Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): BANKRUPTCY Betsy EDWARDS AIR WANAGER # 2363 4-09-02 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.

APR 09 2002

and copy of this proof of claim.

Date

SUNSTATE

FIRE EXTINGUISHER SERVICE, INC.

P.O. Box 1257 • Lake Wales, FL 33859-1257

48207

WORK ORDER

Phone (863) 676-2274 Lake Wales Corporate Office

Phone (863) 665-3194 Lakeland

Phone (407) 239-6800 Orlando Fax (863) 678-1236

Phone (863) 385-0330 Sebring

Phone (863) 491-1466 Arcadia

Phone (407) 846-7775 **Kissimmee**

TOLL FREE NUMBER - 1-800-329-2526 SOLD TO 335 DATE 3-7-0 ADDRESS CUSTOMER'S ORDER NO. DELIVERY REQUIRED PHONE# SHIP VIA CHARGE) SEM FEARLY) NEW MONTHLY WEEKLY **AUTHORIZED NAME** (PRINT) QTY DESCRIPTION **PRICE AMOUNT** QTY. DESCRIPTION PRICE **AMOUNT ABC Fire Extinguishers Inspected Location Signs BC Fire Extinguishers Inspected** Wall Brackets Halon Fire Extinguishers Inspected **Vinyl Covers** CO₂/Cartridge Inspected/Recharged 21/2 lb. ABC Fire Extinguisher New 6 Year Maintenance 5 lb. ABC Fire Extinguisher New 12.50 3/600 21/2 lb. ABC Recharged 10 lb. ABC Fire Extiniguisher New 5 lb. ABC Recharged 16.50 42 00 20 lb. ABC Fire Extinguisher New 10 lb. ABC Recharged 51/2 lb. BC Fire Extinguisher New 20 lb. ABC Recharged lb. CO₂ Fire Extinguisher New 5 lb. CO₂ Recharged Low PSI Hydro Test Swappen die 10 lb. CO₂ Recharged High PSI Hydro Test 15 lb. CO₂ Recharged Fire Hose Pressure Test 20 lb. CO₂ Recharged Fire Hose Rerack 2 ∑ lb. Halon Recharged 2/C 25# Fire Hose Inspection 35 **Head Safety Seals** ೯೦ 50 Identification Labels 10 **Pull Pins** ८५७ 00 1-2-3 Operation Labels O Ring Assembly OSHA/Haz-Mat Decals Hose Band & Clamp Fire Extinguisher Training Class Hose & Horn Dry CO2 C **Bench Work Charge** Nozzle Fusible Links Gauge 8 25 **Powder Rivit** CO₂ Hose Continuity Test Siphon Tube Visual Eddy Top Handle DOT/F.M.P.R. 95 **Bottom Handle** SERVICE CHARGE 50 Spring Assembly SUB-TOTAL D **ዮ**ዮ Valve Stem Assembly Dry 2 CO, [] 35 80 60% TAX NO. OR TAX 5 **Extinguisher Disposal Fee TOTAL CHARGES** 013167 012424* 012446* 60 12445 60 \$12 419X 012 386 SIGNATURE DATE THANK YOU! I HEREBY ACKNOWLEDGE THE SATIFACTORY COMPLETION OF THE ABOVE DESCRIBED WORK AND I AM AUTHORIZED TO APPROVE IN THE EVENT IT BECOMES NECESSARY TO PLACE THE INDEBTEDNESS CREATED BY THIS INVOICE FOR COLLECTION, PURCHASER AGREES TO PAY ALL REASONABLE COSTS FOR COLLECTION INCLUDING ATTORNEY'S FEES. A SERVICE CHARGE OF 14/44 MONTHLY, 18/4 ANNUALLY WILL BE ADDED ON UNPAID BALANCE OVER 30 DAYS.

NOTICE: AFTER EVERY NET 30 DAYS PAST DUE, A \$10.00 LATE FEE IS CHARGED FOR MONTHLY PROCESSING.

New Product and Service Decals Remain Sole Property of Sunstate Fire Extinguisher Service, Inc. until Payment in full and may be Removed for Non-Payment at Any Time.

