


UNITED STATES BANKRUPTCY COURT DISTRICT OF DELAWARE		PROOF OF CLAIM	Schedule G Contract
Name of Debtor: Conexant Systems, Inc.		Case Number: 13-10367	
NOTE: 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).			
Name of Creditor (the person or other entity to whom the debtor owes money or property): Quest International Monitor Service, Inc.			
Name and address where notices should be sent:  31951542010556 QUEST 65 PARKER IRVINE, CA 92618			
Creditor Telephone Number 714 380-6722 email: lcona@questinc.com			
Name and address where payment should be sent (if different from above): Same as above		<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 this box to indicate that this claim amends a previously filed claim.	
Payment Telephone Number () email:		Court Claim Number (if known): Filed on:	
1. AMOUNT OF CLAIM AS OF DATE CASE FILED \$ 4,732.00			
If all or part of your claim is secured, complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input type="checkbox"/> 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: <u>Services performed.</u> (See instruction #2)			
3. LAST FOUR DIGITS OF ANY NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: <u>0627</u>		3a. Debtor may have scheduled account as: <u>N/A</u> (See instruction #3a)	3b. Uniform Claim Identifier (optional): <u>N/A</u> (See instruction #3b)
4. SECURED CLAIM: (See instruction #4)			
Check the appropriate box if your claim is secured by a lien on property or a right of set off, attach required redacted documents, and provide the requested information.		Amount of arrearage and other charges, as of time case filed, included in secured claim, if any: \$	
Nature of property or right of setoff: Describe: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____		Basis for Perfection: _____	
Value of Property: \$ _____		Amount of Secured Claim: \$ _____	
Annual Interest Rate: _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount Unsecured: \$ _____	
5. Amount of Claim Entitled to Administrative Expense status under 11 U.S.C. § 503(b)(9) or 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 administrative expense or priority and state the amount.			
Amount entitled to priority: \$ _____		Amount entitled to administrative expense under 11 U.S.C. § 503(b)(9): \$ _____	
You MUST specify the priority of the claim:			
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).		<input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).	
<input type="checkbox"/> 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).		<input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5).	
<input type="checkbox"/> 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).		<input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (_____).	
		<input type="checkbox"/> Value of goods received by the debtor within 20 days before the date of the bankruptcy filing - 11 U.S.C. § 503(b)(9).	
* 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.			
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)			

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MAY 16 2013

BMC GROUP

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

Conexant Systems



00115

7. DOCUMENTS: Attached are redacted copies of documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and 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 definition of "redacted").

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

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.

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 May 17, 2013 for Non-Governmental Claimants OR on or before August 27, 2013 for Governmental Units.

BY MAIL TO:
BMC Group, Inc.
Attn: Conexant Systems, Inc. Claims Processing
PO Box 3020
Chanhassen, MN 55317-3020

BY MESSENGER OR OVERNIGHT DELIVERY TO:
BMC Group, Inc.
Attn: Conexant Systems, Inc. Claims Processing
18675 Lake Drive East
Chanhassen, MN 55317

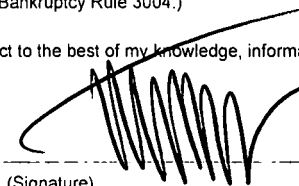
8. SIGNATURE: (See instruction #8)

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: Kamran Katouzian
Title: Vice President
Company: QUEST International Monitor Service Inc.



5-15-13

Address and telephone number (if different from notice address above):

(Signature)

(Date)

Telephone number: _____ email: _____

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

Copy

Quest International, Inc.
65 Parker

Invoice No.: 173087
Invoice Date: 12/06/12
Due Date: 12/06/12
Customer No.: C00627
Customer PO No.: NF12E01019
Page No.: Page 1 of 1

Irvine CA 92618
USA

BILL TO
CONEXANT SYSTEMS P.O. BOX 7370 ATTN: ACCOUNTS PAYABLE NEWPORT BEACH CA 92658 USA

SHIP TO
CONEXANT SYSTEMS INC 4311 JAMBOREE ROAD ED THIERS NEWPORT BEACH CA 92660 USA

TOTAL DUE
\$ 1,616.00
by 12/06/12

RA Number: 108051 ITC
Sales Employee: Pasha Arshadi
Contact Name: Ed Thiers*
Contact Tel.: 949-483-5876
Terms: C Net 30

Issued By: Johanna Atman
Delivery Date:
Ship Via: NA-Not Applicable
FCA: Origin

Thanks for sending us your payment promptly. We appreciate your business!

#	Item No.	Warranty	Qty	Serial No.	Unit Price	Qty Ship'd	Tracking Number	Total
1	ITSD Contract		2		\$ 808.00	2		\$ 1,616.00

PLEASE NOTE - ANY DISCREPANCIES MUST BE REPORTED WITHIN 3 DAYS OF RECEIPT.

Please see our Terms & Conditions at: www.questinc.com/terms/Quest-Terms.pdf

The Quest Quality and Environmental Policies can be found at:
www.questinc.com Company - Environmental Policy

Remarks: Additional for December 2012

PO# NB12E01367 Used for Change #3 for RFQ100474 Addition Based On Sales Orders 108051.

Subtotal	\$ 1,616.00
Shipping & Handling	
Tax	
Total (USD)	\$ 1,616.00
Balance Due	\$ 1,616.00

PLEASE REMIT THIS AMOUNT
Thank You For Your Business!



