

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:
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)		Your claim is scheduled as follows: Class UNSECURED NON PRIORITY Amount \$820.90 plus 356.80 Returned checks
KAMA INC ACCOUNTS RECEIVABLE 82111 STREET OMAHA, NE 68127 11 2293561		
If address differs from above, please complete the following: Creditor Name _____ Telephone # _____ Address _____ City/State/Zip _____		10570219 This Space is for Court Use Only
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 _____
1. Basis for Claim <input 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)
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 <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.		
5. Secured Claim <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 \$ _____		6. Unsecured Priority Claim <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)()
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 SM # 4948 4-12-02 BANKRUPTCY
Date 4-8-2002	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) Daniel J Potter DANIEL J POTTER AR	
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		

BIG K Super K

K Mart Corporation 1207 N K's 62-35/311

CHECK NUMBER: 011398066

PAY : THREE HUNDRED FIFTY-SIX AND 80/100 DOLLARS

TO THE ORDER OF

KAMA INC

8211 F STREET
OMAHA NE 68127

REFERTO MAKER
01/11/2002

CHECK AMOUNT
*****356.80

07037206014004 009003496369

Michael

THE BANK OF NEW YORK (DELAWARE)
NEWARK, DELAWARE

VOID AFTER 6 MONTHS

AUTHORIZED SIGNATURE (SIGNATURE LINE CONTAINS X/MART LOGO)

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

⑆0⑆⑆⑆398066⑆⑆ ⑆03⑆⑆0035⑆⑆ ⑆0300975⑆74⑆⑆ ⑆0000035680⑆⑆



12/28/2001 - 09:01AM
INVOICE A1136201
DUPLICATE

Route: 9335 MICKEY H

ARCTIC GLACIER
 8211 F STREET
 OMAHA, NE 68127-1700
 OMAHA (402) 592-9262
 DUBUQUE (800) 397-7626

Account: 11302
 K-MART 3971
 1405 BUCKEYE AVE.

AMES
 50010

QTY	ITEM #	UNIT PRICE	TOTAL \$
6	5 lb Ziplock 115	0.70	4.20
18	20# Bag Tubes 122	2.40	43.20
Product			47.40
TOTAL DUE			47.40
Payment Amount			0.00
Payment Type			CHARGE
In: 24	Out: 20		

Received in good order.

X-----



12/18/2001 - 10:05AM
INVOICE S2135206

Route: 9429 CHARLIE M

ARCTIC GLACIER
 8211 F STREET
 OMAHA, NE 68127-1700
 OMAHA (402) 592-9262
 DUBUQUE (800) 397-7626

Account: 13195
 K-MART 7261
 5049 N. E. 14TH ST

DES MOINES
 50313

QTY	ITEM #	UNIT PRICE	TOTAL \$
42	5 lb Ziplock 115	0.70	29.40
6	20# Bag Tubes 122	2.40	14.40

Product Total \$ 43.80

TOTAL DUE 7261 43.80

Goods Received Date: 12/18/01 Total Cartons Received: \$ 0.00
 Payment Amount: CHARGE
 Payment Type: number of Cartons

In: 48 Out: 0 Short Cover Damaged

Received in good order Received By: *Jon Lamb* Clerk: *5*

X



12/17/2001 - 10:29AM
INVOICE A1135106

Route: 9335 MICKEY H

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (402) 592-8262
DUBUQUE (800) 397-7626

Account: 15287
K-MART

MARSHALLTOWN
50158

QTY	ITEM #	UNIT PRICE	TOTAL \$
30	5 lb Ziplock 115	0.75	22.50
10	20# Bag Tubes 122	2.40	24.00

