

UNITED STATES BANKRUPTCY COURT District of Arizona

PROOF OF CLAIM

Name of Debtor: Nutracea, a California corporation

Case Number: 09-28817

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):

RAPAT CORPORATION

Name and address where notices should be sent:

RAPAT CORPORATION
919 O' DONNELL STREET
HAWLEY, MN 56549-4313

Check this box to indicate that this claim amends a previously filed claim.

FILED

Court Claim Number:
(If known)

DEC 03 2009

Telephone number:

Filed on: UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF ARIZONA

Name and address where payment should be sent (if different from above):

Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Telephone number: 218-483-3344

Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 6904.40

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

Specify the priority of the claim.

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).

If all or part of your claim is entitled to priority, complete item 5.

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 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)().

2. Basis for Claim: Goods Sold
(See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: 1175

3a. Debtor may have scheduled account as:
(See instruction #3a on reverse side.)

4. Secured Claim (See instruction #4 on reverse side.)

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff: Real Estate Motor Vehicle Other Describe:

Value of Property: \$ Annual Interest Rate %

Amount of arrearage and other charges as of time case filed included in secured claim,

if any: \$ Basis for perfection:

Amount of Secured Claim: \$ Amount Unsecured: \$

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)

Amount entitled to priority:

\$

*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

Date: 1/24/09

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

Debra Akre Debra Akre, Controller

FOR COURT USE ONLY

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.

INVOICE

RAPAT

C O R P O R A T I O N

919 O'DONNELL STREET
HAWLEY MN 56549

Phone: (218)483-3344

Fax: (218)483-3535

Page: 1 of 1
Date: 2/6/2009

Invoice: 162511

Bill To:

NUTRACEA
%LINDA BAILEY
5090 N 40TH ST, SUITE 400
PHOENIX AZ 85018

Ship To:

NUTRACEA/LAKE CHARLES
6029 JOE SPEARS ROAD
LAKE CHARLES LA 70615

Fax: 602-522-3001

PO Number: 0001293

Terms: 1/3DP N10, N30

F.O.B: HAWLEY MN

Sales Rep: Dan Mergner

Ordered: 1/20/2009

Ship Via: PREPAY & ADD

Packing Slip: 12446

Ship Date: 2/5/2009

Quantity	Part Number/Description	Job Number	Unit Price	Ext Price
1.00	F3018 F3018 FINAL ASSEMBLY	C90099	8,417.00 EA	8,417.00

Line (1) Miscellaneous Charges

Description	Amount
1.) FREIGHT	2,366.40

cm * 5541.⁰⁰ applied

- Taxes -

Description	Taxable Amt	Percent	Amount
INTERSTATE SALE	10,783.40	0.00 %	0.00

Bal Due 5242.⁴⁰

Payment Schedule

Due Date	Amount
1 3/8/2009	10,783.40
Total	10,783.40

Total: 10,783.40

ARForm:001:00

INVOICE

RAPAT

C O R P O R A T I O N

919 O'DONNELL STREET
HAWLEY MN 56549

Phone: (218)483-3344

Fax: (218)483-3535

Invoice: 162372

Page: 1 of 1
Date: 1/22/2009

Sold To:

NUTRACEA
%LINDA BAILEY
5090 N 40TH ST, SUITE 400
PHOENIX AZ 85018

Fax: 602-522-3001

Ship To:

NUTRACEA
%LINDA BAILEY
5090 N 40TH ST, SUITE 400
PHOENIX AZ 85018

PO Number:

Terms: Net 30 Days

F.O.B: HAWLEY MN

Ship Date: 1/22/2009

Quantity	Part Number/Description	Job Number	Unit Price	Ext Price
1.00	CANCEL FEE CANCEL FEE		1,662.00 EA	1,662.00

- Taxes -

Description	Taxable Amt	Percent	Amount
INTERSTATE SALE	1,662.00	0.00 %	0.00

Payment Schedule

Total: 1,662.00

Due Date	Amount
1 2/21/2009	1,662.00
Total	1,662.00

ARForm:001:00