INVOICE

Copy

Quest International, Inc.
65 Parker

Invoice No.: 173232
Invoice Date: 12/19/12
Due Date: 12/19/12
Customer No.: C00627
Customer PO No.: NF12E01019
Page No.: Page 1 of 1

Irvine CA 92618
USA

BILL TO
CONEXANT SYSTEMS P.O. BOX 7370 ATTN: ACCOUNTS PAYABLE NEWPORT BEACH CA 92658 USA

SHIP TO
CONEXANT SYSTEMS INC 4311 JAMBOREE ROAD ED THIERS NEWPORT BEACH CA 92660 USA

TOTAL DUE
\$ 1,616.00
by 12/19/12

RA Number: 108051 ITC
Sales Employee: Pasha Arshadi
Contact Name: Ed Thiers*
Contact Tel.: 949-483-5876
Terms: C Net 30

Issued By: Johanna Atman
Delivery Date:
Ship Via: NA-Not Applicable
FCA: Origin

Thanks for sending us your payment promptly. We appreciate your business!

#	Item No.	Warranty	Qty	Serial No.	Unit Price	Qty Ship'd	Tracking Number	Total
1	ITSD Contract		2		\$ 808.00	2		\$ 1,616.00

PLEASE NOTE - ANY DISCREPANCIES MUST BE REPORTED WITHIN 3 DAYS OF RECEIPT.

Please see our Terms & Conditions at: www.questinc.com/terms/Quest-Terms.pdf

The Quest Quality and Environmental Policies can be found at:
www.questinc.com Company - Environmental Policy

Remarks: ADD ON FOR THE MONTHS OF JUNE & JULY 2012 (FOR I2000)

PO# NB12E01367 Used for Change #3 for RFQ100474 Addition Based On Sales Orders 108051.

Subtotal	\$ 1,616.00
Shipping & Handling	
Tax	
Total (USD)	\$ 1,616.00
Balance Due	\$ 1,616.00

PLEASE REMIT THIS AMOUNT
Thank You For Your Business!



INVOICE

Copy

Quest International, Inc.
65 Parker

Invoice No.: 174040
Invoice Date: 02/21/13
Due Date: 02/22/13
Customer No.: C00627
Customer PO No.: NF12E01395
Page No.: Page 1 of 1

Irvine CA 92618
USA

BILL TO
CONEXANT SYSTEMS
PO BOX 7370
ATTN: ACCOUNTS PAYABLE
NEWPORT BEACH CA 92658
USA

SHIP TO
CONEXANT SYSTEMS INC
4311 JAMBOREE ROAD
ED THIERS
NEWPORT BEACH CA 92660
USA

TOTAL DUE
\$ 1,500.00
by 02/22/13

RA Number: 111661 ITC
Sales Employee: Pasha Arshadi
Contact Name: Ed Thiers*
Contact Tel.: 949-483-5876
Terms: C Net Due

Issued By: Johanna Atman
Delivery Date:
Ship Via: NA-Not Applicable
FCA: Origin

Thanks for sending us your payment promptly. We appreciate your business!

#	Item No.	Warranty	Qty	Serial No.	Unit Price	Qty Ship'd	Tracking Number	Total
1	ITSD Contract		1		\$ 750.00	1		\$ 750.00
2	ITSD Contract		1		\$ 750.00	1		\$ 750.00

PLEASE NOTE - ANY DISCREPANCIES MUST BE REPORTED WITHIN 3 DAYS OF RECEIPT.

Please see our Terms & Conditions at: www.questinc.com/terms/Quest-Terms.pdf

The Quest Quality and Environmental Policies can be found at:
www.questinc.com Company - Environmental Policy

Remarks: FEBRUARY AND MARCH 2013 ADDITIONS

Contract # CA-081101-CNXT-4
Term: 1/1/2013 - 12/31/2013
PO# NF12E01395 Based On Sales Orders 111661.

Subtotal	\$ 1,500.00
Shipping & Handling	
Tax	
Total (USD)	\$ 1,500.00
Balance Due	\$ 1,500.00

PLEASE REMIT THIS AMOUNT
Thank You For Your Business!

ORIGIN ID: NZJA (949) 581-9900
ORDER PROCESSING
QUEST INTERNATIONAL/OUT BOUND
65 PARKER

IRVINE, CA 92618
UNITED STATES US

SHIP DATE: 15MAY13
ACTWGT: 1.0 LB MAN
CAD: 662124/CAFE2608

BILL SENDER

TO **ATTN:CONEXANT SYST INC CLAIM PROCSS**
BMC GROUP INC
18675 LAKE DR EAST

CHANHASSEN MN 55317

PO: LOR/DOCUMENTS

REF: ACCOUNTING 99C

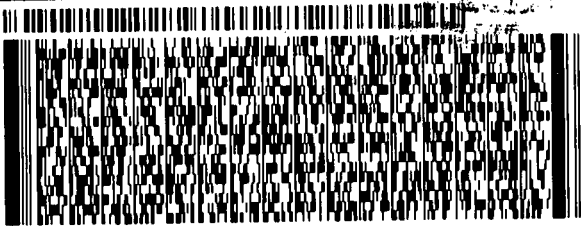
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RECEIVED

MAY 16 2013

BMC GROUP

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FedEx
Express



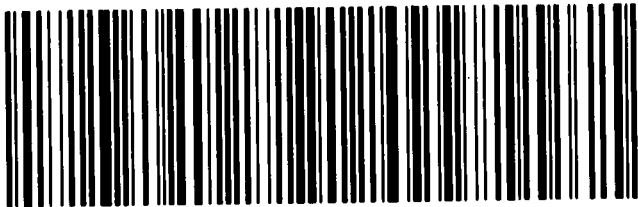
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THU - 16 MAY 3:00P
STANDARD OVERNIGHT

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