

UNITED STATES BANKRUPTCY COURT

PROOF OF CLAIM

Name of Debtor:
Conexant System Inc.

Case Number:
13-10367-MFW

NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property):
MoreDirect, Inc.

COURT USE ONLY

Name and address where notices should be sent:
**MoreDirect, Inc.
1001 Yamato Road Suite 200 Boca Raton, FL 33431**

Check this box if this claim amends a previously filed claim.

Court Claim Number: _____
(If known)

Telephone number: (561) 237-3303 email: BDOMRESE@MOREDIRECT.COM

Filed on: _____

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 this claim. Attach copy of statement giving particulars.

Telephone number: email:

RECEIVED

1. Amount of Claim as of Date Case Filed: \$ 10,017.36

'APR 19 2013

If all or part of the claim is secured, complete item 4.

BMC GROUP

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

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

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

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

CON038

3a. Debtor may have scheduled account as:

(See instruction #3a)

3b. Uniform Claim Identifier (optional):

(See instruction #3b)

4. Secured Claim (See instruction #4)

Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.

Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any:

\$ _____

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

Basis for perfection: _____

Value of Property: \$ _____

Amount of Secured Claim: \$ _____

Annual Interest Rate _____ % Fixed or Variable (when case was filed)

Amount Unsecured: \$ 10,017.36

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

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

Wages, salaries, or commissions (up to \$12,475*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier - 11 U.S.C. § 507 (a)(4).

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

Amount entitled to priority:

Up to \$2,775* 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 4/01/16 and every 3 years thereafter with respect to cases commenced on or after the date of adj

Conexant Systems



00037

6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)

7. Documents: Attached are **redacted** copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and **redacted** copies of documents providing evidence of perfection of a security interest are attached. If the claim is secured by the debtor's principal residence, the Mortgage Proof of Claim Attachment is being filed with this claim. *(See instruction #7, and the definition of "redacted".)*

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

If the documents are not available, please explain:

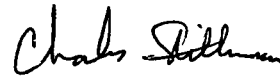
8. Signature: (See instruction #8)

Check the appropriate box.

- I am the creditor.
 I am the creditor's authorized agent.
 I am the trustee, or the debtor, or their authorized agent. (See Bankruptcy Rule 3004.)
 I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Charles Stillman
 Title: Sr. Dir. of Finance and Controller
 Company: MoreDirect, Inc.
 Address and telephone number (if different from notice address above): _____


 (Signature) _____ (Date) 4/16/13

Telephone number: (561) 237-3317 email: CStillman@moredirect.com

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.

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, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:
 Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

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 items 4 and 5. 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. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

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:
 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.

3b. Uniform Claim Identifier:
 If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:
 Check whether the claim is fully or partially secured. Skip this section if the

claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).
 If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) 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.

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. Documents:
 Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest and documents required by FRBP 3001(c) for claims based on an open-end or revolving consumer credit agreement or secured by a security interest in the debtor's principal residence. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:
 The individual completing 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. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. 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. If the claim is filed by an authorized agent, provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

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REMIT TO: P.O. Box 347331
 Pittsburgh, PA 15250-4331
 Tel (561) 237-3300 • Fax (561) 237-3390
 www.moredirect.com
 Tax ID: 65-0526173

INVOICE

INVOICE NUMBER: 3002220
INVOICE DATE: 01/30/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant
 Surya Konala
 6020 Cornerstone Ct W
 Ste 300
 San Diego, CA 921213729

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
SD12E01396r	CON038				
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	Z9		NET30	6799679	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	BP192V12-3U	192V XL BATT PK FOR 5-8K (BP192V12-3U)	958.44	958.44	
		Sub-total		958.44	
		S/H		119.39	
		Tax		86.23	
		Invoice Total		1,164.06	

As security for the payment of the entire balance owed, MoreDirect retains a security interest in the goods sold to the customer. MoreDirect may, in the manner provided by law, retake the goods and, in addition hereto, pursue any other remedies provided by law. All past due amounts bear interest at a rate of 1.5% per month, or the maximum legal rate, whichever is less. Returns are allowed for up to 30 days. Non-defective returns must be unopened and factory sealed. All merchandise must be returned with original packaging, accessories, software and manuals. A valid RMA number must be obtained from MoreDirect before a return is allowed. Some manufacturers have special return policies, which may supersede the above. Return merchandise will not be accepted and no credit issued unless these requirements are met.

