Case 18-30057 Claim 15-1 Filed 01/23/19 Desc Main Document Page 1 of 4

Fill in this in	formation to identify the case:
Debtor 1	Deforab LLC
Debtor 2 (Spouse, if filing)	
United States I	Bankruptcy Court for the: Northern District of Illinois - Eastern Div
Case number	18-30057

FILED

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

JAN 23 2019

JEFFREY P. ALLSTEADT, CLERK
TEAM - CA

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.

Pa	Int 1: Identify the (Claim
	Who is the current creditor?	Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor
a	Has this claim been acquired from someone else?	No Yes. From whom?
a C F	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? Chicago Stool E. Chair, Orce. Name 1230 Saint Charles St. Number Street City State ZIP Code Contact phone 847-289-9955 Contact phone CSCi 2001 a Slocglobal. Contact email CSCi 2001 a slocglobal. Uniform claim identifier for electronic payments in chapter 13 (if you use one):
	oes this claim amend ne already filed?	No Yes. Claim number on court claims registry (if known) Filed on
el	o you know if anyone se has filed a proof f claim for this claim?	No Yes. Who made the earlier filing?

P	art 2: Give Informatio	n About the Claim as of the Date the Case Was Filed
	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 Jebtor:
	How much is the claim?	\$
		Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
3.	What is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
	claim?	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.
9.	Is all or part of the claim	No Yes. The claim is secured by a lien on property.
	secured?	
		Nature of property:
	Real estate. If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> .	
		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: \$
		Amount hospitally to the any
		Annual Interest Rate (when case was filed)%
		☐ Fixed
		Variable
1	0. Is this claim based on a	¥ No
	lease?	Yes. Amount necessary to cure any default as of the date of the petition.
-	1. Is this claim subject to a	I ★ No
	right of setoff?	Yes. Identify the property:
		Tes. Identity the property.

12. Is all or part of the claim entitled to priority under						
11 U.S.C. § 507(a)? A claim may be partly	Domestic support obligations (including alimony and child support) under	Amount entitled to priority				
priority and partly nonpriority. For example,	11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$				
in some categories, the law limits the 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).	\$				
, SI (B2)	■ 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	Check the appropriate box:					
this proof of claim must sign and date it.	I am the creditor.					
FRBP 9011(b). If you file this claim	I am the creditor's attorney or authorized agent.					
electronically, FRBP 5005(a)(2) authorizes courts	 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. 					
to establish local rules	gamma, carety, chartery of caret codestor. Barriciapley Naic 3000.					
specifying what a signature is.	I understand that an authorized signature on this <i>Proof of Claim</i> 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.					
A person who files a fraudulent claim could be						
fined up to \$500,000, imprisoned for up to 5	I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.					
years, or both. 18 U.S.C. §§ 152, 157, and	I declare under penalty of perjury that the foregoing is true and correct.					
3571.	Executed on date 10 - 25- 2018 MM / DD / YYYY					
	Sizesta Sizest					
	Signature					
	Print the name of the person who is completing and signing this claim:					
	Name HeShou Licing First name Middle name Last name					
	Title OWNER					
	Company Chicago Stool * Chair, Inc. Identify the corporate servicer as the company if the authorized agent is a servicer.					
	Address 1230 Saint Charles Street					
	Number Street Elgin L 6012	9				
	City J State ZIP Code					
	Contact phone 847 - 289 - 9955 Email (Sc. 2001	@ Sbcalobal. net				

Case 18-30057 Claim 15-1 Part 2 Filed 01/23/19 Desc Document Continued Page 1 of 15

