

**FILED**  
UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS

DEC 27 2018

JEFFREY P. ALLSTEADT, CLERK  
TEAM - CA

## Fill in this information to identify the case:

Debtor 1 KLS Acquisition Corp.

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Illinois - Eastern Div

Case number 18-30052

## Official Form 410

## Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

## Part 1: Identify the Claim

## 1. Who is the current creditor?

CBD Consolidated  
Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor Slipstick

## 2. Has this claim been acquired from someone else?

☒ No

☐ Yes. From whom? \_\_\_\_\_

## 3. Where should notices and payments to the creditor be sent?

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

## Where should notices to the creditor be sent?

Slipstick  
Name

1000 Apollo Rd #B03  
Number Street

Eagan MN 55121  
City State ZIP Code

Contact phone (651) 259 4393

Contact email \_\_\_\_\_

orders@Slipstick.com.au

Uniform claim identifier for electronic payments in chapter 13 (if you use one):  
\_\_\_\_\_

## Where should payments to the creditor be sent? (if different)

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Contact phone \_\_\_\_\_

Contact email \_\_\_\_\_

## 4. Does this claim amend one already filed?

☒ No

☐ Yes. Claim number on court claims registry (if known) \_\_\_\_\_

Filed on \_\_\_\_\_  
MM / DD / YYYY

## 5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No

☐ Yes. Who made the earlier filing? \_\_\_\_\_

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor? ☒ No  
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim? \$ 827.20 Does this amount include interest or other charges?  
☒ No  
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
 Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
 Limit disclosing information that is entitled to privacy, such as health care information.

Goods Sold

9. Is all or part of the claim secured? ☒ No  
☐ Yes. The claim is secured by a lien on property.
- Nature of property:**  
☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
☐ Motor vehicle  
☐ Other. Describe: \_\_\_\_\_
- Basis for perfection:** \_\_\_\_\_  
 Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
- Value of property:** \$ \_\_\_\_\_  
**Amount of the claim that is secured:** \$ \_\_\_\_\_  
**Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)
- Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_
- Annual Interest Rate** (when case was filed) \_\_\_\_\_ %  
☐ Fixed  
☐ Variable

10. Is this claim based on a lease? ☒ No  
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff? ☒ No  
☐ Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)? ☒ No

☐ Yes. Check one:

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

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

Amount entitled to priority

\$ \_\_\_\_\_

☐ Up to \$2,850\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$12,850\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ \_\_\_\_\_

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

\$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

### Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☒ I am the creditor.  
☐ I am the creditor's attorney or authorized agent.  
☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  
☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that 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.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 12/21/2018  
MM / DD / YYYY

Daniel M. Snyder  
Signature

Print the name of the person who is completing and signing this claim:

Name Daniel M. Snyder  
First name Middle name Last name

Title Director of Sales

Company CBS consolidated DBA Slipstick  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1000 Apollo Rd Suite B03  
Number Street

Eagan MN 55121  
City State ZIP Code

Contact phone 651 259 4393 Email \_\_\_\_\_

orders@slipstick.com.au

# Northern District of Illinois Claims Register

[18-30052 KLS Acquisition Corp.](#)

**Honorable Judge:** Jacqueline P. Cox

**Chapter:** 11

**Office:** Eastern Division

**Last Date to file claims:**

**Trustee:**

**Last Date to file (Govt):**

<i>Creditor:</i> (27222858) <a href="#">History</a> CBD Consolidated/SLIPSTICK 1000 APOLLO RD STE B03 EAGAN, MN 55121	<b>Claim No: 36</b> <i>Original Filed</i> Date: 12/27/2018 <i>Original Entered</i> Date: 12/27/2018	<i>Status:</i> <i>Filed by:</i> CR <i>Entered by:</i> Kimetha Collier <i>Modified:</i>
Amount claimed: \$827.20		

*History:*

[Details](#) [36-1](#) 12/27/2018 Claim #36 filed by CBD Consolidated/SLIPSTICK, Amount claimed: \$827.20 (Collier, Kimetha)

