

UNITED STATES BANKRUPTCY COURT
DISTRICT OF DELAWARE

PROOF OF CLAIM

In re: *District of Delaware
Barcalounger Corporation*

Case Number:
10-11637 (BLS)

NOTE: See Reverse for List of Debtors/Case Numbers/ important details. Other than claims under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for administrative expenses 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(a).

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

If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.

THIS SPACE IS FOR COURT USE ONLY

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

Claim Number (if known):

Filed on: _____

Name of Creditor and Address: the person or other entity to whom the debtor owes money or property

 24838954000424
DECKER & ASSOCIATES
719A ORCHARD STREET
MARTINSVILLE, VA 24112

Creditor Telephone Number *703 638-6530*

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

RECEIVED

JUL 22 2010

BMC GROUP

Payment Telephone Number ()

1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ *7,372.88*

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.

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

☐ Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

2. BASIS FOR CLAIM:

Non-Payment

(See instructions #2 and #3a on reverse side.)

3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR:

3125

3a. Debtor may have scheduled account as:

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 set off and provide the requested information

Nature of property or right of setoff:

☐ Real Estate ☐ Motor Vehicle ☐ Other _____

Value of Property: \$ _____ Annual Interest Rate: _____ % if any: \$ _____ Basis for Perfection: _____

Secured Claim Amount: \$ _____ DO NOT include the priority portion of your claim here.

Unsecured Claim Amount: \$ _____

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

5. PRIORITY CLAIM

☐ 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.

You MUST specify the priority of the claim:

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

☒ Wages, salaries, or commissions (up to \$11,725*), 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).

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

Unsecured Priority Claim Amount: \$ _____ Include ONLY the priority portion of your unsecured claim here.

☐ Up to \$2,600* 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) (_____).

* Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

SECTION 503(b)(9) CLAIM \$ _____

☐ Check this box if your claim is for the value of goods received by the debtor within 20 days before the date of commencement of the case (11 U.S.C. § 503(b)(9)). Include the amount of such claim in the space for "Amount entitled to priority" above.

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

7. SUPPORTING DOCUMENTS: Attach redacted copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of evidence of perfection of a security interest. (See instruction 7 and definition of "redacted" on reverse side.) If the documents are not available, please explain.

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.

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

The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is actually received on or before 4:00 pm, prevailing Eastern Time on August 6, 2010 for Non-Governmental Claimants OR on or before November 15, 2010 for Governmental Units.

BY MAIL TO:
BMC Group, Inc
Attn: Barcalounger Corporation Claims Processing
PO Box 3020
Chanhassen, MN 55317-3020

BY HAND OR OVERNIGHT DELIVERY TO:
BMC Group, Inc
Attn: Barcalounger Corporation Claims Processing
18750 Lake Drive East
Chanhassen, MN 55317

THIS SPACE FOR COURT USE ONLY

Barcalounger


00132

DATE

7/15/10

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.

Keith L. Decker

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, there may be exceptions to these general rules.

ITEMS TO BE COMPLETED IN PROOF OF CLAIM FORM (IF NOT ALREADY PROPERLY FILLED IN)

Court, Name of Debtor, and Case Number:

Fill in the name of the federal judicial district where the bankruptcy case was filed (for example Central District of California), the name of the debtor in the bankruptcy case, and the bankruptcy case number. If you received a notice of the case from the Claims Agent, BMC Group, some or all of this information may have been already completed.

Debtor Name

American of Martinsville, Inc.
Barcalounger Corporation

Case No

10-11638
10-11637

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the Bankruptcy filing. Follow the instructions concerning whether to complete item 4. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Use this space to report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

4. Secured Claim:

Check the appropriate box and provide the requested information if the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See DEFINITIONS, below.) State the type and the value of property that secures the claim, attach copies of lien documentation, and state annual interest rate and the amount past due on the claim as of the date of the bankruptcy filing.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. §507(a).

If any portion of your claim falls in one or more of the listed categories, check the appropriate box(es) and state the amount entitled to priority. (See DEFINITIONS, below.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority. Claims entitled to administrative priority under 11 U.S.C. § 503(b)(9) should be asserted by filing in the appropriate information on this Proof of Claim form. All other administrative claims must be asserted by an appropriate "request" under 11 U.S.C. § 503(a) and should not be asserted on this Proof of Claim form.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Supporting Documents:

Attach to this proof of claim form redacted copies documenting the existence of the debt and of any lien securing the debt. You may also attach a summary. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary. FRBP 3001(c) and (d).

Do not send original documents, as attachments may be destroyed after scanning.

Date and Signature:

The person filing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2), authorizes courts to establish local rules specifying what constitutes a signature. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. Attach a complete copy of any power of attorney. Criminal penalties apply for making a false statement on a proof of claim.

Date-Stamped Copy

Return claim form and attachments, if any. If you wish to receive an acknowledgement of your claim, please enclose a self-addressed stamped envelope and a second copy of the proof of claim form with any attachments to the Claims Agent, BMC Group, at the address on the front of this form.

Please read – important information: upon completion of this claim form, you are certifying that the statements herein are true.

Be sure all items are answered on the claim form. If not applicable, insert "Not Applicable."

DEFINITIONS

DEBTOR

A debtor is the person, corporation, or other entity that has filed a bankruptcy case.

CREDITOR

A creditor is any person, corporation, or other entity to whom the debtor owed a debt on the date that the bankruptcy case was filed.

CLAIM

A claim is the creditor's right to receive payment on a debt that was owed by the debtor on the date of the bankruptcy filing. See 11 U.S.C. §101 (5). A claim may be secured or unsecured.

PROOF OF CLAIM

A form telling the bankruptcy court how much the debtor owed a creditor at the time the bankruptcy case was filed (the amount of the creditor's claim). This form must be filed with the court-appointed Claims Agent, BMC Group, at the address listed on the reverse side of this page

SECURED CLAIM Under 11 U.S.C. §506(a)

A secured claim is one backed by a lien on property of the debtor. The claim is secured so long as the creditor has the right to be paid from the property prior to other creditors.

The amount of the secured claim cannot exceed the value of the property. Any amount owed to the creditor in excess of the value of the property is an unsecured claim. Examples of liens on property include a mortgage on real estate or a security interest in a car.

A lien may be voluntarily granted by a debtor or may be obtained through a court proceeding. In some states, a court judgment is a lien. A claim also may be secured if the creditor owes the debtor money (has a right to setoff).

UNSECURED NONPRIORITY CLAIM

If a claim is not a secured claim it is an unsecured claim. A claim may be partly secured and partly unsecured if the property on which a creditor has a lien is not worth enough to pay the creditor in full.

UNSECURED PRIORITY CLAIM Under 11 U.S.C. §507(a)

Priority claims are certain categories of unsecured claims that are paid from the available money or property in a bankruptcy case before other unsecured claims.

Evidence of Perfection

Evidence of perfection may include a mortgage, lien, certificate of title, financing statement, or other

document showing that the lien has been filed or recorded.

Redacted

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. A creditor should redact and use only the last four digits of any social-security, individual's tax-identification, or financial-account number, all but the initials of a minor's name and only the year of any person's date of birth.

Offers to Purchase a Claim

Certain entities are in the business of purchasing claims for an amount less than the face value of the claims. One or more of these entities may contact the creditor and offer to purchase the claim. Some of the written communications from these entities may easily be confused with official court documentation or communications from the debtor. These entities do not represent the bankruptcy court or the debtor. The creditor has no obligation to sell its claim. However, if the creditor decides to sell its claim, any transfer of such claim is subject to FRBP 3001(e), any applicable provisions of the Bankruptcy Code (11 U.S.C. § 101 et seq.), and any applicable orders of the bankruptcy court.

ONCE YOUR CLAIM IS FILED YOU CAN OBTAIN OR VERIFY YOUR CLAIM NUMBER BY VISITING www.bmcgroup.com

keith decker

From: keith decker [kldecker@comcast.net]
Sent: Thursday, July 10, 2008 1:25 PM
To: 'lvogel@americanofmartinsville.com'
Subject: FW: commissions

Leo,

I just received my commission statement and was expecting the commissions for the Best Western Culpeper to be cleared up and added back in the proper amount. I will be happy to give you another copy if you have misplaced. I would appreciate your handling this and adding back to next months statement if not before in a seperate check.