Statement of HOBO Sales from CHICAGO STOOL AND CHAIR 2018

Hobo PO#	our Invoice#	Order Date	Shipping	Amount	STOOL AND CHAIR 2018			186
				Amount	Past Due	Due Date	Paid on	check#
N19946	18-0001	12/28/2017	1/15/2018	\$12,127.85				14
N20284	18-0017	2/15/2018		\$11,450.20		2/15/2018	3/2/2018	45792
N20284A	18-0017A	2/15/2018	3/8/2017	\$9,800.00		4/7/2018	5/15/2018	46071
				45,000.00		4/8/2018	5/15/2018	46071
N20628	18-0027	3/20/2018	4/6/2018	\$16,292.40				
N20628A	18-0027A	3/20/2018	4/9/2018	\$10,676.25		5/6/2018	6/11/2018	46286
				,,		5/9/2018	6/11/2018	46286
N21047	18-0036	5/3/2018	5/14/2018	£12 CEE 75				
N21047	18-0036A	5/3/2018	5/18/2018	\$13,655.75		6/14/2018	7/16/2018	456506
N21047	18-0036B	5/3/2018	5/24/2018	\$13,135.00 \$11,521.80		6/18/2018	7/24/2018	46722
		5,5,2010	3/24/2018	\$11,521.80		6/24/2018	7/24/2018	46722
HOBO PO#	our Invoice#	Order Date	Ohtest		7			
	- Involoon	Order Date	Shipping	Amount]	Due Date		
N21503	18-0046	6/27/2018	7/11/2018	\$9,988.70				
N21503	18-0046A		7/16/2018	\$4,283.85	x	8/11/2018	UNPAID	
				V 1,203.03	x	8/16/2018	UNPAID	
N21646	18-0050	7/17/2018	8/9/2018	A				
	10 0000	7/17/2016	8/9/2018	\$13,250.90	x	9/9/2018	UNPAID	
N21886	10.0054							
142 1000	18-0051		8/24/2018	\$21,739.50	x	9/24/2018	UNPAID	
	18-0051A		8/28/2018	\$21,583.05	x	9/28/2018		
	18-0051B		9/17/2018	\$9,471.00	x	10/17/2018	UNPAID	
	18-0051C	8/14/2018	9/24/2018	\$4,272.05	x		UNPAID	
						10/24/2018	UNPAID	

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911

To: HOBOBelvidere Road
Waukegan, IL60085

INVOICE NO: 18-0046 DATE: July 11, 2018

SALESPERSON	P.O. NUMBER	DATE SHIPPED				
		DATE SHIFFED	SHIPPED VIA	PRICE BASE	TERMS	
	N000021503	July 11, 2018	Cycle Logistics	FOB Elgin	Net 30 days	
					,0	

TOTAL	DESCRIPTION		NAME OF ACTUAL PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS OF THE PAR
80	29" Black Saddle Stool / 1044460 pallet 1-4 of 29	PRICE	EXTENSION
60		21.75	1740.00
	24' Black Saddie Stool / 1044461 pallet 5-7 of 29	21.25	1275.00
40	29" Dark Oak Saddle Stool / 1161923 pallet 8-9 of 29	21.75	870.00
80	24" Dark Oak Saddle Stool / 1161924 pallet 10-13 of 29	21.25	1700.00
55	24" Clark / 1179997 pallet 15-17 of 29 (2 x 20 pcs and 1 x 15 pcs)		
28	29" Clark / 1179998 pallet 18-19 of 29 (1 x 20 pcs and 1 x 8pcs)	26.50	1457.50
12	24" Gavin / 1205619 pallet 23 of 29	27.50	770.00
1	29" Gavin / 1219136 pallet 24-27 of 29 (12pcs per pallet)	33.95	407.40
	(12pcs per pallet)	36.85	1768.80
	**1st shipment of po#N21503 (23 pallets of 29 total) **Total 403 stools		
-	Packed on 23 pallets		
ĺ		i	
		-	
			\$9988.70

Make all checks payable to: CHICAGO STOOL & CHAIR INC. If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