P.O. Box 1257

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

Invoice Number Sale Date Due Date

43297 3/15/01

4/14/01

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

 Description
 Qty
 Price
 Net
 Tax
 Total

 YEARLY INSPECTION
 1
 \$859.20
 \$51.55
 \$910.75

WORK ORDER 48207 DUNS NO 00-0101-1774
 TOTALS
 \$859.20
 \$51.55
 \$910.75

 Prior Payments On This Invoice
 \$701.93

 Total Due For This Invoice
 \$208.82

Please retu	rn this portion of your invoice wi	th your payment. Thank you!		
	K-MART #7335	ui your payment. Thank you!	Invoice Number	43297
Customer:	K-WAK I #/333		Bill Payer ID:	3347
Acct. Bal.	\$258.82 Amount Remitted		Date Remitted	
Payment Method	Check Check Number			
•	(Charg) (A)	STATE OF THE STATE	Remot characters to	

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

Invoice Number 44641 Sale Date 5/10/01 Due Date 6/9/01

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description	Qty	Price	Net	Tax	Total
Finance/Late Charges. Late fee assesed on invoice # 43297 due on 4	1 /14/01 with an ou	\$10.00 tstanding baland	\$10.00 be of \$208.82	\$0.00	\$10.00
Late Charges are computed at an Annual Rate or subject to a minimum charge of \$10.00	f 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00
		Your Ac Bal	ance on <i>5/10/</i>	701	\$218.82
	Return Stu	b Below			
Please return this portion of your invoice with Customer: K-MART #7335	your payment.	Thank you!		oice Number ill Payer ID:	
Acct. Bal. \$218.82 Amount Remitted			Da	ite Remitted	
Method Of Check Check Number Payment					
Card Number		·		Exp Da	ite
Charge* Name On Card					
Signature					

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

Invoice Number 45498
Sale Date 6/11/01
Due Date 7/11/01

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description	ı		Qty	Price	Net	Tax	Total	
Finance/Lat Late fee Late fee	assesed on in	voice # 43297 du voice # 44641 du	1 e on 4/14/01 with an ou e on 6/9/01 with an outs	\$10.00 itstanding baland standing balance	\$10.00 ce of \$208.82 e of \$10.00	\$0.00	\$10.00	
Late Charge subject to a	es are compu minimum cha	ted at an Annual F arge of \$10.00	Rate of 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00	
				Your Ac Bal	ance on 6/11/	01	\$228.82	
			· Return Stu	b Below				. .
Please retu	rn this portic	n of your invoice	with your payment.	Thank you!				
	K-MART #73		, , , ,			ice Number ill Payer ID:		3498 347
Acct. Bal.	\$228.82	Amount Remitte	d III.		Da	te Remitted		\Box
Method Of Payment	Check	Check Number						
		Card Number				Exp Da	ite	7
	Charge*	Name On Card				Ī		_
		Signature						

P.O. Box 1257

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

Invoice Number 46223 Sale Date 7/10/01 Due Date 8/9/01

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

	Qty	Price	Net	Tax	Total	
Finance/Late Charges. Late fee assesed on invoice # 43297 due on 4/14/ Late fee assesed on invoice # 44641 due on 6/9/0	1 /01 with an outs	\$10.00 standing baland tanding balance	\$10.00 ce of \$208.82 e of \$10.00	\$0.00	\$10.00	
Late Charges are computed at an Annual Rate of 18 subject to a minimum charge of \$10.00	.00% and	TOTALS	\$10.00	\$0.00	\$10.00	
		Your Ac Ba	lance on 7/10/	01	\$238.82	
Please return this portion of your invoice with yo	Return Stut ur payment. '		Invo	ice Number		46223
Please return this portion of your invoice with yo			_	ice Number ill Payer ID:	,	46223 3347
Please return this portion of your invoice with your continuous with you			В			

P.O. Box 1257

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax: 1(863)678-1236

Invoice Number 47053 Sale Date 8/10/01 Due Date 9/9/01

47053

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description	Qty .	Price	Net	Tax	Total
Finance/Late Charges. Late fee assesed on invoice # 43297 due on 4/1 Late fee assesed on invoice # 44641 due on 6/9 Late fee assesed on invoice # 45498 due on 7/1 Late fee assesed on invoice # 46223 due on 8/9	/01 with an outs 1/01 with an out	tanding balance standing balance	e of \$10.00 ce of \$10.00	\$0.00	\$10.00
Late Charges are computed at an Annual Rate of subject to a minimum charge of \$10.00	18.00% and	TOTALS	\$10.00	\$0.00	\$10.00
		Your Ac Bal	ance on 8/10/0	1	\$248.82
	· · · · Return Stut	o Below			
Please return this portion of your invoice with y Customer: K-MART #7335	our payment. '	Thank you!		ce Number il Payer ID:	47053 3347
Acct. Bal. \$248.82 Amount Remitted Payment Check Check Number Method			Dat	e Remitted	
Card Number Charge* Name On Card				Exp Dat	e
Signature	<u> </u>			****	-

*Please Note: If paying by charge card, we can only accept payment by: American Express Discover Mastercard Visa.