Regards,

Keith L. Decker

From: keith decker [mailto:kldecker@comcast.net]
Sent: Monday, June 16, 2008 7:50 AM
To: 'lvogel@americanofmartinsville.com'
Subject: commissions

Dear Leo,

I wanted to follow up on the commission package I hand delivered last month after a large deduction concerning the Best Western Culpeper. I was expecting a review and to have the commissions added back to this past month's statement. I noticed that no adjustments were made. Can you please give me an update on where we stand?

Regards,

Keith L. Decker

7/10/2008

keith decker

From: keith decker [kldecker@comcast.net]
Sent: Monday, June 16, 2008 7:50 AM
To: 'lvogel@americanofmartinsville.com'
Subject: commissions

Dear Leo,

I wanted to follow up on the commission package I hand delivered last month after a large deduction concerning the Best Western Culpeper. I was expecting a review and to have the commissions added back to this past month's statement. I noticed that no adjustments were made. Can you please give me an update on where we stand?

Regards,

Keith L. Decker

6/16/2008



719A Orchard Street
Martinsville, Virginia 24112 USA
Phone: (276) 638-6530 or (276) 638-6555
Fax: (276) 638-6356
Cell: (276) 252-5257
E-Mail: kldecker@comcast.net

Keith L. Decker
Independent Sales Representative

Leo Vogel
C/O American of Martinsville
128 East Church Street
Martinsville, VA 24112

Dear Leo,

Attached please find copies of information surrounding deductions approved by you from my last commission statement. I normally do not look that closely at my statement but with a \$5537.16 deduction I was forced to review.

My results show that on the invoices in question some adjustments should have been made but only to the benefit of Decker & Associates. I show that the wrong commissions were paid and that AOM owes Decker & Associates \$7372.88.

I think all custom items on these invoices should have been at 4 %. This includes headboards, nightstands, and HDTV cabinets. All other items including upholstery and casegoods have a discount of 7% off list price. Inline casegoods should have a commission of 6% and upholstery should be 4%.

I have included for your review a copy of commission structure in place at the time the order was placed.

It looks to me as if a commission of 2.5% was paid on everything. This is a new commission percentage I am not familiar with. Also it looks as if commission was split with salesman #130, this was done after the fact and I am confused as we worked directly with the owner of this property to specify and purchase in Virginia. No outside people were involved in anyway. Mr. & Mrs. Barnel are longtime customers and predominately work with Carolyn Barker exclusively.

Please give me a call to discuss so that we can have these commissions added back to my next statement.

Regards,

Keith

Keith L. Decker
May 13, 2008



P.O. Box 5071
128 East Church Street
Martinsville, VA 24115-5071
PHONE (276) 632-2061

S. Drury Rothrock
Vice President Hospitality Sales

Custom Commissions

Sales Memorandum

July 13, 2007

TO: Hospitality Sales Representatives
FROM: Dru Rothrock
RE: Commission Structure

Effective with orders entered July 16, 2007 and after, the commission structure on custom casegoods will be as follows:

Product Manufactured in Martinsville, VA

--4% (2% specs. 2% purchase, if appropriate)
--No ship to

Product Manufactured through AOM off-shore Operations

--5%* (2.5% specs. 2.5% purchase, if appropriate)
--no ship to

*Commission will be calculated based on manufacturing sale price less freight cost from factory

If necessary, due to competitive reasons, custom price commissions may be adjusted at management's discretion.

3% HGI - 3% (761-7761 & 6761) Program
800 Residence Inn
~~800~~ Custom Marriott

In-line Commissions

5.2 Hospitality Discount and Commission Structure

Category	Discount	Commission Rate	Requires Approval?
Hospitality Casegoods	List Price	10%	No
Series 2000 Casegoods	1-2%	9%	No
	3-4%	8%	No
	5%	7%	No
	6-7%	6%	No
	8-9%	5%	No
	10%	4%	No
	Greater than 10%	TBD	Yes
Hospitality Upholstery	List Price	8%	No
	5%	5%	No
	6-9%	4%	No
	10%	3%	No
	Greater than 10%	TBD	Yes
Accessories	List Price	10%	No
	5%	5%	No
	Greater than 5%	TBD	Yes

VI. Procedure:

- 6.1 The appropriate Customer Service Representative via fax, regular mail, e-mail, or hand delivery will receive the Sales Order Form.
- 6.2 They will verify that the necessary information is available to enter the order PRIOR TO entering the order into the system.
- 6.3 If either the discount or commission submitted requires approvals, it will be the CSR's responsibility to obtain those approvals before entering the order.
- 6.4 The approvals necessary are as follows:
 - 6.4.1 VP of Sales for that particular Business Unit
 - 6.4.2 VP of Sales and Marketing
- 6.5 At the point that all approvals have been received in writing via initialing the original order received, the order can be entered into the system.
- 6.6 A daily order report will be generated by MIS for review by the Customer Service Manager and the Accounting Department for control. Any discount or commission outside the ranges noted above will be investigated and resolved.

VII. Forms/Exhibits:

SALESMAN # 69 VENDOR # 80305

SALESMAN Keith Decker

SALES REPRESENTATIVE'S REPORT

TERRITORY # 69 \$ 32,311.52

ADDITIONAL

Territory # 0 \$ -
Territory # 0 \$ -
Territory # 0 \$ -

Amount Owed Back to KLD

Commission Adj.	40921850	\$	(23.99)	<u>40</u>
Commission Adj.	40922210	\$	(2,379.22)	<u>\$3,330.92</u>
Commission Adj.	40922910	\$	(1,961.22)	<u>\$2,745.71</u>
Commission Adj.	40921860	\$	(194.29)	<u>\$194.29</u>
Commission Adj.	40922220	\$	(466.56)	<u>\$466.56</u>
Commission Adj.	40922920	\$	(511.88)	<u>\$635.40</u>
			<u>\$5,537.16</u>	<u>\$7,372.88</u>
TOTAL COMM		\$	26,774.36	

MISCELLANEOUS CHARGES

UPS Charges \$ (26.14)
Finders Fee \$ -
A/R Adjustment \$ (300.30)

Additional

Adjustment 0 \$ -
Adjustment 0 \$ -

TOTAL MISC CHARGES \$ (326.44)

TOTAL COMMISSION TO BE PAID \$ 26,447.92

REPORT: I29

GENERATED: 22 MAR 2008 07:26
C O M M I S S I O N S T A T E M E N T

RUN: SUNDAY APR272008 06:38
MONTH : 04 20080426

SALESMAN : 69 KEITH L. DECKER

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
BILL TO BEAUFORT INN	04/15/2008	SHIP TO BEAUFORT INN	339.76-	21.48-	318.28-	.00	0.00
C9228800		C9228800				.00	0.00
INVOICE TOTAL							

BILL TO TRUEX CULLINS & PART	04/16/2008	SHIP TO BOOSKA MOVERS&HAWTHORN SUITES	2,319.00	0.00	2,319.00	.00	0.00
I9229500		I9229500				.00	0.00
INVOICE TOTAL							

BILL TO BEST WESTERN	04/01/2008	SHIP TO BEST WESTERN	1,020.00	173.40	1,020.00	.00	51.00
- 40916550		ORD TOT	1,193.40			.00	51.00
INVOICE TOTAL							

BILL TO DITMAR FURN CO	04/01/2008	SHIP TO THE DOLLY MADISON	7,308.00	1,242.36	7,308.00	.00	365.40
- 40916590		ORD TOT	8,550.36			.00	365.40
INVOICE TOTAL							

BILL TO LIGHTHOUSE VIEW NOTE	04/01/2008	SHIP TO LIGHTHOUSE VIEW MOTEL BUXTON, NC	891.00	212.76	1,221.00	.00	62.37
- 40916620		ORD TOT	330.00			.00	23.10
40916620		ORD TOT	1,433.76			.00	85.47
INVOICE TOTAL							

BILL TO PEAK CONSTRUCTION CO	04/01/2008	SHIP TO PEAK CONSTRUCTION	364.00	29.12	364.00	.00	10.92
- 40916650		ORD TOT	393.12			.00	10.92
INVOICE TOTAL							