*Description:*

*Remarks:*

## Claims Register Summary

**Case Name:** KLS Acquisition Corp.

**Case Number:** 18-30052

**Chapter:** 11

**Date Filed:** 10/25/2018

**Total Number Of Claims:** 1

<b>Total Amount Claimed*</b>	\$827.20
<b>Total Amount Allowed*</b>	

\*Includes general unsecured claims

**The values are reflective of the data entered. Always refer to claim documents for actual amounts.**

	Claimed	Allowed
<b>Secured</b>		
<b>Priority</b>		
<b>Administrative</b>		

## Terri Marshall

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**From:** chris\_allan@slipstick.com.au  
**Sent:** Wednesday, October 30, 2019 8:33 PM  
**To:** BMC-HOBO  
**Cc:** 'Slipstick Orders'; John Dobey  
**Subject:** RE: HOBO Chapter 11 Case 18-30039  
**Attachments:** 433\_HOBO\_POC\_MorganAdmin\_18-30039 - Signed.pdf; 27260 Freight.pdf; 27260 Invoice.pdf; 27374 Freight.pdf; 27374 Invoice.pdf; 27677 Freight.pdf; 27677 Invoice.pdf

Hi Terri,

This is not a new claim, it looks like I have doubled up, please use whatever extra information I have sent to you to support the original claim, thank you.

Regards,  
**Chris Allan**  
**President**

**Slipstick**

1000 Apollo Road, Suite B 03  
Eagan, MN 55121, USA  
P: +1 651 259 4393  
Skype: [SlipstickUSA](#)  
W: [www.SlipstickFeet.com](http://www.SlipstickFeet.com)  
E: [chris\\_allan@slipstick.com.au](mailto:chris_allan@slipstick.com.au)

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**From:** Terri Marshall <tmarshall@bmcgroup.com> **On Behalf Of** BMC-HOBO  
**Sent:** Wednesday, 30 October 2019 1:40 AM  
**To:** 'chris\_allan@slipstick.com.au' <chris\_allan@slipstick.com.au>  
**Cc:** Slipstick Orders <orders@slipstick.com.au>; BMC-HOBO <hobo@bmcgroup.com>  
**Subject:** RE: HOBO Chapter 11 Case 18-30039

Mr. Allan,  
We are in receipt of the documents sent regarding CBD claim.

CBD Consolidated has previously filed a claim for this liability.  
KLS Acquisition case: Claim number 36.  
Please confirm your intent in sending these documents:  
Is this a NEW claim submission for the main case – Morgan Administration.

I note the claim date of 8/19/2019 on these attachments.

Thank You, please advise.

Terri Marshall  
816-218-1401

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**From:** [chris\\_allan@slipstick.com.au](mailto:chris_allan@slipstick.com.au) [[mailto:chris\\_allan@slipstick.com.au](mailto:chris_allan@slipstick.com.au)]

**Sent:** Tuesday, October 22, 2019 3:02 PM

**To:** BMC-HOBO <[hobo@bmcgroup.com](mailto:hobo@bmcgroup.com)>

**Cc:** Slipstick Orders <[orders@slipstick.com.au](mailto:orders@slipstick.com.au)>

**Subject:** HOBO Chapter 11 Case 18-30039

To Whom It May Concern,

Please find attached documents as requested for claim of product supplied to HOBO without payment.

Regards,

**Chris Allan**

**President**

***Slipstick***

1000 Apollo Road, Suite B 03

Eagan, MN 55121, USA

P: +1 651 259 4393

Skype: [SlipstickUSA](#)

W: [www.SlipstickFeet.com](http://www.SlipstickFeet.com)

E: [chris\\_allan@slipstick.com.au](mailto:chris_allan@slipstick.com.au)



**Fill in this information to identify the case:**

Debtor 1 Morgan Administration, Inc.