P.O. Box 1257

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

Invoice Number Sale Date Due Date

47907 9/10/01 **10/10/01**

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description	Qty	Price	Net	Tax	Total
Finance/Late Charges. Late fee assesed on invoice # 43297 due on 4/14. Late fee assesed on invoice # 44641 due on 6/9/0 Late fee assesed on invoice # 45498 due on 7/11. Late fee assesed on invoice # 46223 due on 8/9/0 Late fee assesed on invoice # 47053 due on 9/9/0)1 with an outs /01 with an out)1 with an outs	tanding balance standing balance tanding balance	e of \$10.00 ce of \$10.00 c of \$10.00	\$0.00	\$10.00
Late Charges are computed at an Annual Rate of 18 subject to a minimum charge of \$10.00	3.00% and	TOTALS	\$10.00	\$0.00	\$10.00
		Your Ac Bala	ance on 9/10/0	01	\$258.82
Please return this portion of your invoice with yo					
Customer: K-MART #7335	• •	,		ce Number II Payer ID:	47907 3347
Acct. Bal. \$258.82 Amount Remitted Payment Check Check Number Wethod			Dat	e Remitted	
Card Number Card Number Charge* Name On Card				Exp Date	e
Signature					

P.O. Box 1257

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

invoice Number Sale Date Due Date

48855 10/10/01 **11/9/01**

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

	Qty	Price	Net	Tax	Total	
Finance/Late Charges. Late fee assesed on invoice # 43297 due Late fee assesed on invoice # 44641 due Late fee assesed on invoice # 45498 due Late fee assesed on invoice # 46223 due Late fee assesed on invoice # 47053 due	e on 6/9/01 with an outs e on 7/11/01 with an outs e on 8/9/01 with an outs	standing balance tstanding balance standing balance	e of \$10.00 ce of \$10.00 e of \$10.00	\$0.00	\$10.00	
Late Charges are computed at an Annual R subject to a minimum charge of \$10.00	ate of 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00	
		Your Ac Bal	ance on 10/10)/01	\$268.82	
Please return this portion of your invoice						
Please return this portion of your invoice				ice Number ill Payer ID:		48855 3347
Please return this portion of your invoice Customer:K-MART #7335	with your payment.		В			
Please return this portion of your invoice Customer:K-MART #7335	with your payment.		В	ill Payer ID:		
Please return this portion of your invoice Customer: K-MART #7335 Acct. Bal. \$268.82 Amount Remitter Payment Check Check Number	with your payment.		В	ill Payer ID:		

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

 Invoice Number
 49639

 Sale Date
 11/9/01

 Due Date
 12/9/01

Tax

Total

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description

1	\$10.00	\$10.00	\$0.00	\$10.00	
due on 4/14/01 with an o	outstanding balan	ice of \$208.82			
l Rate of 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00	
	Your Ac Bal	ance on 11/9	/01	\$278.82	
		÷			
Return Stu	ıb Below				
ice with your payment.	Thank you!	Invo	oice Number	4	19639
		8	ill Payer ID:		3347
tted		Da	ite Remitted		
r					
г			Exp Da	te	
d [· · · · · · · · · · · · · · · · · · ·	
			· = -··		
	due on 4/14/01 with an of all Rate of 18.00% and Return Studice with your payment. Itted	A response to the control of the con	due on 4/14/01 with an outstanding balance of \$208.82 I Rate of 18.00% and TOTALS \$10.00 Your Ac Balance on 11/9	Rate of 18.00% and TOTALS \$10.00 \$0.00 Your Ac Balance on 11/9/01 Return Stub Below Ice with your payment. Thank you! Invoice Number Bill Payer ID: Itted Date Remitted or Exp Date Exp Date Invoice Stub Below Invoice Stub Below Invoice Stub Below Invoice Stub Below Invoice Stub Bel	due on 4/14/01 with an outstanding balance of \$208.82 I Rate of 18.00% and TOTALS \$10.00 \$0.00 \$10.00 Your Ac Balance on 11/9/01 \$278.82