BILL TO CROWNE PLAZA RICHMON	04/03/2008	SHIP TO CROWNE PLAZA RICHMOND HOTEL RICHMOND, VA	0.30	0.00	0.00	.00	0.00
- 40916590		ORD TOT	0.00			.00	0.00
INVOICE TOTAL							

BILL TO CROWNE PLAZA RICHMON	04/03/2008	SHIP TO CROWNE PLAZA RICHMOND HOTEL RICHMOND, VA	0.04	0.00	0.00	.00	0.00
- 40917000		ORD TOT	0.00			.00	0.00
INVOICE TOTAL							

BILL TO CROWNE PLAZA RICHMON	04/03/2008	SHIP TO CROWNE PLAZA RICHMOND HOTEL RICHMOND, VA	294.00	0.00	294.00	.00	0.00
- 40917010		ORD TOT	441.00			.00	0.00
40917010		ORD TOT	426.00			.00	0.00
40917010		ORD TOT	135.00			.00	0.00
40917010		ORD TOT	280.00			.00	0.00
INVOICE TOTAL							

BILL TO SHAMIN HOTELS	04/03/2008	SHIP TO WINGATE INN SANDSTON, VA	1,996.00	159.68	1,996.00	.00	59.88
- 40917080		ORD TOT	2,155.68			.00	59.88
40917080		ORD TOT	11,976.00			.00	359.28
INVOICE TOTAL							

REPORT: I29

GENERATED: 22 MAR 2008 07:26
C O M M I S S I O N S T A T E M E N T

RUN: SUNDAY APR272008 06:38
MONTH: 04 20080426

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SALESMAN: 69 KEITH L. DECKER

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH DISC	RATE	COMMISSION AMOUNT	TYPE
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BILL TO ATLANTIC HOSPITALITY SHIP TO COMFORT SUITES BEAUMONT, TX									
-40917260	04/05/2008	97761 401 000	0M487470	74.00				2.22	2.22
INVOICE TOTAL			ORD TOT	82.14	8.14	74.00	.00 .0000	2.22	2.22

BILL TO BEST WESTERN SHIP TO BEST WESTERN EMPORIA, VA									
-40917280	04/04/2008	05670 489 000	0M486220	154.00				7.70	7.70
INVOICE TOTAL			ORD TOT	177.10	23.10	154.00	.00 .0000	7.70	7.70

BILL TO DITTMAR FURN CO SHIP TO THE DOLLY MADISON									
-40917380	04/05/2008	727-85-122	90137170	735.00				36.75	36.75
INVOICE TOTAL			ORD TOT	859.95	124.95	735.00	.00 .0500	36.75	36.75

BILL TO E&R DESIGN & PURCHAS SHIP TO WILLIAMSBURG PLANTATION WILLIAMSBURG, VA									
-40917400	04/04/2008	05315 285 000	0M485340	5,396.00				215.84	215.84
INVOICE TOTAL			ORD TOT	5,935.60	539.60	5,396.00	.00 .0000	215.84	215.84

BILL TO HARPER & STONE SHIP TO RIVERVIEW SUITES WILMINGTON, NC									
-40917450	04/04/2008	01001 965 000	0M483810	351.00				17.55	17.55
INVOICE TOTAL			ORD TOT	412.16	61.16	351.00	.00 .0500	17.55	17.55
40917450 04/04/2008 03156 925 000 0M483820 5,352.30 932.64 5,352.30 .00 .0300 160.57 160.57									
INVOICE TOTAL			ORD TOT	6,357.86	943.46	5,414.40	.00 .0000	178.12	178.12

BILL TO CAROLINA CROSSROADS/ SHIP TO HILTON GARDEN INN ROANOKE RAPIDS, NC									
-40917850	04/07/2008	05226 925 000	0M485420	203.00				6.09	6.09
INVOICE TOTAL			ORD TOT	238.37	35.37	203.00	.00 .0300	6.09	6.09

BILL TO -E&R DESIGN & PURCHAS SHIP TO WILLIAMSBURG PLANTATION WILLIAMSBURG, VA									
INVOICE TOTAL			ORD TOT	0.00	0.00		.00 .0000	0.00	0.00

BILL TO PEAK CONSTRUCTION CO SHIP TO PEAK CONSTRUCTION MCGAHEYSVILLE, VA									
-40918150	04/07/2008	05315 619 000	0M415840	99.00				9.90	9.90
INVOICE TOTAL			ORD TOT	106.92	7.92	99.00	.00 .0000	9.90	9.90
40918150 04/07/2008 00586 619 000 0M485830 376.20 37.62 376.20 .00 .1000 37.62 37.62									
INVOICE TOTAL			ORD TOT	406.29	30.09	376.20	.00 .0000	47.52	47.52

BILL TO KEITH DECKER SHIP TO KEITH DECKER MARTINSVILLE, VA									
-40918360	04/08/2008	05670 080 000	0M487500	121.00				0.00	0.00
INVOICE TOTAL			ORD TOT	63.53	3.03	60.50	.00 .0000	0.00	0.00
40918360 04/08/2008 00101 080 000 0M487510 146.00 3.65 73.00 .00 .0000 0.00 0.00									
INVOICE TOTAL			ORD TOT	76.65	3.65	73.00	.00 .0000	0.00	0.00

REPORT: I29

GENERATED: 22 MAR 2008 07:26
C O M M I S S I O N S T A T E M E N TRUN: SUNDAY APR272008 06:38
MONTH : 04 20080426

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SALESMAN : 69 KEITH L. DECKER

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH DISC	RATE	COMMISSION TYP	AMOUNT
BILL TO KEITH DECKER	04/08/2008	SHIP TO KEITH DECKER	90138680	151.00	151.00	.00	.1000	15.10	15.10 ACC
-40918370	04/08/2008	13185	158.55	7.55	151.00	.00	.0000	15.10	15.10
INVOICE TOTAL									

BILL TO SHAMIN HOTELS	SHIP TO WINGATE INN SANDSTON, VA	CUST NO 574393
-40918380	04/08/2008 00747 610 000	DM481880 1,232.00
40918380	04/08/2008 00747 281 000	DM481880 2,520.00
40918380	04/08/2008 00747 185 000	DM481880 4,676.00
40918380	04/08/2008 00747 472 000	DM481880 7,627.00
40918380	04/08/2008 00747 810 000	DM481880 1,043.00
40918380	04/08/2008 00747 080 000	DM481880 5,460.00
40918380	04/08/2008 00747 170 000	DM481880 936.00
40918380	04/08/2008 00747 490 000	DM481880 280.00
40918380	04/08/2008 00747 651 000	DM481880 1,904.00
ORD TOT 27,732.24		
INVOICE TOTAL 2,054.24		
CUST NO 574393		
25,678.00		
.00 .0300 36.96		
.00 .0300 75.60		
.00 .0300 140.28		
.00 .0300 228.81		
.00 .0300 31.29		
.00 .0300 163.80		
.00 .0300 28.08		
.00 .0300 8.40		
.00 .0300 57.12		
770.34		
770.34		

BILL TO SHAMIN HOTELS	SHIP TO WINGATE INN SANDSTON, VA	CUST NO 574393
-40918390	04/08/2008 08018 915 000	CM483150 705.00
40918390	04/08/2008 09000 004 UPH	ORD TOT 761.40
CM483620 4,284.00		
ORD TOT 4,626.72		
INVOICE TOTAL 342.72		
CUST NO 574393		
4,284.00		
.00 .0300 21.15		
.00 .0000 21.15 UPH		
.00 .0000 128.52		
.00 .0000 128.52 UPH		
149.67		

BILL TO SHAMIN HOTELS	SHIP TO WINGATE INN SANDSTON, VA	CUST NO 574393
-40918400	04/08/2008 03003 925 000	AM483120 2,600.00
40918400	04/08/2008 03003 967 000	ORD TOT 2,808.00
AM483130 1,150.00		
ORD TOT 1,242.00		
DM483140 11,477.00		
ORD TOT 12,395.16		
INVOICE TOTAL 918.16		
CUST NO 574393		
11,477.00		
.00 .0300 78.00		
.00 .0000 78.00 UPH		
.00 .0300 34.50		
.00 .0000 34.50 UPH		
.00 .0300 344.31		
.00 .0000 344.31 UPH		
456.81		

