

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) K-mart Corporation		UNSECURED NON PRIORITY
Case Number: 02-02474		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.		\$2,758.00
Name of Creditor (The person or other entity to whom the debtor owes money or property) 11 2312208 CLARKSVILLE SUPERVAC P O BOX 27 CUNNINGHAM, TN 37052	<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.	This Space is for Court Use Only
If address differs from above, please complete the following:		
Creditor Name Address City/State/Zip	Telephone # 10566609	
Account or other number by which creditor identifies debtor	Check here if <input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim, dated	
1. Basis for Claim <input type="checkbox"/> Goods sold <input checked="" 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: 12/01 10/01 1/02	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.	\$3,616.00	
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	This Space is for Court Use Only	
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		
Date 04/07/02	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) Albert C. Grimes Jr. General Partner	AB 4-12-02 4456

Clarksville Supervac LP
P.O. Box 27
Cunningham, TN 37052

Invoice

DATE **INVOICE #**
10/16/01 **4222**

BILL TO
K-mart Store #4739
2780 Wilma Rudolph Blvd.
Clarksville, TN 37040

Property Location
K-mart Store #4739
2780 Wilma Rudolph Blvd.
Clarksville, TN 37040

DUE DATE
11/15/01

DESCRIPTION	AMOUNT
Oct. parking lot cleaning service. Duns # 00-039-3579	858.00

Total **\$858.00**

Clarksville Supervac LP
P.O. Box 27
Cunningham, TN 37052

Invoice

DATE 1/16/'02
INVOICE # 4352

BILL TO
K-mart Store #7461
2300 Madison
Clarksville, TN 37043

Property Location
K-mart Store #7461
2300 Madison
Clarksville, TN 37043

DUE DATE
2/15/'02

DESCRIPTION	AMOUNT
Jan. parking lot cleaning service. Duns # 00-039-3579	521.00

Total \$521.00

Clarksville Supervac LP
P.O. Box 27
Cunningham, TN 37052

Invoice

DATE INVOICE #
1/16/'02 4353

BILL TO
K-mart Store #4739
2780 Wilma Rudolph Blvd.
Clarksville, TN 37040

Property Location
K-mart Store #4739
2780 Wilma Rudolph Blvd.
Clarksville, TN 37040

DUE DATE
2/15/'02

DESCRIPTION	AMOUNT
Jan. parking lot cleaning service. Duns # 00-039-3579	858.00

Total **\$858.00**

Clarksville Supervac LP
P.O. Box 27
Cunningham, TN 37052

Invoice

DATE 12/13/01
INVOICE # 4309

BILL TO
K-mart Store #7461
2300 Madison
Clarksville, TN 37043

Property Location
K-mart Store #7461
2300 Madison
Clarksville, TN 37043

DUE DATE
1/15/02

DESCRIPTION	AMOUNT
Dec. parking lot cleaning service. Duns # 00-039-3579	521.00

Total \$521.00

Clarksville Supervac LP
P.O. Box 27
Cunningham, TN 37052

Invoice

DATE 12/13/01
INVOICE # 4310

BILL TO
K-mart Store #4739
2780 Wilma Rudolph Blvd.
Clarksville, TN 37040

Property Location
K-mart Store #4739
2780 Wilma Rudolph Blvd.
Clarksville, TN 37040

DUE DATE
1/15/02

DESCRIPTION	AMOUNT
Dec. parking lot cleaning service. Duns # 00-039-3579	858.00

Total \$858.00

CLARKSVILLE SUPERVAC
 (DUNS NUMBER: 00-039-3579)

BANK NO: 12

CHECK DATE : 01/18/2002
 CHECK NUMBER: 004035525
 CHECK AMOUNT: 1,379.00

* PLEASE RENDER STATEMENT EACH MONTH SHOWING ALL PAST DUE INVOICES AND CREDITS. STORE AND INVOICE NUMBER MUST BE SHOWN
 * OPPOSITE EACH CHARGE. ADDRESS ALL CORRESPONDENCE CONCERNING REMITTANCES TO A/P AUDIT DEPARTMENT

STORE NO	DOCUMENT NUMBER	P.O. NUMBER / FICHE NO(*)	DOC. DATE	ENTRY CODE	DOCUMENT AMOUNT	DISCOUNT AMOUNT	DISCOUNT % CODE	DEPT NO.
4739	4310	093520855A*	12/13/01		858.00	00		400
7481	4309	090011371C*	12/13/01		521.00	00		400

8-5 EST.

DOCUMENT TOTAL 1,379.00 DISCOUNT TOTAL .00 1099 WTAX TOTAL .00 NET AMOUNT 1,379.00

DISCOUNT CODE A. ANTICIPATION C. CASH F. FREIGHT T. TRADE



BK0201299-88

OFFICE/BRANCH: 180/180

ADVICE FOR UNPAID DEPOSITED ITEMS

FOR ACCOUNT NO. 4791001-0

ACCOUNT TYPE: CHECKING - NON ANALYSIS

We have charged your account for the unpaid returned items listed below and for the associated per item handling fee(s).

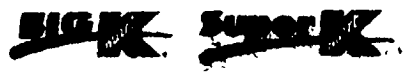
# ITEMS:	1
AMOUNT:	\$1,379.00
FEE:	\$3.25
TOTAL:	\$1,382.25

Reason: STOP PAYMENT

CLARKSVILLE SUPERVAC LP
747 INDIAN CREEK RD
CUMBERLAND FURNACE TN 37051-9061

OLD NATIONAL BANK
P O BOX 11010
EVANSVILLE IN 47701

1-877-453-5692
K-m...



Kmart Corporation

74-478/724
CHECK NUMBER. 004035525

PAY ONE THOUSAND THREE HUNDRED SEVENTY-NINE AND 00/100 DOLLARS

TO THE ORDER OF
CLARKSVILLE SUPERVAC
P O BOX 27
CUNNINGHAM TN 37052

PAYMENT STOPPED

CHECK DATE
01/16/2002

CHECK AMOUNT
*****1,379.00

DO NOT REDEPOSIT

494553496 165 0462 01 01 24-02

COMERICA BANK & TRUST, N.A.
ANN ARBOR, MI

VOID AFTER 6 MONTHS

[Signature]
AUTHORIZED SIGNATURE (SIGNATURE LINE CONTAINS K-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.

⑈004035525⑈ ⑆072404786⑆ 2176965339⑈

⑈0000137900⑈