Price

Net

Qty

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax: 1(863)678-1236

 Invoice Number
 50406

 Sale Date
 12/10/01

 Due Date
 1/9/02

Tax

Total

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description

	ite Charges.	1	\$10.00	\$10.00	\$0.00	\$ 10.00
Late fee	e assessed on invoice # 43297 d	ue on 4/14/01 with an o	utstanding balan	ce of \$208.82		
	ges are computed at an Annual a minimum charge of \$10.00	Rate of 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00
			Your Ac Bala	ance on 12/1	0/01	\$288.82
		Return Stu	b Below			
Please ret	urn this portion of your invoic	e with your payment.	Thank you!	Inve	oice Number	50406
Customer	: K-MART #7335				Bill Payer ID:	3347
Acct. Bal.	\$288.82 Amount Remitt	ed .		Da	ite Remitted	
Payment Method	Check Check Number					
	Card Number				Exp Dat	te
	Charge* Name On Card					

Qty

Price

Net

*Please Note: If paying by charge card, we can only accept payment by: American Express Discover Mastercard Visa. Please remit to: SunState Fire Extinguisher Service, Inc. P.O. Box 1257 Lake Wales, FL 33859-1257

Signature

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

 Invoice Number
 51203

 Sale Date
 1/10/02

 Due Date
 2/9/02

Tax

Net

Total

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description

Finance/Late Charges. Late fee assessed on invoice # 43297 du	1 e on 4/14/01 with an ou	\$10.00 tstanding balan	\$10.00 ce of \$208.82	\$0.00	\$10.00
Late Charges are computed at an Annual R subject to a minimum charge of \$10.00	ate of 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00
		Your Ac Bala	ance on 1/10/0)2	\$298.82
				•	
	Return Stub	Below			
Please return this portion of your invoice Customer: K-MART #7335	with your payment. 1	Thank you!		ce Number Il Payer ID:	51203 3347
Acct. Bal. \$298.82 Amount Remitte	d TTT		Dat	e Remitted	
Payment Check Check Number Method					
Charact Name On Cond				Exp Date	
Charge*∐ Name On Card │ Signature					

Qty

Price

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

 Invoice Number
 52020

 Sale Date
 2/11/02

 Due Date
 3/13/02

Tax

Total

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description

Finance/Late Charges. Late fee assessed on invoice # 4329	1 97 due on 4/14/01 with an oւ	\$10.00 utstanding balan	\$10.00 ce of \$208.82	\$0.00	\$10.00
Late Charges are computed at an Ann subject to a minimum charge of \$10.00	ual Rate of 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00
		Your Ac Bala	ance on 2/11/	02	\$308.82
	Return Stu	b Below			
Please return this portion of your in	voice with your payment.	Thank you!	Invo	ice Number	52020
Customer: K-MART #7335				ill Payer ID:	3347
Acct. Bal. \$308.82 Amount Re	mitted		Da	ite Remitted	
Payment Check Check Num Method	nber				
Card Num	iber			Exp Da	te
Charge* Name On C	ard				
Signature					

Qty

Price

Net

Lake Wales, FL 33859-1257

Tel:1(863)676-2274 Fax:1(863)678-1236

Invoice Number Sale Date Due Date **52826** 3/11/02 **4/10/02**

K-MART #7335 10301 SE 441 BELLEVIEW, FL 34420-421

Description	Qty	Price	Net	Tax	Total
Finance/Late Charges. Late fee assessed on invoice # 43297 du	1 ie on 4/14/01 with an o	\$10.00 utstanding balan	\$10.00 ice of \$208.82	\$0.00	\$10.00
Late Charges are computed at an Annual R subject to a minimum charge of \$10.00	tate of 18.00% and	TOTALS	\$10.00	\$0.00	\$10.00
		Your Ac Bai	ance on 3/11/	/02	\$318.82
	Return Stu	ıb Below			
Please return this portion of your invoice Customer: K-MART #7335	e with your payment.	Thank you!		oice Number Bill Payer ID:	52826 3347
Acct. Bal. \$318.82 Amount Remitte	ed		Da	ate Remitted	
Payment Check Check Number Method					
Card Number				Exp Da	te
Charge*					
Signature					

*Please Note: If paying by charge card, we can only accept payment by: American Express Discover Mastercard Visa.

Please remit to : SunState Fire Extinguisher Service, Inc. P.O. Box 1257 Lake Wales, FL 33859-1257

State License #'s 326228000194 063596000385

SUNSTATE

FIRE EXTINGUISHER SERVICE, INC.