BILL TO -OLD DAY INN/QUALITY	SHIP TO OLD DAY INN/QUALITY INN GEORGETOWN, SC	CUST NO 683100
INVOICE TOTAL	508.13	508.13
CUST NO 683100		
0.00		
.00 .0000 0.00		
0.00		

BILL TO ATLANTIC HOSPITALITY	SHIP TO COMFORT SUITES BEAUMONT, TX	CUST NO 031961
-40918600	04/09/2008 27761 196 000	OM483350 12,580.00
ORD TOT 14,152.50		
INVOICE TOTAL 1,572.50		
CUST NO 031961		
12,580.00		
.00 .0300 377.40		
.00 .0000 377.40		
377.40		

BILL TO ATLANTIC HOSPITALITY	SHIP TO COMFORT SUITES BEAUMONT, TX	CUST NO 031961
-40918610	04/09/2008 27761 281 000	OM487600 543.00
ORD TOT 716.76		
INVOICE TOTAL 173.76		
CUST NO 031961		
543.00		
.00 .0300 16.29		
.00 .0000 16.29		
16.29		

BILL TO E&R DESIGN & PURCHAS	SHIP TO WILLIAMSBURG PLANTATION WILLIAMSBURG, VA	CUST NO 329600
-40918680	04/09/2008 05315 285 000	OM485350 4,260.00
ORD TOT 4,686.00		
INVOICE TOTAL 426.00		
CUST NO 329600		
4,260.00		
.00 .0400 170.40		
.00 .0000 170.40		
170.40		

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INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH DISC RATE	COMMISSION AMOUNT	COMMISSION TYPE
BILL TO SHAMIN HOTELS SHIP TO WINGATE INN SANDSTON, VA								
40918810	04/09/2008	00747 610 000	0M481880	1,056.00		.00	31.68	
40918810	04/09/2008	00747 281 000	0M481880	600.00		.00	18.00	
40918810	04/09/2008	00747 185 000	0M481880	2,171.00		.00	65.13	
40918810	04/09/2008	00747 472 000	0M481880	3,419.00		.00	102.57	
40918810	04/09/2008	00747 810 000	0M481880	894.00		.00	26.82	
40918810	04/09/2008	00747 080 000	0M481880	1,820.00		.00	54.60	
40918810	04/09/2008	00747 170 000	0M481880	1,053.00		.00	31.59	
40918810	04/09/2008	00747 651 000	0M481880	1,785.00		.00	53.55	
INVOICE TOTAL				13,821.84	1,023.84		383.94	
					12,798.00	.00	383.94	
BILL TO SHAMIN HOTELS SHIP TO WINGATE INN SANDSTON, VA								
40918820	04/09/2008	08018 915 000	0M483150	564.00		.00	16.92	
40918820	04/09/2008	09000 004 UPH	ORD TOT	609.12	45.12	.00	16.92	UPH
INVOICE TOTAL				1,989.00	159.12	.00	59.67	
					1,989.00	.00	59.67	UPH
BILL TO SHAMIN HOTELS SHIP TO WINGATE INN SANDSTON, VA								
40918830	04/09/2008	03003 925 000	0M483120	8,320.00		.00	249.60	
40918830	04/09/2008	03003 967 000	ORD TOT	8,985.60	665.60	.00	249.60	UPH
40918830	04/09/2008	03003 955 000	ORD TOT	3,680.00	294.40	.00	110.40	
INVOICE TOTAL				3,493.00	279.44	.00	110.40	UPH
					3,493.00	.00	104.79	UPH
BILL TO HOLIDAY INN EXPRESS SHIP TO HOLIDAY INN EXPRESS FUQUAY VARINA, NC								
40918920	04/09/2008	05315 610 000	0M486420	420.00		.00	12.60	
INVOICE TOTAL				538.02	118.02	.00	12.60	
					420.00	.00	12.60	
BILL TO PEAK CONSTRUCTION CO SHIP TO SUMMIT OWNER'S ASSOC. MCGAHEYSVILLE, VA								
40919200	04/10/2008	05178 960 000	0M481640	16,820.00		.00	1,345.60	
40919200	04/10/2008	05178 905 000	ORD TOT	18,165.60	1,345.60	.00	1,345.60	UPH
INVOICE TOTAL				8,848.00	707.84	.00	707.84	
					8,848.00	.00	707.84	UPH
BILL TO CEEAN HOSPITALITY SHIP TO BEST WESTERN N. MIAMI, FL								
40919370	04/11/2008	00670 490 000	AM486980	339.00		.00	10.17	
INVOICE TOTAL				488.16	149.16	.00	10.17	
					339.00	.00	10.17	
BILL TO LANE HOSPITALITY SHIP TO CROWNE PLAZA CLARK, NJ								
40919580	04/11/2008	05670 121 000	AM485070	10,044.00		.00	1,004.40	
40919580	04/11/2008	05670 780 000	AM485070	9,180.00		.00	918.00	
INVOICE TOTAL				22,107.60	2,883.60	.00	1,922.40	
					19,224.00	.00	1,922.40	
BILL TO SHAMIN HOTELS SHIP TO HOLIDAY INN COLONIAL HEIGHTS COLONIAL HEIGHTS								
40919640	04/11/2008	97801 477 000	BM484210	7,627.00		.00	228.81	

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INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
40919640	04/11/2008	BM484210	4,522.00			.00	135.66
40919640	04/11/2008	BM484210	1,280.00			.00	38.40
40919640	04/11/2008	BM484210	4,313.00			.00	129.39
40919640	04/11/2008	BM484210	2,465.00			.00	73.95
40919640	04/11/2008	BM484210	1,680.00			.00	50.40
		ORD TOT	22,543.61	656.61	21,887.00	.00	656.61
	INVOICE TOTAL						656.61

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
40919680	04/11/2008	BM481681	2,212.00			.00	176.96
		ORD TOT	2,388.96	176.96	2,212.00	.00	176.96 UPH
	INVOICE TOTAL						176.96

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
40919880	04/14/2008	BM481431	288.00			.00	8.64
		ORD TOT	328.96	40.96	288.00	.00	8.64
	INVOICE TOTAL						8.64

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
40919910	04/14/2008	AM484210	3,515.00			.00	105.45
40919910	04/14/2008	AM484210	3,500.00			.00	105.00
		ORD TOT	7,225.45	210.45	7,015.00	.00	210.45
	INVOICE TOTAL						210.45

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
40919990	04/14/2008	OM486910	896.00			.00	26.88
40919990	04/14/2008	OM486910	2,080.00			.00	62.40
40919990	04/14/2008	OM486910	680.00			.00	20.40
40919990	04/14/2008	OM486910	768.00			.00	23.04
		ORD TOT	4,910.64	486.64	4,424.00	.00	132.72
40919990	04/14/2008	OM486920	2,944.00			.00	88.32
40919990	04/14/2008	OM486920	1,904.00			.00	57.12
40919990	04/14/2008	OM486920	4,160.00			.00	124.80
40919990	04/14/2008	OM486920	1,360.00			.00	40.80
40919990	04/14/2008	OM486920	1,536.00			.00	46.08
		ORD TOT	13,213.44	1,309.44	11,904.00	.00	357.12
40919990	04/14/2008	OM486930	184.00			.00	5.52
40919990	04/14/2008	OM486930	357.00			.00	10.71
40919990	04/14/2008	OM486930	520.00			.00	15.60
40919990	04/14/2008	OM486930	170.00			.00	5.10
		ORD TOT	1,366.41	135.41	1,231.00	.00	36.93
40919990	04/14/2008	OT523380	242.00			.00	0.00
		ORD TOT	0.00	0.00	0.00	.00	0.00
	INVOICE TOTAL						526.77

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
40920400	04/15/2008	OM487550	114.00			.00	6.84
		ORD TOT	271.32	157.32	114.00	.00	6.84
	INVOICE TOTAL						6.84

INVOICE NBR.	INVOICE DATE	ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH RATE	COMMISSION TYPE
40920680	04/16/2008	CM485070	10,044.00			.00	1,004.40
40920680	04/16/2008	CM485070	9,180.00			.00	918.00
		ORD TOT	19,224.00			.00	
	INVOICE TOTAL						

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INVOICE
NBR.

