENANCE
MID FLORIDA SWEEPING**
1936 BRENGLE AVE
ORLANDO, FL 32808
407-298-0911
407-291-4300

DATE	INVOICE #
12/31/01	27009

BILL TO

K-Mart #7233
2211 Irlo Bronson Memorial Highway
Kissimmee, FL 32741

PO NUMBER	TERMS	PROJECT
	Net 30	

QUANTITY	DESCRIPTION	RATE	AMOUNT
	Zones 1 - 2 - OK		
	Zone 3		
	4" pop up	2.00	
	Nozzle	1.65	1.65
	1/2" street all	0.75	
	Zones 4 - 5 - OK		
1.25	Labor	40.00	50.00

SERVICING
DAYTONA - JACKSONVILLE - MELBOURNE - ORLANDO - TAMPA

TOTAL \$55.30