Debtor 2 \_\_\_\_\_  
(Spouse, if filing)

United States Bankruptcy Court for the: Northern District of Illinois - Eastern Div

Case number 18-30039

**Official Form 410****Proof of Claim**

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim****1. Who is the current creditor?**CBD Consolidated LLC

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor DBA Slipstick USA**2. Has this claim been acquired from someone else?**☒ No☐ Yes. From whom? \_\_\_\_\_**3. Where should notices and payments to the creditor be sent?**

Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)

**Where should notices to the creditor be sent?**CBD Consolidated LLC

Name

1000 Apollo Road Suit B03

Number Street

EaganMN55121

City

State

ZIP Code

Contact phone 651 259 4393Contact email orders@slipstick.com.au**Where should payments to the creditor be sent? (if different)**CBD Consolidated LLC

Name

1000 Apollo Road Suit B03

Number Street

EaganMN55121

City

State

ZIP Code

Contact phone 651 259 4393Contact email orders@slipstick.com.auUniform claim identifier for electronic payments in chapter 13 (if you use one):  
\_\_\_\_\_**4. Does this claim amend one already filed?**☒ No☐ Yes. Claim number on court claims registry (if known) \_\_\_\_\_

Filed on \_\_\_\_\_

MM / DD / YYYY

**5. Do you know if anyone else has filed a proof of claim for this claim?**☒ No☐ Yes. Who made the earlier filing? \_\_\_\_\_

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor? ☒ No  
☐ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim? \$ 827.20. Does this amount include interest or other charges?  
☒ No  
☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
Limit disclosing information that is entitled to privacy, such as health care information.

Goods Sold

9. Is all or part of the claim secured? ☒ No  
☐ Yes. The claim is secured by a lien on property.
- Nature of property:**
- ☐ Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.
- ☐ Motor vehicle
- ☐ Other. Describe: \_\_\_\_\_
- Basis for perfection:** \_\_\_\_\_
- Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
- Value of property:** \$ \_\_\_\_\_
- Amount of the claim that is secured:** \$ \_\_\_\_\_
- Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amounts should match the amount in line 7.)
- Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_
- Annual Interest Rate** (when case was filed) \_\_\_\_\_ %
- ☐ Fixed
- ☐ Variable

10. Is this claim based on a lease? ☒ No  
☐ Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff? ☒ No  
☐ Yes. Identify the property: \_\_\_\_\_



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

☒ No

☐ Yes. Check one:

- ☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).
- ☐ Up to \$2,850\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).
- ☐ Wages, salaries, or commissions (up to \$12,850\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).
- ☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).
- ☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).
- ☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

Amount entitled to priority

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☒ I am the creditor.
- ☐ I am the creditor's attorney or authorized agent.
- ☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- ☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that 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.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date

08/19/2019  
MM / DD / YYYY



Signature

Print the name of the person who is completing and signing this claim:

Name Christopher John Allan  
First name Middle name Last name

Title President

Company CBD Consolidated LLC  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1000 Apollo Road Suit B03  
Number Street

Eagan MN 55121  
City State ZIP Code

Contact phone 651 259 4393 Email chris\_allan@slipstick.com.au

Inv 27260

781789159505

Delivered

Thursday 7/12/2018 at 3:07 pm

DELIVERED

Signed for by: Signature on File

GET STATUS UPDATES

OBTAIN PROOF OF DELIVERY

FROM

Eagan, MN US

TO

Bridgeview, IL US

Multiple-piece Shipment

No items found

Shipment Facts

<b>TRACKING NUMBER</b> 781789159505	<b>SERVICE</b> FedEx Ground	<b>REFERENCE</b> Invoice #27260
<b>MASTER TRACKING NUMBER</b> 781789159505	<b>WEIGHT</b> 11 lbs / 4.99 kgs	<b>DIMENSIONS</b> 17x14x13 in.
<b>TOTAL PIECES</b> 2	<b>TOTAL SHIPMENT WEIGHT</b> 34 lbs / 15.42 kgs	<b>TERMS</b> Shipper
<b>PURCHASE ORDER NUMBER</b> N000021557	<b>PACKAGING</b> Package	<b>STANDARD TRANSIT</b> 7/12/2018
<b>SHIP DATE</b> Tue 7/10/2018	<b>ACTUAL DELIVERY</b> Thu 7/12/2018 3:07 pm	