ORDER

AMOUNT

ADJUST
AMOUNTADJUSTED
AMOUNTCASH
DISC RATECOMMISSION TYP
AMOUNT

INVOICE TOTAL

ORD TOT

22,107.60

2,883.60

19,224.00

1,922.40

1,922.40

BILL TO DESIGNS BY JO, INC

SHIP TO QUALITY INN LAPLACE, LA

ORD TOT

420.00

0.00

29.40

29.40

INVOICE TOTAL

BILL TO LANE HOSPITALITY

SHIP TO CROWNE PLAZA CLARK, NJ

ORD TOT

10,044.00

9,180.00

22,107.60

2,883.60

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

INVOICE TOTAL

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

INVOICE TOTAL

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

BILL TO LANE SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

ORD TOT

103.00

105.00

35.09

470.64

BILL TO IMIC HOTELS

SHIP TO HAMPTON INN FERNANDINA BCH, FL

ORD TOT

11,088.00

12,972.96

6,192.00

1,052.64

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INVOICE NBR. INVOICE DATE

INVOICE TOTAL

ORDER	AMOUNT	ADJUST AMOUNT	ADJUSTED AMOUNT	CASH DISC	RATE
ORD TOT	105,637.59	10,468.59	95,169.00	.00	.0000

COMMISSION TYP
AMOUNT
4,758.45
4,758.45

BILL TO I&B SERVICES

40922220 04/22/2008 08010 918 000

INVOICE TOTAL

BILL TO INLET FURNITURE

SHIP TO INLET FURNITURE / PICK UP MARTINSVILLE, VA

40922240 04/22/2008 59670 080 000
40922240 04/22/2008 59670 211 000
40922240 04/22/2008 59670 410 000
40922240 04/22/2008 59670 323 000
40922240 04/22/2008 59670 651 000

INVOICE TOTAL

BILL TO GLADE SPRINGS RESORT

40922490 04/23/2008 05315 163 000

INVOICE TOTAL

BILL TO I&B SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

40922910 04/24/2008 05670 628 000
40922910 04/24/2008 05670 811 000
40922910 04/24/2008 05670 510 000
40922910 04/24/2008 05670 180 000

INVOICE TOTAL

BILL TO I&B SERVICES

SHIP TO BEST WESTERN CULPEPER, VA

40922920 04/24/2008 09000 003 BKL
40922920 04/24/2008 03656 920 000

INVOICE TOTAL

BILL TO PIEDMONT DESIGN OF H

SHIP TO STAYBRIDGE SUITES DURHAM, NC

40923110 04/24/2008 08241 282 000
40923110 04/24/2008 08241 250 000

INVOICE TOTAL

BILL TO BAYMONT INN

SHIP TO BAYMONT INN CHEROKEE, NC

40923410 04/25/2008 00101 769 000
40923410 04/25/2008 00101 768 000

INVOICE TOTAL

BILL TO HAMPTON INN

SHIP TO HAMPTON INN WILKESBORO, NC

40923510 04/25/2008 00101 465 000

INVOICE TOTAL

CUST NO	229163	CUST NO	325536
ORD TOT	38,579.38	ORD TOT	532.27

41.90
41.90
41.90

SALESMAN # 69VENDOR # 80305SALESMAN Keith Decker

SALES REPRESENTATIVE'S REPORT

TERRITORY # 69 \$ 32,311.52

ADDITIONAL

Territory #	0	\$	-
Territory #	0	\$	-
Territory #	0	\$	-

Commission Adj.	40921850	\$	(23.99)
Commission Adj.	40922210	\$	(2,379.22)
Commission Adj.	40922910	\$	(1,961.22)
Commission Adj.	40921860	\$	(194.29)
Commission Adj.	40922220	\$	(466.56)
Commission Adj.	40922920	\$	(511.88)

\$5,537.16

TOTAL COMM \$ 26,774.36

Amount Owed Back to Ken

—	\$1,360.75
—	\$416.84
—	\$194.29
—	\$466.56
—	\$635.40

\$3,073.84

MISCELLANEOUS CHARGES

UPS Charges	\$	(26.14)
Finders Fee	\$	-
A/R Adjustment	\$	(300.30)

Additional

Adjustment	0	\$	-
Adjustment	0	\$	-

TOTAL MISC CHARGES \$ (326.44)

TOTAL COMMISSION TO BE PAID \$ 26,447.92



AMERICAN
of MARTINSVILLE

COMMISSION ADJUSTMENT/CORRECTION

Salesman Number # 69

Invoice # 40921850

Explanation of Adjustment/Correction:

Paid commission of 3% but should have been
2.5%

4794.50 x 2.5% = 119.91
143.90
(23.99)

(See page 6 of this months commission report.)

Backup Documentation Attached

Initial dm

Date 5/5/08

Account 2015 Amount (23.99)

REMIT TO:
 AMERICAN OF MARTINSVILLE, INC.
 P.O. Box 535161
 Atlanta, GA 30353-5161



PHONE (276)632-2061
 FAX (276)638-8810

INVOICE NUMBER
 40921850 PAGE 1

Bill-To Account: 443460-0000

NET 30 DAYS ..TERMS

MAIL TO:
 I&B SERVICES
 P.O. BOX 1446
 ATTN: CHARLIE BARREL
 CULPEPER
 VA 227010000

04/21/2008 SHIPPED DATE

Carrier 22384
 SASSY EXPRESS

Sales representative
 KEITH L. DECKER
 SMCALEXANDER

SEQ	QTY SHIPPED	PO. NBR	NA	WORK ORDER NBR.	UNIT PRICE	EXTENDED PRICE
ship-to...		0012..	BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS			
01	1	15772-641-000	END TABLE Cubic Feet__2.41 Weight__38 lbs each	ML000117	103.00	103.00
02	1	15772-644-000	CORNER TABLE Cubic Feet__2.65 Weight__38 lbs each	ML000117	105.00	105.00
03	1	15772-653-000	RECTANGLE CKTL TABLE Cubic Feet__2.88 Weight__35 lbs each	ML000117	111.00	111.00
04	43	15772-643-000	RD. ACCENT TABLE Cubic Feet__2.31 Weight__34 lbs each	ML000117	99.50	4,278.50
05	2	15772-643-000	RD. ACCENT TABLE Cubic Feet__2.31 Weight__34 lbs each	ML000117	99.50	199.00
*** total cubic feet					111.89	
*** total weight					1,641.00	
MERCHANDISE SUB-TOTAL						4,796.50
FREIGHT CHARGE						287.79
VA STATE SALES TAX						239.83
INVOICE AMOUNT *****						5,324.12

69 pd 3% s/b 2.5%

130 pd .5% s/b 2.5%

INVOICE
 DUPLICATE

Susan McAlexander

From: Meagan Lawless
Sent: Friday, April 25, 2008 9:40 AM
To: Susan McAlexander
Cc: Tammy Cardwell
Subject: Best Western Culpeper

Susan,
Per Leo, please fix the commission on the following invoices to 130-2.5% and 69-2.5%.