UTICE: Shipp CASE response telephone no Wemorandum	LAS 3005 NG CIAMORS - LAS 3005 Vilaterials must enter 24-ho umber under "Emergency Response P	TPAV12 Filed ur emergency hone Number	01/23/19 of 15	Desc Doo	cument Con	ding No. (8	age - boll
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ne agreed or declared value the shipper to be not exce		recourse on the consignormal	r, the consignor s	shall sign the following :	vered to the consigne statement.	e without FREIG	SHT CHARGE
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ination. It is mutually agree that every service to be p date hereof, if this is a rail terms and conditions of the per and accepted for himself with "RQ" if appropriate to de-	e classifications and lawfully filed taniffs in effickages unknown), marked, consigned, and dithe property under the contract) agrees to da as to each carrier of all or any of, said performed hereunder shall be subject to all the or a rail-water shipment or [2] in the application of fading, set forth in the classifical and his assigns. Moterials as defined in the Lipid programment of the reasportation of haracters.	carry to its usual place of o carry to its usual place of o property over all or any port te terms and conditions of to cable motor carrier classific ation or tariff which governs	which said carrier, lelivery at said de ion of said route i he Uniform Dome ation or tariff, if t the transportatio	(the word carrier being stination, if on its route to destination and as to stic Straight Bill of Ladi his is a motor carrier on of this shipment, and	noed above in apparer g understood through c, otherwise to deliver g each party at any ti ng set forth (1) in Ur shipment. Shipper he d the said terms and	nt good order, except not this contract as m to another carrier or me interested in all or inform Freight Classific greby certifies that he conditions are hereby	es noted (conter earling any pers the route to si any of said pro ations in effect is familiar with
of Federal Regulations. Also when the control of th	zardous materials on Bills of Lading per 172,201(s) ien shipping hazardous materials, the shipper's con-	se of this column is pany inte a)(1) (iii) of Title 49 172, Sut tification statement tions 17:	rpretation of require	ments as described in 49 (ers. Such description consists.	ponsibility of individual cor Code of Federal Regulation sts of the following per Se	Note: Liability lines or damage in	nitation for lo
PPER 1 4	the Foderal Regulations, as indicated on the Bill of requirement is provided in the Regulation for a parti	cular material. Proper s	nipping name, hazan diary class(es).	naterial Table) and Section: dous class, UN identification	on number, packing grou	3: United States	odo Castia
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marked, and labeled, applicable regulations	the above named materials are properly class and are in proper condition for transportation of the U.S. Department of Transportation.	according to the tion was	cknowledges recei		equired placards. Carri Department of Transp described above is re	er certifies emergency re portation emergency re	response informi sponse guideboo
						esivea in good order, e:	ccept as noted.

Chicago Stool & Chair Inc. 1230 St. Charles Street

Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911

To: HOBOBelvidere Road
Waukegan, IL60085

INVOICE NO: 18-0046A DATE: July 16, 2018

SALESPERSON	P.O. NUMBER	DATE SHIPPED	THE RESERVE THE PROPERTY OF THE PARTY OF THE	SECT LA STAR MINISTER PROPERTY AND A STAR STAR STAR STAR STAR STAR STAR ST		
	N000021503	DATE SHIPPED	SHIPPED VIA	PRICE BASE	TERMS	
		July 16, 2018	Ecno Logistics	FOB Elgin	Net 30 days	

TOTAL			
23	DESCRIPTION 5 Ties London at 18 19	PRICE	EXTENSION
30	5 Tier Ladder shelf / Black / 1178240 pallet 14 of 29 Kitchen Trolley Cart Black / 1195333 pallet 20-22 of 29	27.50	632.50
23	Loyd Console Table / 1237793 pallet 28-29 of 29 (1 x 12pcs and 1 x 11pcs)	52.75 89.95	1582.50 2068.85
	**2nd shipment of po#N21503 (6 pallets of 29 total) Total 23 5 tier ladders Total 30 kitchen carts Total 23 loyd tables Packed on 6 pallets		
	•		\$4283.85
ake all checks	payable to: CHICAGO STOOL & CURE IND		

Make all checks payable to: CHICAGO STOOL & CHAIR INC.
If you have any questions concerning this invoice, call at (847)289-9955
THANK YOU FOR YOUR BUSINESS!