Travel History

Local Scan Time

Thursday, 7/12/2018		
3:07 pm	Bridgeview, IL	Delivered Signature on file
4:03 am	I A GRANGE, IL	On FedEx vehicle for delivery

# Slipstick® USA

## Invoice

1000 Apollo Road, Suite B 03  
Eagan, MN 55121

**Phone #** 651 259 4393    **Web Site** www.slipstick.com.au  
**Fax #** 651 259 4394    **E-mail** accounts@slipstick.com.au

Date	P.O. Number	Invoice #
7/10/2018	N000021557	27260

### Ship To

HOBO #47  
7557 S. 78th Ave  
Bridgeview, IL 60455

### Bill To

HOBO  
2650 Belvidere Road  
Waukegan, IL 60085

Supplier #	Cartons	Ship	State	Terms	Via	Due Date
	0	7/10/2018		Net 30		8/9/2018

Item Code	Description	Qty	Price	Amount
CB845	Set of 4 x Slipstick Castor Cups Chocolate	20	4.55	91.00T
CB011	3/4" round, heavy duty felt pads self-stick, Oatmeal	20	0.72	14.40T
CB013	1" round, heavy duty felt pads self-stick, Oatmeal	60	0.72	43.20T
CB071	Assorted pack, heavy duty felt pads, Oatmeal	40	2.26	90.40T
CB017	1-1/2" round, heavy duty felt pads self-stick, Oatmeal	90	0.89	80.10T
	FedEx Package 1 Tracking #: 781789159505 FedEx Package 2 Tracking #: 781789159608 Shipping Charges: \$37.17 Reseller #		0.00%	0.00

We now accept credit cards via PayPal, call for details: 651.259.4393.  
Checks payable to Slipstick.  
Mail to: Suite B 03, 1000 Apollo Road, Eagan, MN, 55121  
CBD Consolidated, LLC DBA Slipstick. Country of Origin: China

Invoice Total \$319.10

**Acct Balance \$827.20**

Inv 27374

782030862881

Delivered  
Tuesday 7/31/2018 at 3:26 pm

DELIVERED  
Signed for by: AALEIDA  
GET STATUS UPDATES  
OBTAIN PROOF OF DELIVERY

FROM

Eagan, MN US

TO

Bridgeview, IL US

Multiple-piece Shipment

No items found

Shipment Facts

TRACKING NUMBER 782030862881	SERVICE FedEx Ground	REFERENCE Invoice #27374
MASTER TRACKING NUMBER 782030862881	WEIGHT 14 lbs / 6.35 kgs	DIMENSIONS 18x18x9 in.
TOTAL PIECES 2	TOTAL SHIPMENT WEIGHT 26 lbs / 11.79 kgs	TERMS Shipper
PURCHASE ORDER NUMBER 21754	PACKAGING Package	STANDARD TRANSIT 7/31/2018
SHIP DATE Fri 7/27/2018	ACTUAL DELIVERY Tue 7/31/2018 3:26 pm	

Travel History

Local Scan Time

Tuesday, 7/31/2018		
3:26 pm	Bridgeview, IL	Delivered
5:11 am	LA GRANGE, IL	On FedEx vehicle for delivery

# Slipstick® USA

1000 Apollo Road, Suite B 03  
Eagan, MN 55121

**Phone #** 651 259 4393    **Web Site** www.slipstick.com.au  
**Fax #** 651 259 4394    **E-mail** accounts@slipstick.com.au

## Invoice

Date	P.O. Number	Invoice #
7/27/2018	N000021754	27374

### Ship To

HOBO #47  
7557 S. 78th Ave  
Bridgeview, IL 60455

### Bill To

HOBO  
2650 Belvidere Road  
Waukegan, IL 60085

Supplier #	Cartons	Ship	State	Terms	Via	Due Date
	0	7/27/2018		Net 30		8/26/2018

Item Code	Description	Qty	Price	Amount
CB845	Set of 4 x Slipstick Castor Cups Chocolate	20	4.55	91.00T
CB011	3/4" round, heavy duty felt pads self-stick, Oatmeal	10	0.72	7.20T
CB017	1-1/2" round, heavy duty felt pads self-stick, Oatmeal	30	0.89	26.70T
CB680	Set of 5 Slipstick Rubber Castor Wheels	10	7.98	79.80T
	FedEx Package 1 Tracking #: 782030862881 FedEx Package 2 Tracking #: 782030863384 Shipping Charges: \$23.17 Reseller #		0.00%	0.00