40922210
40922910
40921850
40922220
40922920
40921860

Thanks
Meagan

Meagan E. Lawless
Customer Service
Phone: (276) 634-2990
Fax: (276) 632-4707
mlawless@americanofmartinsville.com

AMERICAN OF MARTINSVILLE, INC.
 128 EAST CHURCH STREET
 MARTINSVILLE, VIRGINIA 24112-2846
 Phone: (276)632-2061 Fax: (276)632-8810



INVOICE
 40921850
 SALES COPY

Bill-To Account: 443460-0000

PAGE 1
 NET 30 DAYS ..TERMS
 ML0000117

MAIL TO:
 I&B SERVICES
 P.O. BOX 1446
 ATTN: CHARLIE BARRELL
 CULPEPER
 VA

227010000

04/21/2008 INVOICE DATE
 Carrier 22384
 SASSY EXPRESS
 Sales representative
 KEITH L. DECKER

SEQ	QUANTITY	P.O. NUMBER	NA	WORK ORDER	UNIT PRICE	EXTENDED PRICE		0069	0130	0000
01	1	15772-641-000	END TABLE Cubic Feet_2.41 Weight_38 lbs each	ML000117	103.00	103.00	010 0M481790	.0300	.0050	.0000
02	1	15772-644-000	CORNER TABLE Cubic Feet_2.65 Weight_38 lbs each	ML000117	105.00	105.00	020 0M481790	.0300	.0050	.0000
03	1	15772-653-000	RECTANGLE CKTL TABLE Cubic Feet_2.88 Weight_35 lbs each	ML000117	111.00	111.00	030 0M481790	.0300	.0050	.0000
04	43	15772-643-000	RD. ACCENT TABLE Cubic Feet_2.31 Weight_34 lbs each	ML000117	99.50	4,278.50	010 0M482900	.0300	.0050	.0000
05	2	15772-643-000	RD. ACCENT TABLE Cubic Feet_2.31 Weight_34 lbs each	ML000117	99.50	199.00	010 0M483580	.0300	.0050	.0000
						*** total cubic feet 111.89				
						*** total weight 1,641.00				
						MERCHANDISE SUB-TOTAL				4,796.50
						FREIGHT CHARGE				287.79
						VA STATE SALES TAX				239.83
						INVOICE AMOUNT *****				5,324.12

Sales no. & commission PCT



COMMISSION ADJUSTMENT/CORRECTION

Salesman Number # 40922210

Invoice # 69

Explanation of Adjustment/Correction:

paid commission of 5% but should have been 2.5%

95,169.00 x 2.5% = 2,379.23

4,758.45

< 2,379.22 >

(See page 4 of this month's report.)

Backup Documentation Attached

Initial dm

Date 5/5/08

Account 2015 Amount < 2,379.22 >

REMIT TO:
 AMERICAN OF MARTINSVILLE, INC.
 P.O. Box 535161
 Atlanta, GA 30353-5161



PHONE (276)632-2061
 FAX (276)638-8810

INVOICE NUMBER
 40922210 PAGE 1

Bill-To Account: 443460-0000

NET 30 DAYS ..TERMS

MAIL TO:
 I&B SERVICES
 P.O. BOX 1446
 ATTN: CHARLIE BARREL
 CULPEPER
 VA 227010000

04/22/2008 SHIPPED DATE

Carrier 12456
 SASSY EXPRESS

Sales representative
 KEITH L. DECKER
 SMCALEXANDER

SEQ	QTY SHIPPED	P.O. NBR	NA	WORK ORDER NBR.	UNIT PRICE	EXTENDED PRICE
ship-to...		0012..BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS				
01	45	05670-289-000	K HEADBOARD Cubic Feet_8.69 Weight_80 lbs each	ML000117	159.00	7,155.00
02	120	05670-628-000	Q HDBD 36" Cubic Feet_6.81 Weight_57 lbs each	ML000117	129.00	15,480.00
03	77	05670-811-000	N STAND Cubic Feet_7.20 Weight_55 lbs each	ML000117	131.00	10,087.00
04	38	05670-510-000	HDTV BASE Cubic Feet_36.09 Weight_242 lbs each	ML000117	479.00	18,202.00
05	70	05670-410-000	CHEST Cubic Feet_14.37 Weight_120 lbs each	ML000117 ⁷⁴⁰	237.00	16,590.00
06	83	05670-180-000	DESK Cubic Feet_25.47 Weight_83 lbs each	ML000117 ⁷⁴⁰	205.00	17,015.00
07	70	05670-489-000	SQ. GUEST TABLE KD Cubic Feet_3.83 Weight_43 lbs each	ML000117 ⁷⁴⁰	152.00	10,640.00
*** total cubic feet					6,522.08	
*** total weight					42,170.00	

MERCHANDISE SUB-TOTAL 95,169.00
 FREIGHT CHARGE 5,710.14
 VA STATE SALES TAX 4,758.45
 INVOICE AMOUNT ***** 105,637.59

$50,924 \times .06 = 3,055.44$
 $44,245 \times .06 = 2,654.70$
\$5,710.14

Paid \$4,758.45
 Deducted 2,379.22
\$2,379.23

Should be \$5,710.14
 Actual 2,379.22
\$3,330.92

Amount
 Ounc
 K&D

INVOICE

AMERICAN OF MARTINSVILLE, INC.
128 EAST CHURCH STREET
MARTINSVILLE, VIRGINIA 24112-2846
Phone: (276)632-2061 Fax: (276)632-8810



INVOICE
40922210

SALES COPY

Bill-To Account: 443460-0000

PAGE 1

ML0000117

NET 30 DAYS ..TERMS

MAIL TO:

IEB SERVICES
P.O. BOX 1446
ATTN: CHARLIE BARRELL
CULPEPER
VA

04/22/2008 INVOICE DATE

Carrier
SASSY EXPRESS 12456

Sales representative
KEITH L. DECKER

227010000

SEQ	QUANTITY	P.O. NUMBER	NA	WORK ORDER	UNIT PRICE	EXTENDED PRICE
01	45	05670-289-000 K HEADBOARD		ML000117	159.00	7,155.00
		Cubic Feet__8.69 Weight__80 lbs each				
02	120	05670-628-000 Q HDBD 36"		ML000117	129.00	15,480.00
		Cubic Feet__6.81 Weight__57 lbs each				
03	77	05670-811-000 N STAND		ML000117	131.00	10,087.00
		Cubic Feet__7.20 Weight__55 lbs each				
04	38	05670-510-000 HDTV BASE		ML000117	479.00	18,202.00
		Cubic Feet__36.09 Weight__242 lbs each				
05	70	05670-410-000 CHEST		ML000117	237.00	16,590.00
		Cubic Feet__14.37 Weight__120 lbs each				
06	83	05670-180-000 DESK		ML000117	205.00	17,015.00
		Cubic Feet__25.47 Weight__83 lbs each				
07	70	05670-489-000 SQ. GUEST TABLE KD		ML000117	152.00	10,640.00
		Cubic Feet__3.83 Weight__43 lbs each				
		*** total cubic feet				6,522.08
		*** total weight				42,170.00
		MERCHANDISE SUB-TOTAL				95,169.00
		FREIGHT CHARGE				5,710.14
		VA STATE SALES TAX				4,758.45
		INVOICE AMOUNT *****				105,637.59

0069	0130	0000
0001	0050	0000
0002	0050	0000
0003	0050	0000
0004	0050	0000
0005	0050	0000
0006	0050	0000
0007	0050	0000

Sales no. & commission PCT



COMMISSION ADJUSTMENT/CORRECTION

Salesman Number # 69

Invoice # 40922910

Explanation of Adjustment/Correction:

paid commission of 5% but should have paid 2.5%

$$78,449.00 \times 2.5\% = 1,961.23$$

3,922.45

(1,961.22)

(See page 7 of this months report.)

Backup Documentation Attached

Initial dm

Date 5/5/08

Account 2015 Amount (1,961.22)

REMIT TO:
 AMERICAN OF MARTINSVILLE, INC.
 P.O. Box 535161
 Atlanta, GA 30353-5161



PHONE (276)632-2061
 FAX (276)638-8810

INVOICE NUMBER
 40922910 PAGE 1

Bill-To Account: 443460-0000

NET 30 DAYS ..TERMS

MAIL TO:
 I&B SERVICES
 P.O. BOX 1446
 ATTN: CHARLIE BARREL
 CULPEPER
 VA 227010000

04/24/2008 SHIPPED DATE

Carrier 22406
 SASSY EXPRESS

Sales representative
 KEITH L. DECKER
 SMC ALEXANDER

SEQ	QTY SHIPPED	PO. NBR	NA	WORK ORDER NBR.	UNIT PRICE	EXTENDED PRICE
ship-to...		0012..BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS				
01	64	05670-628-000	Q HDBD 36" Cubic Feet_6.81 Weight_57 lbs each	ML000117	129.00	8,256.00
02	84	05670-811-000	N STAND Cubic Feet_7.20 Weight_55 lbs each	ML000117	131.00	11,004.00
03	121	05670-510-000	HDTV BASE Cubic Feet_36.09 Weight_242 lbs each	ML000117	479.00	57,959.00
04	6	05670-180-000	DESK Cubic Feet_25.47 Weight_83 lbs each	ML000117 7%	205.00	1,230.00
*** total cubic feet					5,560.35	
*** total weight					38,048.00	
MERCHANDISE SUB-TOTAL						78,449.00
FREIGHT CHARGE						4,706.94
VA STATE SALES TAX						3,922.45
INVOICE AMOUNT *****						87,078.39

$78,449.00 \times 1.06 = 4,706.94$

Paid \$ 3,922.45
 Deducted \$ 1,961.22
\$ 1,961.23

Should be \$ 4,706.94
 Actual 1,961.23
 \$ 2,745.71 Amount Owed
 RLD

INVOICE
 DUPLICATE

Susan McAlexander

From: Meagan Lawless
Sent: Friday, April 25, 2008 9:40 AM
To: Susan McAlexander
Cc: Tammy Cardwell
Subject: Best Western Culpeper

Susan,

Per Leo, please fix the commission on the following invoices to 130-2.5% and 69-2.5%.