BILL OF LADING	BOL Number: 32527916
SHIP FROM	ALC: WILLIAM STATE OF THE STATE
Name: Chicago Stool & Chair inc. Address 1: 1230 Saint Charles St Address 2: Address 3: City/State/Zip: ELGIN, IL, 60120 Kathy P: (847) 289-9955 Ext. F: Stop Notes:	Carrier: Monroe Transportation Service, Inc. Pro # Pick WT PCS SDAY 31778401 Trail
SHIP TO	REFERENCE INFORMATION
Name: HOBO Distribution Address 1: 7557 S 78th Ave Address 2: Address 3:	Reference Name Load BOL # N21503A Load PO# N21503A
City/State/Zip: BRIDGEVIEW, IL, 60455 Barb P: 708-924-9155 Ext.17 F: Stop Notes:	18-00-16A
THIRD PARTY FREIGHT CHARGES BILL TO Echo Global Logistics 600 W Chicago Ave Ste 725 Chicago, IL 60654	
Freight Charge Terms: Carrier Acct #: Prepaid X Collect 3rd Party X Quote ID:	
Special Instructions: Call Jessica @ Echo with ?s 847.213.2539 DO NOT STACK *No addntl services approved*	Shipper Instructions Pickup #: N21503A Loc Type: Business Special Services: Consignee Instructions Delivery #: N21503A Loc Type: Business Special Services:
ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading. LTL or Partial Only: # of Pallets: 6 Pallet Type: Skid Spots: 0 Stackable: No Pallet Dimensions: L: W: H:	
CARRIER IN	IFORMATION
HANDLING UNIT PACKAGE HM OE QTY TYPE QTY TYPE WEIGHT (X) (X) 6 Pallets 0 3800 3800 3800 3800	COMMODITY DESCRIPTION LTL Only
here the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of epipoperty as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not per" OTE Liability Limitation for loss or damages in this shipser.	COD Amount: \$ Fee Terms: Collect: Prepaid: Customer check acceptable:
OTE Liability Limitation for loss or damage in this shipment may be applic CEIVED, subject to individually determined rates or contacts that have been agreed upon in writing between the carrier and applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are inlable to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Section 7) Shipper Signature
HIPPER SIGNATURE / DATE sis to certify that the above-named materials are properly scalled, described, packaged, marked, and labeled and are in proper diduction for junasportation according to the applicable regulations of Department of Transportation. Date: 710-19 By Driver By Driver By Driver	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledger receipt of packages sind required placatists. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation/beforegency response guidebox or equivalent in other verbice.

Chicago Stool & Chair Inc. 1230 St. Charles Street

Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911



To: HOBO

Belvidere Road Waukegan, IL60085 INVOICE NO: 18-0050 DATE: August 9, 2018

SALESPERSON	P.O. NUMBER	DATE CHEST	CHICAGON CO. DE CONTROL DE SANCE DE CONTROL			
		DATE SHIPPED	SHIPPED VIA	PRICE BASE	TERMS	7
	N000021646	August 9 , 2018	Cycle Logistics	FOB Elgin	Net 30 days	1
					not oo days	

	TOTAL			
	60	DESCRIPTION 29" Black Saddle Stool / 1044400	PRICE	EXTENSION
	100	29" Black Saddle Stool / 1044460 pallet 1-3 of 25 24' Black Saddle Stool / 1044461 pallet 4-8 of 25	21.75	1305.00
	40	24" Dark Oak Saddle Stool / 1161923 pallet 9-10 of 25	21.25	2125.00
	28	5 Tier Ladder Black / 1178240 pallet 11 of 25	21.25	850.00
	60	Kitchen Trolley Cart Black / 1195333 pallet 12-13 of 25 **(12 pcs per pallet) 24" Gavin / 1205619 pallet 14-17 of 25	52.75	770.00 1266.00
	84	29" Gavin / 1219136 pallet 18-23 of 25	33.95	2037.00
	6	Market Island Cart / 1237645 pallet 24 of 25	36.85	3095.40
		Decorator Stand Espresso / 1237786 pallet 25 of 25 **(with white)	90.00	540.00
1	25	Decorator Stand White / 1237790 pallet 25 of 25 **(with white)	12.50	950.00
		(with espresso)	12.50	312.50
		Total 344 stools Total 28-5 Tier Ladders Total 24 Kitchen Carts		
		Total 6 Market Islands Total 101 Decorator Stands		
	1	Packed on 25 pallets		
	SEC M			
				\$13250.90
Ma	ake all che	ecks payable to: CHICACO STOOL & COLOR		