We now accept credit cards via PayPal, call for details: 651.259.4393.  
Checks payable to Slipstick.  
Mail to: Suite B 03, 1000 Apollo Road, Eagan, MN, 55121  
CBD Consolidated, LLC DBA Slipstick. Country of Origin: China

Invoice Total \$204.70

**Acct Balance \$827.20**

Inv 27677

782949568737

Delivered  
Monday 10/01/2018 at 3:34 pm

**DELIVERED**

Signed for by: Signature on File

GET STATUS UPDATES  
OBTAIN PROOF OF DELIVERY

**FROM**  
Eagan, MN US

**TO**  
Bridgeview, IL US

Multiple-piece Shipment

No items found

**Shipment Facts**

**TRACKING NUMBER**  
782949568737

**SERVICE**  
FedEx Ground

**REFERENCE**  
Invoice #27677

**MASTER TRACKING NUMBER**  
782949568737

**DOOR TAG NUMBER**  
DT713949595970

**WEIGHT**  
22 lbs / 9.98 kgs

**DIMENSIONS**  
20x20x17 in.

**TOTAL PIECES**  
2

**TOTAL SHIPMENT WEIGHT**  
44 lbs / 19.96 kgs

**TERMS**  
Shipper

**PURCHASE ORDER NUMBER**  
22318

**PACKAGING**  
Package

**STANDARD TRANSIT**  
9/28/2018

**SHIP DATE**  
Wed 9/26/2018

**ACTUAL DELIVERY**  
Mon 10/01/2018 3:34 pm

**Travel History**

Local Scan Time

Monday, 10/01/2018  
3:34 pm

Bridgeview, IL

Delivered  
Signature on file

Saturday, 9/29/2018  
4:51 am

1 A GRANGE II

On FedEx vehicle for delivery



# Slipstick® USA

1000 Apollo Road, Suite B 03  
Eagan, MN 55121

**Phone #** 651 259 4393    **Web Site** www.slipstick.com.au  
**Fax #** 651 259 4394    **E-mail** accounts@slipstick.com.au

## Invoice

Date	P.O. Number	Invoice #
9/26/2018	N000022318	27677

### Ship To

HOB0 #47  
7557 S. 78th Ave  
Bridgeview, IL 60455

### Bill To

HOB0  
2650 Belvidere Road  
Waukegan, IL 60085

Supplier #	Cartons	Ship	State	Terms	Via	Due Date
	0	9/26/2018		Net 30		10/26/2018

Item Code	Description	Qty	Price	Amount
CB845	Set of 4 x Slipstick Castor Cups Chocolate	10	4.55	45.50T
CB011	3/4" round, heavy duty felt pads self-stick, Oatmeal	40	0.72	28.80T
CB013	1" round, heavy duty felt pads self-stick, Oatmeal	50	0.72	36.00T
CB071	Assorted pack, heavy duty felt pads, Oatmeal	50	2.26	113.00T
CB017	1-1/2" round, heavy duty felt pads self-stick, Oatmeal	90	0.89	80.10T
	FedEx Package 1 Tracking #: 782949568737 FedEx Package 2 Tracking #: 782949568690 Shipping Charges: \$36.22 Reseller #		0.00%	0.00

We now accept credit cards via PayPal, call for details: 651.259.4393.  
Checks payable to Slipstick.  
Mail to: Suite B 03, 1000 Apollo Road, Eagan, MN, 55121  
CBD Consolidated, LLC DBA Slipstick. Country of Origin: China

Invoice Total \$303.40

**Acct Balance \$827.20**