P.O. Box 1257 • Lake Wales, FL 33859-1257

Phone (863) 676-2274 Lake Wales Corporate Office

Phone (863) 665-3194 Lakeland

Phone (407) 239-6800 Orlando Fax (863) 678-1236

Phone (863) 365-0330 Sebring

Phone (863) 491-1466 Arcadia

Phone (407) 846-7775 Kissimmee

29412

WORK ORDER

TOLL FREE NUMBER - 1-800-329-2526

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											- 1-600-		
D TO	1/ 00-07		4 7	096						DATE / _/	7-02		
	K-MART		# 3	7 85					Dan's #	ORDER NO.	n-018	0177	4
DRESS 4717 S. Fl. AUE							DELIVERY						
LAKELANO, FI								SHIP VIA					
NE#	1.48-945	<u> </u>	_							-			
squ	BY CASH	CHARGE	SEM	YEARL	Y NE	W N	ONTHLY	WEEKLY	AUTHORIZED NAME (PRINT)	ICK YEA	RCY		
<u> </u>	//		_V						DESCRIPT	ION	PRICE	AMOU	NT
Y.	DESCRIPTION			F	RICE	AMOUNT		QTY.	Automatic Fire Suppression Inspection Angust			6200	
	ABC Fire Extinguis							1-/	ANSU RIDA	2 36A		W.	
	BC Fire Extinguish	ers Inspec	ted					<u> </u>	Automatic Fire Suppress				
	ABC Recharged		lb.				\dashv	-	Automatic i ne oupprose	1017 1110p 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1		
	ABC Recharged		lb.					10	Nozzle Caps		7.50	67	5
	BC Recharged		lb.			ļ		17	Nozzie Seals				
	CO ² Recharged		lb.					+	Gas Valve Test				
							+-	+ ,	Micro Switch Test		15.50	v	JC
	Six Year Maintena	ince						10	Clean Nozzles		5.00	45	2
	ABC New Extingu		lb.					+7-	Nozzies New				
	ABC New Extingu		lb.						Hydro Test				
	BC New Extinguis		lb.			 			Refill/Six Year				
	Head Safety Seal	<u> </u>				┼			Refill/Six Year				
	Pull. Pins					 		1	Fire Inspector's Test				_
	O-Rings					╁			Flush Piping				_
	Gauges					 		15	Fusible Links		5,00	25	٥
	Valve Stem Asset					-		1	Cartridges				_
	CO ² Hose Contin	uity 1 est				+			Cartridges			<u></u>	
	Location Signs					+-		+	Non-Compliance Inspec	ction			_ _
	Fan Warning Sig	ns				+			Re-Inspection			<u> </u>	\bot
	Wall Brackets				ļ	+-			Dry Test For Inspector				
	Mount Fire Extin					+		-				<u> </u>	┸
	Micro Switch New					-		1	Information Decals				\bot
	Micro Switch Ne	W DPD I				-	-	_	Documentation Fee				
	Bulbs					+			DOT/F.M.P.R.			1:	2 5
	Batteries					+-						1	
	Labor			 	+			S					
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					1				Ţ	OTAL CHARGES	j	424	10
Οl	570		SERIA	NUME	BERS	3 47 47	98 17.5. F	D, FL 3	TION O	THE ABOVE DE RIZED TO APPROVE SIGNATURE	THE SATIFA SCRIBED V PAYMENT	CTORY C WORK AN	OMP
											K YOU		
	+			1			!		1 1	111/4/11	W IAA	ate Fire E	

Service, Inc. until Payment in full and may be Removed for Non-Payment at Any Time

Lake Wales, FL 33859-1257

Description

Tel: 1(863)676-2274 Fax: 1(863)678-1236

Invoice Number Sale Date **Due Date**

Net

\$10.00

Price

\$10.00

Qty

1

52827 3/11/02 4/10/02

Total

\$10.00

Tax

\$0.00

K-MART #3985 **4717 SOUTH FLORIDA AVENUE** LAKELAND, FL 33813

Finance/Late Ch	narges.	1	\$10.00	\$10.00	Ф 0.00	Ψ10.00
Late fee asse	essed on invoice # 51467 due on 2	2/17/02 with an ou	utstanding balan	ce of \$224.72		
Late Charges a	re computed at an Annual Rate of	18.00% and	TOTALS	\$10.00	\$0.00	\$10.00
subject to a mir	nimum charge of \$10.00		Your Ac Balance on 3/11/02			\$234.72
		Return Stu	ub Below			
Please return	this portion of your invoice with	your payment.	Thank you!	Inv	oice Number	
Customer: K-	-MART #3985			!	Bill Payer ID:	339
Acct. Bal.	\$234.72 Amount Remitted			Đ	ate Remitted	
Payment Cl Method	heck Check Number					
Mediod	Card Number				Exp Da	ate
C	harge* Name On Card					

*Please Note: If paying by charge card, we can only accept payment by: American Express Discover Mastercard Visa. Please remit to : SunState Fire Extinguisher Service, Inc. P.O. Box 1257 Lake Wales, FL 33859-1257

Signature