Make all checks payable to: *CHICAGO STOOL & CHAIR INC.* If you have any questions concerning this invoice, call at (847)289-9955 **THANK YOU FOR YOUR BUSINESS!**

Shippers of hazardous materials must enter 24-	1-Bart 2	Filed 0	1/23/19 f 15 % ~	()	cument Co	ntinue	d Pa	age
esponse telephone number under "Emergency Response Criginal—Not Negotiable	Phone Number	, d (ate U	1	8 Bill of	Lading N	0.18	-0050
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tate specifically in writing the agreed or declared value are required to the spread or declared value of the property. The agreed or declared value of the property is hereby specifically stated who shipper to be not exceeding	recourse on the	ion 7 of the con	nditions, if this sh	COLLECT :	S C elivered to the consign p statement.	HARGES:	\$	
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sportation Regulations joverning the transportation of hazardous materials as defined in the U sportation Regulations joverning the transportation of hazardous materials. The us sportal method for identifying hazardous materials on Bills of Lading per 172,2016, or Federal Regulations. Also when shipping hazardous materials, the shipper's cert article in section 172,204(a) of the Federal Beachting.	.S. Department of e of this column is	The format and	content of hazardo	us item list is the re-	sponsibility of individual co	1 conditions	are hereby a	igreed to by the
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1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911



To: HOBOBelvidere Road
Waukegan, IL60085

INVOICE NO: 18-0051 DATE: August 24, 2018

SALESPERSON	P.O. NUMBER	DATE CLIEBER			
		DATE SHIPPED	SHIPPED VIA	PRICE BASE	TERMS
	N000021886	August 24, 2018	Cycle Logistics	FOB Elgin	Net 30 days
					oo days

TOTAL	DECORDINA		
81	DESCRIPTION Framhouse Rustic Consols 40 47000	PRICE	EXTENSIO
80	Framhouse Rustic Console/1247230 pallet 1-7 (6pallets 12 pcs, 1 pallet 9 pcs)	68.50	5548.50
5274-086	Rustic Kitchen Cart/1247232 pallet 8-19** (11 pallets 16pcs,1 pallet4pc and 12 stools)	57.50	10350.00
20	5 Tier Ledger Bookcase/1219137 pallet 20-23		3.
7	Ripley 24" / 29" Adjustable/1205616 pallet 24	44.50	5340.00
2	24" Natural Stool/1053652 **pallet 19 (with rustic kitchen cart)	15.00	405.00
	pallet 19 (with fustic kitchen cart)	8.00	96.00
	** SHIPMENT #1 **		
	Total 81 Farmhouse Total 180 Rustic Carts		
Ì	Total 39 Stools Total 120 5 tier Ledger		
	Packed on 24 pallets		
1			
	·		
			21739.50
e all ch	ecks payable to: CHICAGO STOOL & CLARE WA	-	

Make all checks payable to: *CHICAGO STOOL & CHAIR INC.*If you have any questions concerning this invoice, call at (847)289-9955 **THANK YOU FOR YOUR BUSINESS!**

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	36								

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911



To: HOBOBelvidere Road
Waukegan, IL60085

INVOICE NO: 18-0051A DATE: August 24, 2018

NIGORGANICA DATE SHIPPED SHIPPED VIA PRICE		The state of the s	NAME AND ADDRESS OF THE OWNER, THE OWNER, THE	DATE CHIEDER	P.O. NUMBER	SALESPERSON
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Adjust 28, 2018 Cycle Logistics FOB		FOB Elgin	Cycle Logistics	August 28 , 2018	N000021886	