Corporate Address: MoreDirect • 1001 Yamato Road, Suite 200 • Boca Raton, FL 33431

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 Pittsburgh, PA 15250-4331
 Tel (561) 237-3300 • Fax (561) 237-3390
 www.moredirect.com
 Tax ID: 65-0526173

INVOICE

INVOICE NUMBER: 3008605
INVOICE DATE: 02/01/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Jimmy Ta
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6823468	CON038	NF78700585	039-374		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	01		NET30	6823468	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	EC13942	2PORT EXPRESSCARD FIREWI (EC13942)	44.89	44.89	
		Sub-total		44.89	
		S/H		10.84	
		Tax		4.46	
		Invoice Total		60.19	

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INVOICE

INVOICE NUMBER: 3008835
INVOICE DATE: 02/01/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Alex Lee
 201 Jones Rd
 3rd Floor/East
 Waltham, MA 024511600

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6821662	CON038	NF78700585	039-789		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	UPS Ground		NET30	6821662	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	312-0748	6-Cell/56-WHR Battery fo (312-0748)	107.61	107.61	
1	312-0749	9-Cell/90-WHR Battery, D (312-0749)	123.44	123.44	
		Sub-total		231.05	
		S/H		58.00	
		Tax		.00	
		Invoice Total		289.05	

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INVOICE

INVOICE NUMBER: 3006336
INVOICE DATE: 02/05/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 surya konala
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6830565	CON038	NF78700585	039-804		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	FedEx Ground		NET30	6830565	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	HWIC-2T=	2PORT SERIAL WAN INTERFA (HWIC-2T=) S/N SF0C16523D4F	454.95	454.95	
		Sub-total		454.95	
		S/H		19.84	
		Tax		37.98	
		Invoice Total		512.77	

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 Tax ID: 65-0526173

INVOICE

INVOICE NUMBER: 3006448
INVOICE DATE: 02/05/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Mario Trujillo
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6829586	CON038		039-805		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	01		NET30	6829586	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
4	ST3300655SS	300GB SAS 15K RPM 3GB/S (ST3300655SS) S/N 3LM0R5ET : 3LM15TRK : 3LM5YQA0 S/N 3LM628FG Sub-total S/H Tax Invoice Total	247.49	989.96 989.96 32.67 81.81 1,104.44	

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 www.moredirect.com
 Tax ID: 65-0526173

INVOICE

INVOICE NUMBER: 3011116
INVOICE DATE: 02/05/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 surya konala
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6830613	CON038	NF78700585	039-804		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell			NET30	6830613	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	AIR-CAP2602E-A-K9	802.11n CAP w/CleanAir; (AIR-CAP2602E-A-K9 S/N SFGL1704Z6A7	667.60	667.60	N = Non-taxable
4	AIR-ANT2524DW-R=	DUAL BAND DIPOLE ANT 360 (AIR-ANT2524DW-R=)	27.18	108.72	
48	CON-SNT-SMS-1	SMARTNET MNT SMS-1 SMS S (CON-SNT-SMS-1)	1.00	48.00	N
		Sub-total		824.32	
		S/H		29.84	
		Tax		64.49	
		Invoice Total		918.65	

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 www.moredirect.com
 Tax ID: 65-0526173

INVOICE NUMBER: 3009240
INVOICE DATE: 02/06/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Alex Lee / Sandro Grignetti
 201 Jones Rd
 3rd Floor/East
 Waltham, MA 024511600

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6834341	CON038		039-789		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	FedEx Ground		NET30	6834341	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
2	A2810656-AA	2GB DDR2-800MHZ 240PIN F (A2810656-AA)	30.43	60.86	
1	BT-2000	USB-PS/2 CABLE FOR PC, M (BT-2000)	5.81	5.81	
2	7ZJ-00001	COMFORT CURVE DESKTOP 30 (7ZJ-00001)	19.34	38.68	
		Sub-total		105.35	
		S/H		16.84	
		Tax		.00	
		Invoice Total		122.19	