Product Total \$ 46.50

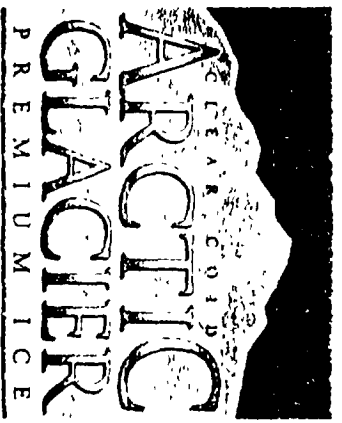
TOTAL DUE \$ 46.50

Payment Amount: 158.35
Payment Type: CHARGE

In: 40 Out: 0
Number of Cartons

Received in good order: Short Over Damaged

Received By: *[Signature]* Clock#



01/15/2002 12:03PM
INVOICE A1201507

Route: 9335 MICKEY H

ARCTIC GLACIER
 8211 F STREET
 OMAHA, NE 68127-1700
 OMAHA (402) 592-9262
 DUBUQUE (800) 397-7626

Account: 15267
 K-MART

MARSHALLTOWN
 50158

QTY	ITEM #	UNIT PRICE	TOTAL \$
26	5 lb Ziplock	0.75	19.50

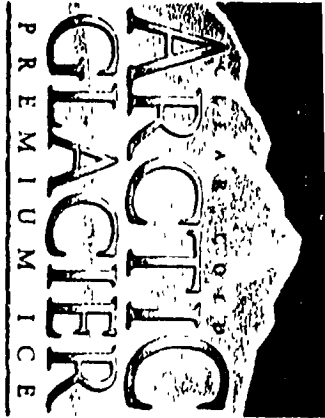
Product Total \$ 19.50

~~TOTAL DUE \$ 19.50~~
1583

Payment Type **1583** Total Cartons Received **0.00**
 CHARGE

ADDN Reserver Date	Total Cartons Received
In: 26	Out: 0
Number of Cartons	

Received in good order:
 Short Over Damaged
 Received By: *[Signature]* CIGCT#
 X



01/03/2002 12:09PM
 INVOICE M3200307
 DUPLICATE
 PO#YY

Route: 9827 CURT T

ARCTIC GLACIER
 8211 F STREET
 OMAHA, NE 68127-1700
 OMAHA (402) 592-9262
 DUBUQUE (800) 397-7626

Account: 14701
 K-MART
 1405 SOUTH GRAND
 CHARLES CITY
 50616

QTY	ITEM #	UNIT PRICE	TOTAL \$
36 - 39	5 lb Ziplock	0.75	27.00
8 - 269	20# Bag Tubes	2.50	20.00

Product Total

TOTAL DUE

7703
 \$ 47.00

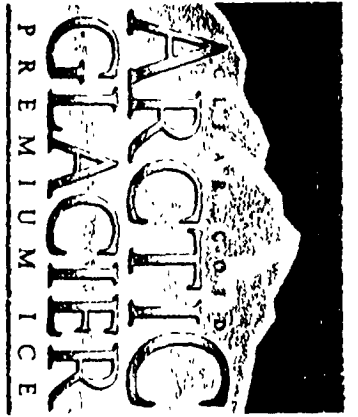
Payment Amount
 Payment Type

In: 44 Out: 0

Received in good

Goods Received Date	1-3-01	ICE ORDER #	7703
Number of Cartons		CHARGE	0.00
Over			
Returned by	<i>Richard</i>		
Good			
Sho			

X



01/03/2002 11:33AM
INVOICE V2200305
DUPLICATE

Route: 1541 MIKE F

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (402) 592-9262
DUBUQUE (800) 397-7626

Account: 15361
BIG K-MART
3808 BRADY STREET
DAVENPORT
52807

QTY	ITEM #	UNIT PRICE	TOTAL \$
24	5 lb Ziplock	0.70	16.80

Product Total \$ 16.80

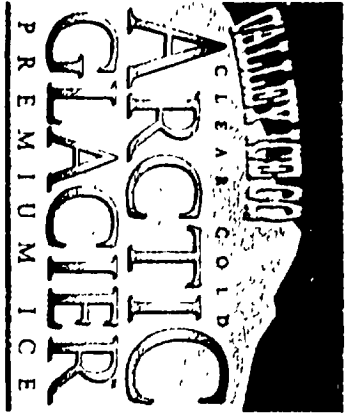
TOTAL DUE \$ 16.80

Payment Amount \$ 0.00
Payment Type 302 CHARGE

In 24 Out: 0

Received in good order:

[Signature]
X



01/08/2002 - 09:09AM
INVOICE 42200802

Route: 420 BART

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (800)333-7340
GRAND I (800)858-0151

Account: 4459
K-MART #3814
4700 N 2ND AVENUE
KEARNEY
688470000

QTY	ITEM #	UNIT PRICE	TOTAL \$
54	7# CUBE	0.70	37.80

Product Total \$ 37.80

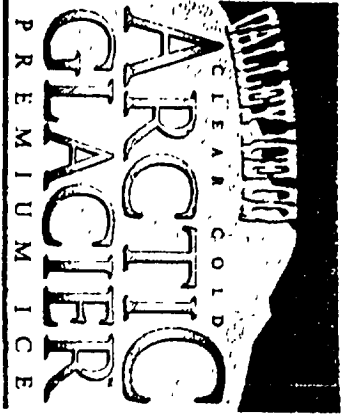
TOTAL DUE \$ 37.80

Payment Amount \$ 0.00
Payment Type CHARGE

In: 54 Out: 0

Received in good order:

X *Hyman Kleiberg*



12/18/2001 12:57PM
INVOICE 02135207
DUPLICATE

Route: 102 DOUG

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
(402) 592-9262
(800) 333-7340

Account: 4843
K-MART #7579
13450 WEST MAPLE
V#614511
OMAHA
681640000

QTY	ITEM #	UNIT PRICE	TOTAL \$
78	7# CUBE	0.70	54.60
107			

074408 358072

Product Total \$ 54.60

TOTAL DUE \$ ~~379~~ 54.60

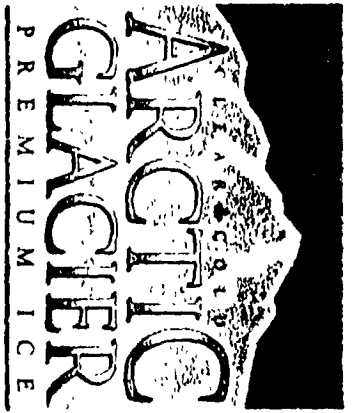
Payment Amount
Payment Type

In: 78 Out: 0

Received in good order:

CASH		0.00	
CREDIT		0.00	
CHECK		0.00	
TOTAL		0.00	
Net	Over	Charged	Damaged
Received By			Checked

X



08/02/2001 - 05:13PM
INVOICE 10121411
DUPLICATE

Route: 110 JASON T

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
(402) 592-9262
(800) 333-7340

Account: 6541
K-MART
12303 WEST CENTER RD
OMAHA
68144

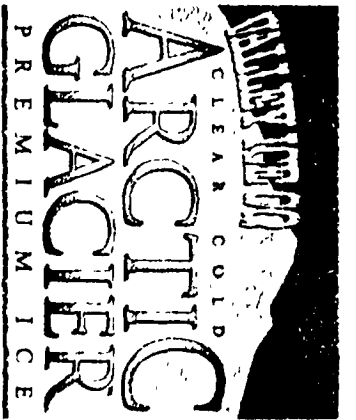
QTY	ITEM #	UNIT PRICE	TOTAL \$
120	7# CUBE	0.70	84.00

Product Total \$ 84.00
TOTAL DUE \$ 84.00

Payment Amount \$ 0.00
Payment Type CHARGE
In: 120 Out: 0

Received in good order:

X *[Signature]*



12/31/2001 09:09AM
INVOICE 23136504
DUPLICATE

Route: 230 DAVID

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (800) 333-7340
LINCOLN (800) 279-9977

Account: 2604
SUPER K MART #7550
3300 NORTH 27TH
VENDOR #867036
LINCOLN
685040000

QTY	ITEM #	UNIT PRICE	TOTAL \$
48	7# CUBE		
107		0.70	33.60

Product Total \$ 33.60

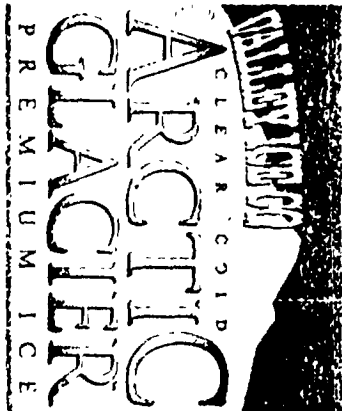
TOTAL DUE \$ 33.60

Payment Amount \$ 0.00
Payment Type CHARGE

In: 48 Out: 0

Received in good order:

X-----
[Signature]



01/04/2002 - 11:03AM
INVOICE 21200402

Route: 210 FRANK

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (800) 333-7340
LINCOLN (800) 279-9977

Account: 2604
SUPER K MART #7550
3300 NORTH 27TH
VENDOR #867036
LINCOLN
685040000

QTY	ITEM #	UNIT PRICE	TOTAL \$
150	7# CUBE	0.70	105.00

Product Total \$ 105.00

TOTAL DUE \$ 105.00

Payment Amount \$ 0.00
Payment Type CHARGE

In: 150 Out: 0

Received in good order:

X- *R.D.*



12/28/2001 : 09:23AM
INVOICE 21136201

Route: 210 FRANK

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (800) 333-7340
LINCOLN (800) 279-9977

Account: 2604
SUPER K MART #7550
3300 NORTH 27TH
VENDOR #867036
LINCOLN
685040000

QTY	ITEM #	UNIT PRICE	TOTAL \$
90	7# CUBE	0.70	63.00

Product Total \$ 63.00

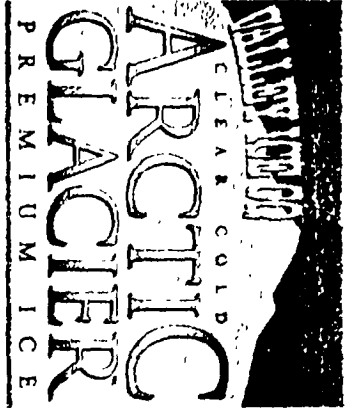
TOTAL DUE \$ 63.00

Payment Amount \$ 0.00
Payment Type CHARGE

In: 90 Out: 0

Received for good order:

X _____



12/24/2001 : 09:29AM
INVOICE 2135802
DUPLICATE

Route: 210 FRANK

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (800) 333-7340
LINCOLN (800) 279-9977

Account: 2604
SUPER K MART #7550
3300 NORTH 27TH
VENDOR #867036
LINCOLN
685040000

QTY	ITEM #	UNIT PRICE	TOTAL \$
96	7# CUBE		
107		0.70	67.20

Product Total \$ 67.20

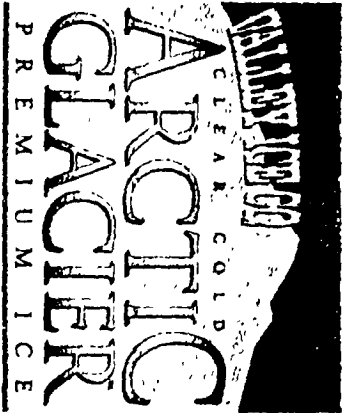
TOTAL DUE \$ 67.20

Payment Amount \$ 0.00
Payment Type CHARGE

In: 96 Out: 0 Food Dept # _____

Received in good order: Super Kmart Center 7550
Lincoln, NE

X *Mrs Snyder*
Dept. Mgr Signature



12/19/2001 - 10:24AM
INVOICE 21135201
DUPLICATE

Route: 210 FRANK

ARCTIC GLACIER
8211 F STREET
OMAHA, NE 68127-1700
OMAHA (800) 333-7340
LINCOLN (800) 279-9977

Account: 2604
SUPER K MART #7550
3300 NORTH 27TH
VENDOR #867036
LINCOLN
685040000

QTY	ITEM #	UNIT PRICE	TOTAL \$
78	7# CUBE	0.70	54.60

Product Total \$ 54.60

TOTAL DUE \$ 54.60

Payment Amount \$ 0.00
Payment Type CHARGE

In: 78 Out: 0

Received in good order:

X. *Shulman* 12/19/01