TOTAL	DESCRIPTION		
144	Mission Coat Rack Walnut / 1247231 pallet 25-28	PRICE	EXTENSION
57	24/29" Ripley Stool / 1205616 pallet 29-30 (3pcs on pallet #46 with market island)	64.50	9288.00
96	24" Natural Stool / 1053652 pallet 31-32	15.00	855.00
60	29" Dark Oak Stool / 1161923 pallet 33-35	8.00	768.00
41		21.75	1305.00
44	5 Tier Ladder Shelf Black / 1178240 pallet 36-37(#36 26pcs, #37 15pcs + 2pc Loyd)	27.50	1127.50
1,10,000	Kitchen Carts Black / 1195333 pallet 38-40 (#38 and #39 15pc , #40 14pc)	52.75	2321.00
	24" Gavin Stool / 1205619 pallet 41-43	33.95	1527.75
	29" Gavin Stool / 1219136 pallet 44-45	36.85	1031.80
	Market Island Cart / 1237645 pallet 46 (+3 24/29" ripley)	90.00	810.00
	Decorator Stand Espresso/1237786 pallet 47	12.50	450.00
	Decorator Stand White1237790 pallet 47		300.00
20	Loyd Console Table w/ Baskets / 1237793 pallet 48 (18 pcs, 2 with 5 tier ladder)		1799.00
	SHIPMENT #2	00.00	1700.00
	Total 144 Coat Racks Total 286 Stools Total 20 Loyd Console table		
	Total 41-5 tier Black Total 53 Kitchen Carts Total 60 Plant Stands		
	Packed on 24 pallets		
1			
			\$21583.05
ke all ch	ecks payable to: CHICAGO STOOL & QUALTURE	-	

Make all checks payable to: CHICAGO STOOL & CHAIR INC. If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

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Chicago Stool & Chair Inc. 1230 St. Charles Street

Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911 INVOICE

To: HOBOBelvidere Road
Waukegan, IL60085

INVOICE NO: 18-0051B DATE: Sept 17, 2018

SALESPERSON	P.O. NUMBER	DATE CHIDDED			
		DATE SHIPPED	SHIPPED VIA	PRICE BASE	TERMS
	N000021886	Sept 17, 2018	Cycle Logistics	FOB Elgin	Net 30 days

TO	TAL	DESCRIPTION		
216	6	24/29" Ripley / 1205616 pallet 49-56	PRICE	EXTENSION
40		29" Black Saddle Stools / 1044460 pallet 57-58	15.00	3240.00
100		24" Black Saddle Stools / 1044461 pallet 59-63	21.75	870.00
192		24" Natural / 1053652 pallet 64-67	21.25 8.00	2125.00 1536.00
80		24" Dark Oak Saddle Stools / 1161924 pallet 68-71 **SHIPMENT #3**	21.25	1700.00
		Total 628 Stools		
		Packed on 23 pallets		
Malia	-11 -1			\$9471.00
iviake a	all ch	ecks payable to: CHICAGO STOOL & CULTURE	-	1

Make all checks payable to: CHICAGO STOOL & CHAIR INC.
If you have any questions concerning this invoice, call at (847)289-9955
THANK YOU FOR YOUR BUSINESS!

