

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		PROOF OF CLAIM Chapter 11
In Re Kmart Corporation, et al.		Your claim is scheduled as follows:
Case Numbers 02-02462 through 02-02499		Class
Name of Debtor (see attached for complete list of debtors)		NOT SCHEDULED
Case Number:		Amount
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.		NOT SCHEDULED
Name of Creditor (The person or other entity to whom the debtor owes money or property)	<input type="checkbox"/> 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. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.	40,110.63
13 2231701		12500370
If address differs from above, please complete the following:		This Space is for Court Use Only
Creditor Name	Telephone #	
Address		
City/State/Zip		
Account or other number by which creditor identifies debtor	<input type="checkbox"/> Check here if this claim <input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim, dated	
<b>1. Basis for Claim</b> <input checked="" type="checkbox"/> Goods sold <input type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other	<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (fill out below) Your SS # _____ Unpaid compensation for services performed from _____ to _____ (date) (date)	
<b>2. Date debt was incurred:</b> <i>running account</i>	<b>3. If court judgment, date obtained:</b>	
<b>4. Total Amount of Claim at Time Case Filed:</b> \$ <i>40110.63</i> If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> 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.		
<b>5. Secured Claim.</b> <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of Collateral \$ _____ Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____	<b>6. Unsecured Priority Claim.</b> <input type="checkbox"/> Check this box if you have an unsecured priority claim. Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> 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) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4) <input type="checkbox"/> 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) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other: Specify applicable paragraph of 11 U.S.C. § 507(a)( )	
<b>7. Credits:</b> The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. <b>8. Supporting Documents:</b> 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. <b>9. Date-Stamped Copy:</b> 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 4771 4-15-02
Date: <i>4-11-02</i>	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): <i>[Signature]</i>	BANKRUPTCY <i>SLB</i>
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		

Advantage Petroleum  
 3085 Widi Creek Pike  
 Newton Square Pa 19073

<input type="checkbox"/> Heating Oil <input type="checkbox"/> Diesel Fuel, non-taxable use only, penalty for misuse.		RECEIVED 1522005 152175111		ACCOUNT DATE LAST 10/9/11		PHONE GALLONS LAST D.D. 10911		ZIP 19073		STATE PA	
PROJECT NO. 11-23-01		ST 5211 ST 2619 152175111		PRICE 3.008 3.113		TAX 3409.92 204.20		BALANCE 3614.32		PAY THIS AMOUNT 3614.32	

ST 5211  
 ST 2619  
 152175111  
 3.008  
 3.113  
 3409.92  
 204.20  
 3614.32  
 3614.32

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

E 1 23-21-9791

*K-MART # 3149  
700 Reed Rd.  
Broomhall PA.*

ZONE	FILL LOC.				TAX
SIZE	DELIVER	KFA	HWS	RO	DROP

1181

PRODUCT	GALLONS	PRICE	AMOUNT
#2	2200	1.159	2549.80
		Pa Tax	152.9
COD	CHARGE		2702.70
NOT FULL	TRUCK NO		

METER READING - BEFORE AND AFTER DELIVERY			
AA 5 8 6			
AA 5 8 5	0	0	0 0 0 0

*Hester Younger*  
CUSTOMER SIGNATURE

ADVANTAGE PETROLEUM

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

E 1 23 21 19 79 1

K-MART # 3051  
 1133 York Rd.  
 Westminster, PA.

ZONE	FILL LOC		TAX
SIZE	DELIVER	KFA	12/27/01
		HVG	RO
			DROP

DEL TO

PRODUCT	GALLONS	PRICE	AMOUNT
*2 oil	3000	1.159	3477.00
		Pa Sales	20862
COD	CHARGE		368562
NOT FULL	THICK N		

METER READING - BEFORE AND AFTER DELIVERY

48" - 70 1/2"  
 12-27-01

X *[Signature]* 107  
 CUSTOMER SIGNATURE

11111

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION

E 1 23 21 979

K. MART # 4361

HAZLET, N.J. \*

ZONE	FILL LOC	TAX
SIZE	DELIVER	KFA
		HWG
		RO
		DROP

11111

PRODUCT	GALLONS	PRICE	AMOUNT
#2	1167.8	1.399	1633.75
		NJ GRT	46.71
COD	CHARGE		1680.46
NOT FULL	TRUCK NO		

METER READING BEFORE AND AFTER DELIVERY

A 7 2 0 0 0 0 0 6

A 7 1 9 0 0 0 0 0

X *Albert Swartz*  
CUSTOMER SIGNATURE

11111

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

E 1 23 21 979

K. MART # 4361

HAZLET, N.J.