40922210
40922910
40921850
40922220
40922920
40921860

Thanks
Meagan

Meagan E. Lawless

Customer Service

Phone: (276) 634-2990

Fax: (276) 632-4707

mlawless@americanofmartinsville.com

AMERICAN OF MARTINSVILLE, INC.
128 EAST CHURCH STREET
MARTINSVILLE, VIRGINIA 24112-2846
Phone: (276)632-2061 Fax: (276)632-8810



INVOICE
40922910

SALES COPY

Bill-To Account: 443460-0000

PAGE 1

ML0000117

NET 30 DAYS ..TERMS

MAIL TO:

I&B SERVICES
P.O. BOX 1446
ATTN: CHARLIE BARRELL
CULPEPER
VA

04/24/2008 INVOICE DATE

Carrier
SASSY EXPRESS 22406

227010000

Sales representative
KEITH L. DECKER

Sales no. & commission PCT

SEQ	QUANTITY	P.O. NUMBER	NA	WORK ORDER	UNIT PRICE	EXTENDED PRICE	0069	0130	0000	
Ship-to...		0012..BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS								
01	64	05670-628-000 Q HDBD 36"	Cubic Feet__6.81 Weight__57 lbs each	ML0000117	129.00	8,256.00	002 OM481781	.0500	.0050	.0000
02	84	05670-811-000 N STAND	Cubic Feet__7.20 Weight__55 lbs each	ML0000117	131.00	11,004.00	010 OM481781	.0500	.0050	.0000
03	121	05670-510-000 HDTV BASE	Cubic Feet__36.09 Weight__242 lbs each	ML0000117	479.00	57,959.00	012 OM481781	.0500	.0050	.0000
04	6	05670-180-000 DESK	Cubic Feet__25.47 Weight__83 lbs each	ML0000117	205.00	1,230.00	030 OM481781	.0500	.0050	.0000
					*** total cubic feet	5,560.35				
					*** total weight	38,048.00				
					MERCHANDISE SUB-TOTAL	78,449.00				
					FREIGHT CHARGE	4,706.94				
					V A STATE SALES TAX	3,922.45				
					INVOICE AMOUNT *****	87,078.39				



COMMISSION ADJUSTMENT/CORRECTION

Salesman Number # 169

Invoice # 40921840

Explanation of Adjustment/Correction:

Paid commission of 4% but should have paid
2.5%

12953.00 x 2.5% = 323.83
518.12
< 194.29 >

(See page 6 of this months report.)

Backup Documentation Attached

Initial dm

Date 5/5/08

Account 2015 Amount < 194.29 >

REMIT TO:
AMERICAN OF MARTINSVILLE, INC.
P.O. Box 535161
Atlanta, GA 30353-5161



PHONE (276)632-2061
FAX (276)638-8810

INVOICE NUMBER
40921860 PAGE 1

Bill-To Account: 443460-0000

NET 30 DAYS ..TERMS

MAIL TO:
I&B SERVICES
P.O. BOX 1446
ATTN: CHARLIE BARREL
CULPEPER
VA 227010000

04/21/2008 SHIPPED DATE

Carrier 12453
SASSY EXPRESS

Sales representative
KEITH L. DECKER
SMCALEXANDER

SEQ	QTY SHIPPED	PO. NBR	NA	WORK ORDER NBR.	UNIT PRICE	EXTENDED PRICE
ship-to...		0012..	BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253, LUCILLE MAYS			
01	85	03656-967-000-078	OTTOMAN fabric.1 72863..pattern,TRACERY..color,CAYENNE CAL117 std Fire Code Compliance Cubic Feet_6.48 Weight_22 lbs each	ML000204	7%143.00	12,155.00
02	1	03154-960-000-078	Q SLEEP SOFA fabric.1 72863..pattern,TRACERY..color,CAYENNE CAL117 std Fire Code Compliance Cubic Feet_65.05 Weight_165 lbs each	ML000204	7%798.00	798.00
*** total cubic feet					615.85	
*** total weight					2,035.00	
MERCHANDISE SUB-TOTAL						12,953.00
FREIGHT CHARGE						777.18
VA STATE SALES TAX						647.65
INVOICE AMOUNT *****						14,377.83

12,953.00 X .04 = \$ 518.12

Paid \$ 518.12

Deducted \$ 194.29

323.83

Should be \$ 518.12

Actual \$ 323.83

194.29

Amount
Owed
1660

INVOICE

Susan McAlexander

From: Meagan Lawless
Sent: Friday, April 25, 2008 9:40 AM
To: Susan McAlexander
Cc: Tammy Cardwell
Subject: Best Western Culpeper

Susan,
Per Leo, please fix the commission on the following invoices to 130-2.5% and 69-2.5%.
40922210
40922910
40921850
40922220
40922920
40921860

Thanks
Meagan

Meagan E. Lawless
Customer Service
Phone: (276) 634-2990
Fax: (276) 632-4707
mlawless@americanofmartinsville.com

AMERICAN OF MARTINSVILLE, INC.
128 EAST CHURCH STREET
MARTINSVILLE, VIRGINIA 24112-2846
Phone: (276)632-2061 Fax: (276)632-8810

Bill-To Account: 443460-0000

MAIL TO:
I&B SERVICES
P.O. BOX 1446
ATTN: CHARLIE BARRELL
CULPEPER
VA

227010000

PAGE 1

NET 30 DAYS ..TERMS

04/21/2008 INVOICE DATE

Carrier 12453
SASSY EXPRESS

Sales representative
KEITH L. DECKER

ML0000204

INVOICE
40921860
SALES COPY

SEQ	QUANTITY	P.O. NUMBER	NA	WORK ORDER	UNIT PRICE	EXTENDED PRICE
Ship-to...		0012..BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS				
01	85	03656-967-000-078 OTTOMAN fabric.1 72863..pattern,TRACERY..color,CAYENNE CAL117 std Fire Code Compliance Cubic Feet__6.48 Weight__22 lbs each	ML0000204	143.00	12,155.00	
02	1	03154-960-000-078 Q SLEEP SOFA fabric.1 72863..pattern,TRACERY..color,CAYENNE CAL117 std Fire Code Compliance Cubic Feet__65.05 Weight__165 lbs each	ML0000204	798.00	798.00	
					*** total cubic feet 615.85 *** total weight 2,035.00	
					MERCHANDISE SUB-TOTAL	12,953.00
					FREIGHT CHARGE	777.18
					VA STATE SALES TAX	647.65
					INVOICE AMOUNT *****	14,377.83

0069	0130	0000
010	0M484290	.0400 .0050 .0000
010	0M484300	.0400 .0050 .0000

Sales no. & commission PCT



COMMISSION ADJUSTMENT/CORRECTION

Salesman Number # 69

Invoice # 40922220

Explanation of Adjustment/Correction:

Paid 4% commission but should have paid
2.5%

31,104.00 x 2.5% = 777.60
1,244.16
(444.56)

(See page 7 of this months report.)