Carrier) FROM: Shipper Street Origin I or additional car packaged as to e r National Motor f The conditional representation of the Uniform	A this shall this shall this shall	C.O.D. FEE: PREPAID TO COLLECT IN Biggreen without	C delivered	Phone Weight Subject to prrecion) * 7000	de (gency Res e Number Rate or TAL HARGES: ee without	r Class	CHARGES.
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sification or tarif erns the transpi	f, if this i	is a motor ca of this shipment	Lading se rrier shipr and the	et forth (1) in L ment. Shipper h	Jniform Frei iereby certif	ight Classific fies that he	ations in effect is familiar with
ormat and conten	t of hozond	loug itam list is al		41			
Subpart C-Shippin	o Pacono I	Cost described in	149 Lode o	of Federal Regulati	ons or d	amage in	mitation for li this shipm
172.201 (Hazan er shipping name, subsidiary class(es	hazardous	s class, UN identi	ections 172 ification nur	2.202 and 172.2 mber, packing gro	D3: Unite	d States	cable. See Code, Section
RIER	J.	•			14/	06(c (1)(A)	and (B).
ier acknowledges was made availa	s receipt o	of packages and	any require	ed placards. Car	rier certifies	semergency	response inform
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						T. I Transmission	
1	er acknowledges vas made availal uivalent docume	er acknowledges receipt of vas made available and/o uivalent documentation in	er acknowledges receipt of packages and vas made available and/or carrier has th uivalent documentation in the vehicle. Pro	er acknowledges receipt of packages and any requir vas made available and/or carrier has the U.S. Der uivalent documentation in the vehicle. Property des	er acknowledges receipt of packages and any required placards. Car vas made available and/or carrier has the U.S. Department of Tran uivalent documentation in the vehicle. Property described above is a	er acknowledges receipt of packages and any required placards. Carrier certifies vas made available and/or carrier has the U.S. Department of Transportation e uivalent documentation in the vehicle. Property described above is received in g	ier acknowledges receipt of packages and any required placards. Carrier certifies emergency in was made available and/or carrier has the U.S. Department of Transportation emergency requivalent documentation in the vehicle. Property described above is received in good order, expensely the second of the contract of the

1230 St. Charles Street Elgin, IL 60120 Tel: (847)289-9955 Fax: (847)289-9911 INVOICE

To: HOBOBelvidere Road
Waukegan, IL60085

INVOICE NO: 18-0051C DATE: Sept 24, 2018

P.O. NUMBER	DATE CHIPDED			
. IO. HOMBER	DATE SHIPPED	SHIPPED VIA	PRICE BASE	TERMS
N000021886	Sept 24, 2018	Cycle Logistics	FOB Elgin	Net 30 days
	P.O. NUMBER N000021886	NOOCCO 4000	NOOCCOACCO	N000021886 Sept 24, 2019 Curls I sept 24

TOTAL	DESCRIPTION		
39		PRICE	EXTENSION
	24" Gavin / 1205619 pallet 72-74 (2 pallets 15pcs, 1 pallet 9pcs)	33.95	1324.05
80	29" Gavin / 1219136 pallet 75-80 (5 pallets 14pcs, 1 pallet 10pcs)	36.85	2948.00
	4 th and final shipment		_5.5.55
	Total 119 Stools		
	Packed on 9 pallets		
8 1			
			\$4272.05
		-	

Make all checks payable to: CHICAGO STOOL & CHAIR INC. If you have any questions concerning this invoice, call at (847)289-9955 THANK YOU FOR YOUR BUSINESS!