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INVOICE

INVOICE NUMBER: 3009760
INVOICE DATE: 02/06/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 surya konala
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6832379	CON038	NF78700580	039-804		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	01		NET30	6832379	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	PLA407KIT	POWERLINE ENET ADAPTER K (PLA407KIT) S/N S120C28000673 : S120C28000674	97.20	97.20	
		Sub-total		97.20	
		S/H		12.84	
		Tax		8.80	
		Invoice Total		118.84	

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 www.moredirect.com
 Tax ID: 65-0526173

INVOICE

INVOICE NUMBER: 3011737
INVOICE DATE: 02/06/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 MARIO TRUJILLO
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6829583	CON038	NF78700585	039-805		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	UPS Ground		NET30	6829583	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	312-0749	9-Cell/90-WHr Battery, D (312-0749)	100.30	100.30	
		Sub-total		100.30	
		S/H		16.84	
		Tax		9.37	
		Invoice Total		126.51	

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 Pittsburgh, PA 15250-4331
 Tel (561) 237-3300 • Fax (561) 237-3390
 www.moredirect.com
 Tax ID: 65-0526173

INVOICE

INVOICE NUMBER: 3012058
INVOICE DATE: 02/07/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Mario Trujillo
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6829592	CON038		039-805		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	UPS Ground		NET30	6829592	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
3	JU081	Power Supply, 750Watt (JU081) S/N 20130206_48083 : 20130206_48084 : 20130206_48085	94.44	283.32	
		Sub-total		283.32	
		S/H		19.84	
		Tax		24.25	
		Invoice Total		327.41	

As security for the payment of the entire balance owed, MoreDirect retains a security interest in the goods sold to the customer. MoreDirect may, in the manner provided by law, retake the goods and, in addition hereto, pursue any other remedies provided by law. All past due amounts bear interest at a rate of 1.5% per month, or the maximum legal rate, whichever is less. Returns are allowed for up to 30 days. Non-defective returns must be unopened and factory sealed. All merchandise must be returned with original packaging, accessories, software and manuals. A valid RMA number must be obtained from MoreDirect before a return is allowed. Some manufacturers have special return policies, which may supersede the above. Return merchandise will not be accepted and no credit issued unless these requirements are met.

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INVOICE

INVOICE NUMBER: 3014835
INVOICE DATE: 02/11/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Mario Trujillo
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6837720	CON038		039-805		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	UPS Ground		NET30	6837720	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
4	331-6307	E-Port, 130W Simple Port (331-6307)	126.60	506.40	
4	331-6304	E-Port Plus, 130W Advanc (331-6304)	158.25	633.00	
		Sub-total		1,139.40	
		S/H		46.84	
		Tax		94.90	
		Invoice Total		1,281.14	

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INVOICE

INVOICE NUMBER: 3019603
INVOICE DATE: 02/15/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Jennifer Sturm
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6849787	CON038	NF78700585	039-801		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell			NET30	6849787	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	PLA407KIT	POWERLINE ETH ADPT KIT (PLA407KIT)	96.69	96.69	
		Sub-total		96.69	
		S/H		12.84	
		Tax		8.76	
		Invoice Total		118.29	

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INVOICE NUMBER: 3024716
INVOICE DATE: 02/21/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Alex Lee
 201 Jones Rd
 3rd Floor/East
 Waltham, MA 024511600

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6865137	CON038	NF78700585	039-789		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	FedEx Ground		NET30	6865137	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
4	KTD-DM8400B/2G	2GB MODULE FOR DELL DIME (KTD-DM8400B/2G)	38.57	154.28	
		Sub-total		154.28	
		S/H		16.84	
		Tax		.00	
		Invoice Total		171.12	

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 Tax ID: 65-0526173

INVOICE

INVOICE NUMBER: 3031067
INVOICE DATE: 02/27/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 MARIO TRUILLO
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6871691	CON038		039-805		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	OT		NET30	6871691	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
2	VS5-ESSL-BUN-C	V5 ESSENTIALS KIT 3HOST (VS5-ESSL-BUN-C)	453.49	906.98	
2	VS5-ESSL-SUB-C	SUBSCRIPTION ONLY FOR V5 (VS5-ESSL-SUB-C)	66.99	133.98	
		Sub-total		1,040.96	
		S/H		.00	
		Tax		.00	
		Invoice Total		1,040.96	