Backup Documentation Attached

Initial dm

Date 5/5/08

Account 2015 Amount (444.56)

REMIT TO:
AMERICAN OF MARTINSVILLE, INC.
P.O. Box 535161
Atlanta, GA 30353-5161



PHONE (276)632-2061
FAX (276)638-8810

INVOICE NUMBER

40922220

PAGE 1

Bill-To Account: 443460-0000

NET 30 DAYS ..TERMS

MAIL TO:

I&B SERVICES
P.O. BOX 1446
ATTN: CHARLIE BARREL
CULPEPER
VA

227010000

04/22/2008 SHIPPED DATE

Carrier 12456
SASSY EXPRESS

Sales representative
KEITH L. DECKER
SMCALEXANDER

SEQ	QTY SHIPPED	PO. NBR	NA	WORK ORDER NBR.	UNIT PRICE	EXTENDED PRICE
ship-to...		0012..	BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253, LUCILLE MAYS			
01	144	08010-918-000-078	ARM CHAIR fabric.1 80062..pattern,MOONBEAN..color,BRICK CAL117 std Fire Code Compliance Cubic Feet_11.20 Weight_28 lbs each	ML000204 7%	216.00	31,104.00
			*** total cubic feet		1,612.80	
			*** total weight		4,032.00	
			MERCHANDISE SUB-TOTAL			31,104.00
			FREIGHT CHARGE			1,866.24
			VA STATE SALES TAX			1,555.20
			INVOICE AMOUNT *****			34,525.44

$31,104.00 \times .04 = 1,244.16$

Bid \$1,244.16
Deducted \$466.56
\$777.60

Should be \$1,244.16
Actual 777.60
\$466.56 Amount owed
KLD

INVOICE
DUPLICATE

Susan McAlexander

From: Meagan Lawless
Sent: Friday, April 25, 2008 9:40 AM
To: Susan McAlexander
Cc: Tammy Cardwell
Subject: Best Western Culpeper

Susan,
Per Leo, please fix the commission on the following invoices to 130-2.5% and 69-2.5%.
40922210
40922910
40921850
40922220
40922920
40921860

Thanks
Meagan

Meagan E. Lawless
Customer Service
Phone: (276) 634-2990
Fax: (276) 632-4707
mlawless@americanofmartinsville.com



INVOICE
40922220
SALES COPY

Bill-To Account: 443460-0000

MAIL TO:

I&B SERVICES
P.O. BOX 1446
ATTN: CHARLIE BARRELL
CULPEPER
VA

227010000

ML000204

PAGE 1

NET 30 DAYS .. TERMS

04/22/2008 INVOICE DATE

Carrier
SASSY EXPRESS
12456

Sales representative
KEITH L. DECKER

Sules no. & commission PCT

SEQ	QUANTITY	P.O. NUMBER	NA	WORK ORDER	UNIT PRICE	EXTENDED PRICE
001	144	08010-918-000-078	ARM CHAIR	ML000204	216.00	31,104.00
		0012..BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS fabric.1 80062..pattern,MOONBEAN..color,BRICK CAL117 std Fire Code Compliance Cubic Feet__11.20 Weight__28 lbs each *** total cubic feet 1,612.80 *** total weight 4,032.00				
		MERCHANDISE SUB-TOTAL 31,104.00 FREIGHT CHARGE 1,866.24 VA STATE SALES TAX 1,555.20 INVOICE AMOUNT ***** 34,525.44				



COMMISSION ADJUSTMENT/CORRECTION

Salesman Number # 109

Invoice # 40922920

Explanation of Adjustment/Correction:

Paid commission of 3% on line item #1 + 4% on
line item #2. Should have paid 2.5% on ea. line item.

<u>12,332.73</u>	<u>36,015.00</u>	<u>1,058.70</u>
<u>2.5%</u>	<u>2.5%</u>	<u>1,570.58</u>
<u>308.32</u>	<u>750.38</u>	<u>< 511.88 ></u>

Backup Documentation Attached

Initial dm

Date 5/5/08

Account 2015 Amount < 511.88 >

REMIT TO:
 AMERICAN OF MARTINSVILLE, INC.
 P.O. Box 535161
 Atlanta, GA 30353-5161



PHONE (276)632-2061
 FAX (276)638-8810

INVOICE NUMBER
 40922920 PAGE 1

Bill-To Account: 443460-0000

NET 30 DAYS ..TERMS

MAIL TO:
 I&B SERVICES
 P.O. BOX 1446
 ATTN: CHARLIE BARREL
 CULPEPER
 VA 227010000

04/24/2008 SHIPPED DATE

Carrier 72240
 SASSY EXPRESS

Sales representative
 KEITH L. DECKER
 SMCALEXANDER

SEQ	QTY SHIPPED	PO. NBR	NA	WORK ORDER NBR.	UNIT PRICE	EXTENDED PRICE
ship-to...		0012..	BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS			
			tag for...PULL FROM J1 STOCK DO NOT PRODUCE			
01	89	09000-003-BKL	TASK CHAIR fabric.1 LL031..pattern,LEATHER..color,BLACK CAL117 std Fire Code Compliance Cubic Feet__19.29 Weight__47 lbs each PULL FROM J1 STOCK DO NOT PRODUCE	DC001008	7% 138.57	12,332.73
02	87	03656-920-000-078	CHAIR fabric.1 72863..pattern,TRACERY..color,CAYENNE CAL117 std Fire Code Compliance Cubic Feet__24.59 Weight__80 lbs each	ML000204	7% 345.00	30,015.00
		***	total cubic feet		3,856.14	
		***	total weight		11,143.00	
			MERCHANDISE SUB-TOTAL			42,347.73
			FREIGHT CHARGE			2,540.86
			VA STATE SALES TAX			2,117.39
			INVOICE AMOUNT *****			47,005.98

42,347.73 x .04 = \$1,693.90

Round
 Deducted
 = 4,570.38
 4511.88

\$1,058.50

Should be
 Actual
 \$1,693.90
 1,058.50

\$635.40 Amount
 owed
 KID

30% 4 1/3 #49 2.590
 #130 2.590
 .90 1/3 2.590
 30% 1/3 2.590

INVOICE

Susan McAlexander

From: Meagan Lawless
Sent: Friday, April 25, 2008 9:40 AM
To: Susan McAlexander
Cc: Tammy Cardwell
Subject: Best Western Culpeper

Susan,
Per Leo, please fix the commission on the following invoices to 130-2.5% and 69-2.5%.

40922210
40922910
40921850
40922220
40922920
40921860

Thanks
Meagan

Meagan E. Lawless
Customer Service
Phone: (276) 634-2990
Fax: (276) 632-4707
mlawless@americanofmartinsville.com

AMERICAN OF MARTINSVILLE, INC.
28 EAST CHURCH STREET
ARTINSVILLE, VIRGINIA 24112-2846
Phone: (276)632-2061 Fax: (276)632-8810



INVOICE
40922920

SALES COPY

Bill-To Account: 443460-0000

MAIL TO:

I&B SERVICES
P.O. BOX 1446
ATTN: CHARLIE BARRELL
CULPEPER
VA

227010000

DC001008

PAGE 1

NET 30 DAYS ..TERMS

04/24/2008 INVOICE DATE

Carrier 72240
SASSY EXPRESS

Sales representative
KEITH L. DECKER

Sales no. & commission PCT

0069	0000	0000
.0300	.0000	.0000
.0400	.0050	.0000

EQ	QUANTITY	P.O. NUMBER	NA	WORK ORDER	UNIT PRICE	EXTENDED PRICE
ship-to...		0012..BEST WESTERN 791 MADISON ROAD CULPEPER VA 22701 CALL 24 HRS B4 DELY: 540 825-1253,LUCILLE MAYS				
		tag for....PULL FROM J1 STOCK DO NOT PRODUCE				
1	89	09000-003-BKL TASK CHAIR fabric.1 LL031..pattern,LEATHER..color,BLACK CALL17 std Fire Code Compliance Cubic Feet 19.29 Weight 47 lbs each PULL FROM J1 STOCK DO NOT PRODUCE	DC001008	138.57	12,332.73	010 OD240680
2	87	03656-920-000-078 CHAIR fabric.1 72863..pattern,TRACERY..color,CAYENNE CALL17 std Fire Code Compliance Cubic Feet 24.59 Weight 80 lbs each	ML000204	345.00	30,015.00	010 OM484280
		*** total cubic feet 3,856.14 *** total weight 11,143.00				
		MERCHANDISE SUB-TOTAL			42,347.73	
		FREIGHT CHARGE			2,540.86	
		VA STATE SALES TAX			2,117.39	
		INVOICE AMOUNT *****			47,005.98	