ers a Sertos Material	- Claff 15-1 Part 2 s must enter 24-hour emergence	2 Filed 01/23	19 Z.Deşç Do	ocument C	ontinued	Page
arandum	s must enter 24-hour emergenc rgency Response Phone Number	130113		Shipper	9	
0: 100		(Name of Carrier)	157	Carrier		
Consignee		FROM: Shipper	Michan	Stant	211	
Jestination		Street	1230	1 /1	· Char	//
Route:	Zip Code	Origin	FUIN	Zip Ci	odo 1 arx 7:	ST.
No.	Vehicle No.		SCAC	Emei	rgency Response le Number	
Units +HM Special Marks an	d Eventile - Stowing must be so	uiring special or additional care or marked and packaged as to ensu action 2(e) of National Motor Fraic	attention in handling or re safe transportation with	Weight (Subject to	Rate or Class	da just perse upo
4 Allets	n# N218CX	Tely of Tyauchtal (Violo): Fraig	Int Classification, Item 360.	Correction)*	nate of class	CHARGES
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If the shipment moves between two ports by a arrier by water, the law requires that the bill of late whether weight is "carrier's or shipper's weight."	REMIT C.O.D. TO:	C.D.D.	C.D.D. FEE:		DTAL	and Sciences Charles and
Vote-Where the sets is a	ght" ADDRESS	Amt. \$	PREPAID COLLECT \$	P	HARRES &	over a large and
he agreed or declared value of the	recourse on	ection 7 of the conditions, if the consignor, the consignor	his shipment is to be deli shall sign the following:	vered to the consignatement.	nee without FREI	GHT CHARGES
by the shipper to be not exceeding	charges:	shall not make delivery of the	his shipment without pay	yment of freight an	d all other Check A	Appropriate Box:
	awfully filed tariffs in affact as the	(5	ignature of Consignor)		— ☐ Coll	ight prepaid lect
corporation in possession of the property under to stination. It is mutually agreed as to each carrier	rked, consigned, and destined as indic he contract) agrees to carry to its us	e of the issue of this Bill of Leated above which said carrie ual place of delivery at said of	ading, the property descr er (the word carrier being	ribed above in appar understood throug	ent good order, except hout this contract as r	as noted (contents
RECEIVED, subject to the classifications and I decondition of contents of packages unknown), made a condition of contents of packages unknown), made a content of the property under the straight of the property under the straight of the st	shall be subject to all the terms and c nent or (2) in the applicable motor ca et forth in the applicable motor ca	or any portion of said route onditions of the Uniform Don rrier classification or tariff if	e to destination and as to nestic Straight Bill of Lad	e, otherwise to delive each party at any ing set forth (1) in	er to another carrier of time interested in all of Uniform Freight Classifi	n the route to said or any of said prop-
rk with "RO" if appropriate to designate Hazardous Ma naportation Regulations governing the transportation of r	terials as defined in the U.S. Deserting	which governs the transporta	tion of this shipment, and	shipment. Shipper d the said terms an	hereby certifies that he d conditions are hereb	is familiar with all by agreed to by the
optional method for identifying hazardous materials on Bi	azardous materials. The use of this column is of Lading per 172,201(a)(1) (iii) of Tirle.	is pany interpretation of requi	nazardous item list is the res rements as described in 49 (ponsibility of individual o Code of Federal Regulat	Note: Liability	imitation for lose
scribed in section 172.204(a) of the Federal Regulations as a specific exception from the requirement is provided in	are simpler a ceruncation stateme	nt tions 172.201 (Hazardous ly, Proper shipping name, haz	Material Table) and Section Material Table) and Section ardous class, UN identification	sts of the following per	Sec may be appl	this shipment icable. See 49 Code, Sections
IPPER (ALL VOCA	9 21	and subsidiary class(es). CARRIER	(16 1 No	ICT C	14706(c (1)(A	and (B).
This is to certify that the above named to	1-24-18	PER A RI	eli ov	2/1C2;	9-24-18)
marked, and labeled, and are in proper cor applicable regulations of the U.S. Departmen	aterials are properly classified, package dition for transportation according to that of Transportation.	ne tion was made available s	peipt of packages and any rand/or carrier has the U.S tion in the vehicle. Property	equired placards. Car Department of Tran	rier certifies emergency	response informa-
		or edrivaigut gocrimentat	ion in the vehicle. Propert	y described above is	received in good order,	except as noted.
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Northern District of Illinois Claims Register

18-30057 Deforab, LLC

Honorable Judge: Jacqueline P. Cox Chapter: 11

Office: Eastern Division

Last Date to file claims:

Trustee:

Last Date to file (Govt):

Creditor: (27242267) Claim No: 15 Status: CHICAGO STOOL & CHAIR Original Filed Filed by: CR

1230 ST CHARLES STREET Date: 01/23/2019 Entered by: Kimetha Collier

Elgin, IL 60120-0000 Original Entered Modified:

Date: 01/23/2019

Amount claimed: \$84589.05

History:

Details 15-1 01/23/2019 Claim #15 filed by CHICAGO STOOL & CHAIR, Amount claimed: \$84589.05

(Collier, Kimetha)

Description: Remarks:

Claims Register Summary

Case Name: Deforab, LLC Case Number: 18-30057

Chapter: 11

Date Filed: 10/25/2018 **Total Number Of Claims:** 1

Total Amount Claimed*	\$84589.05
Total Amount Allowed*	

^{*}Includes general unsecured claims

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

	Claimed	Allowed
Secured		
Priority		
Administrative		