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INVOICE

INVOICE NUMBER: 3031928
INVOICE DATE: 02/27/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 surya konala
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6874747	CON038	NF78700585	039-804		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	FDG		NET30	6874747	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
2	AIR-CAP2602E-A-K9	802.11n CAP w/CleanAir; (AIR-CAP2602E-A-K9 S/N SFGL1704Z6AZ : SFGL1704Z6BB Sub-total S/H Tax Invoice Total	667.60	1,335.20 1,335.20 46.84 110.56 1,492.60	

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INVOICE

INVOICE NUMBER: 3033924
INVOICE DATE: 02/27/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Alex Lee
 201 Jones Rd
 3rd Floor/East
 Waltham, MA 024511600

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6876909	CON038	NF78700585	039-789		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	Fedex Gn		NET30	6876909	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	DL-D820	BATTERY DELL LATITUDE D8 (DL-D820)	88.27	88.27	
1	B-5093H	Dell Latitude Laptop Bat (B-5093H)	97.42	97.42	
		Sub-total		185.69	
		S/H		16.84	
		Tax		.00	
		Invoice Total		202.53	

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INVOICE

INVOICE NUMBER: 3032435
INVOICE DATE: 02/28/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Mario Trujillo
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6880239	CON038		039-805		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	UPS Ground		NET30	6880239	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
2	S27B350H	27" S27B350H LED-LCD Ful (S27B350H)	329.10	658.20	
2	SB20-9	California SB20 GE 35 in (SB20-9)	4.00	8.00	
		Sub-total		666.20	
		S/H		29.84	
		Tax		55.04	
		Invoice Total		751.08	

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INVOICE

INVOICE NUMBER: 3032448
INVOICE DATE: 02/28/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 Mario Trujillo
 4000 MacArthur Blvd
 Newport Beach, CA 926602558

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
6880067	CON038		039-805		
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	FedEx Ground		NET30	6880067	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
5	SVP200S37A/240G	240GB SSDNOW V+200 SATA (SVP200S37A/240G)	221.79	1,108.95	
		Sub-total		1,108.95	
		S/H		46.84	
		Tax		92.46	
		Invoice Total		1,248.25	

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INVOICE

INVOICE NUMBER: 3015955
INVOICE DATE: 02/12/2013
PAGE: 1

BILL TO: Conexant Systems, Inc.
 Accounts Payable
 PO BOX 7370
 Newport Beach, CA 926587370

SHIP TO: Conexant Systems, Inc.
 SURYA KONALA
 9808 Scranton Rd
 Ste 420
 San Diego, CA 921213704

CUSTOMER P.O.	ACCOUNT NUMBER	MEMBER REFERENCE	COST CENTER	PROJECT	
[From: SD12E01396], SD12E01396 CON038					
SALES REP	SHIP VIA	SHIP DATE	PAYMENT TERM	MISC 1	PREVIOUS INV.
Chris Bell	OT		NET30	6733987	
QUANTITY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENSION	
1	BP192V12-3U	192V XL BATT PK FOR 5-8K (BP192V12-3U)	-958.44	-958.44	
		Sub-total		-958.44	
		S/H		.00	
		Tax		-74.28	
		Invoice Total		-1,032.72	

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Additional Shipments

UPS Express Envelopes may be used only for documents, not commercial



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EXPRESS (INTL)

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FAKERTAK B. Dumrese TELEPHONE **561-237-3347**
3303

MORE DIRECT

1001 YAMATO ROAD, SUITE 200

BOCA RATON FL 33431-4403

DELIVERY TO

BMG Group, Inc 310-321-5555
REF: CONEXANT CHARTER 11

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E1 Strynck, CA 90245

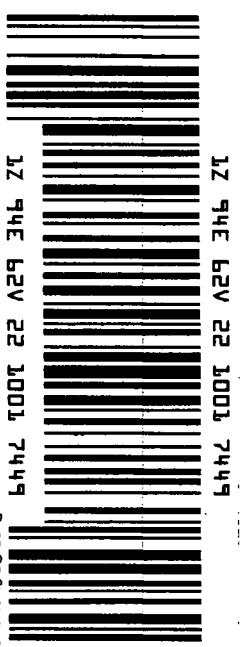
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