ZONE	FILL LOC	TAX
SIZE	DELIVER	KFA
		HWG
		RO
		DROP

12/13/01

PRODUCT	GALLONS	PRICE	AMOUNT
#2	3000	1.159	3477.00
		NJ GRT	120.00
COD	CHARGE		3597.00
NOT FULL	TRUCK NO		

METER READING BEFORE AND AFTER DELIVERY

17" - 51861

FORM NO. 100-1000-1000	
DEPT. NO.	CARD NO.
12/13/01	
DATE	AMOUNT
	432
INITIALS	485

X *M.S. Swartz*  
CUSTOMER SIGNATURE

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

K-MART # 4478

Mercerville, N.J.

ZONE	FILL LOC	TAX
SIZE	DELIVER	RO
	KFA	HWG
		DROP

1/14/02

PRODUCT	GALLONS	PRICE	AMOUNT
#2	2428	1.39	3397.14
		NJ GRT	97.13
COD	CHARGE		3494.3
NOT FULL	TRUCK NO	22	

METER READING - BEFORE AND AFTER DELIVERY

0 0 0 0 0 0

1/14/02

*[Signature]*

X CUSTOMER SIGNATURE

ADVANTAGE RETAILER

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

E 23-21-373

K-MART # 4478  
Mercerville, N.J.

ZONE	FILL LOC	TAX
SIZE	DELIVER	RO
	KFA	HWG
		DROP

12/13/01

PRODUCT	GALLONS	PRICE	AMOUNT
	1515	1.15	1756.93
		NJ GRT	60.64
COD	CHARGE		1817.57
NOT FULL	TRUCK NO		

METER READING - BEFORE AND AFTER DELIVERY

8 4 0 0 0 0 0

X *B. Messer*  
CUSTOMER SIGNATURE

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2


E 1 23 21 731

K-MART # 3187  
Langhorne, P.A.

ZONE	FILL LOC		TAX
SIZE	DELIVER	KFA	HWS
			RO
			DROP

PRODUCT	GALLONS	PRICE	AMOUNT
#2	1784	1159	20676
		Pa Tax	1240
COD	CHARGE		219170
NOT FULL	TRUCK NO		

METER READING BEFORE AND AFTER DELIVERY

1/4/02  
  
 X  
 CUSTOMER SIGNATURE

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

E 1 23 21 731


K-MART # 3187  
Langhorne, P.A.

ZONE	FILL LOC		TAX
SIZE	DELIVER	KFA	HWS
			RO
			DROP

PRODUCT	GALLONS	PRICE	AMOUNT
#2	3000	1399	419700
		Pa Tax	25182
COD	CHARGE		444882
NOT FULL	TRUCK NO		

METER READING BEFORE AND AFTER DELIVERY

24" - 48"

  
 X  
 CUSTOMER SIGNATURE

ADVAINTAGE TECHNOLOGY

035  
2  
E 1 03 2003

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

K-MART #3117  
Willow Grove, PA.

ZONE	FILL LOC.				TAX
SIZE	DELIVER	KFA	HMG.	RO	DROP

111 ST R

PRODUCT	GALLONS	PRICE	AMOUNT
#2	3000	1.39	4170.00
		Pa Tax	251.82
COD	CHARGE		4448.82
NOT FULL	TRUCK NO		
	17		

METER READING BEFORE AND AFTER DELIVERY

1-11-02

Signature: *[Handwritten Signature]*

X  
CUSTOMER SIGNATURE



ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

E 1 23-21-979

3  
K-MART # 3117  
Willow Grove, PA

ZONE	FILL LOC				TAX
SIZE	DELIVER	KFA	HWG	RO	DROP

PRODUCT	GALLONS	PRICE	AMOUNT
#2	3861	1.159	4474.90
		Pa Tax	268.49
			4743.39

METER READING BEFORE AND AFTER DELIVERY

5 9 7 11 0 0 0 1

X  
CUSTOMER SIGNATURE

ADVANTAGE PETROLEUM

ACCOUNT #	TICKET #	TANK	PROD	PRODUCT DESCRIPTION
				#2

E 1 23-21-979

K-MART # 3117  
Willow Grove, PA

ZONE	FILL LOC				TAX
SIZE	DELIVER	KFA	HWG	RO	DROP

PRODUCT	GALLONS	PRICE	AMOUNT
#2	3000	1.159	3477.00
		Pa Tax	308.62
			3785.62

METER READING BEFORE AND AFTER DELIVERY

15"-39"

12-27-01

CUSTOMER SIGNATURE