B 10 (Official Form 10) (12/11)

UNITED STATES BANKRUPTCY COURT _____ **DISTRICT OF** Delaware

PROOF OF CLAIM

Name of Debtor: School Specialty

Case Number: 13-10125

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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):
American 3B Scientific

COURT USE ONLY

Name and address where notices should be sent:
American 3B Scientific
2189 Flintstone Dr, Ste O
Tucker, GA 30084
Telephone number: 678-405-5805 email: celeste.tatum@a3bs.com

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

Court Claim Number:_____ (*If known*)

Filed on:_____

Name and address where payment should be sent (if different from above):

Telephone number: email:

❒ 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.

1. Amount of Claim as of Date Case Filed: $ 21,787.09

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

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: 0024

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.

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

Value of Property: $_____

Annual Interest Rate_____% ❒ Fixed or ❒ Variable
(when case was filed)

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

Basis for perfection: _____

Amount of Secured Claim: $_____

Amount Unsecured: $_____

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 $11,725*) 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 $2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. §507 (a)(7).

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

❒ Other – Specify applicable paragraph of 11 U.S.C. §507 (a)(__).

$_____

**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 t

13101251302080000000010

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, and security agreements. 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. *(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:

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8. Signature: (See instruction #8)

Check the appropriate box.

☑ I am the creditor. ☐ I am the creditor's authorized agent. (Attach copy of power of attorney, if any.) ☐ 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: Celeste Tatum
Title: Finance Manager
Company: American 3B Scientific
Address and telephone number (if different from notice address above):

Celeste Tatum (Signature) 2-1-13 (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.

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. 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, attach a complete copy of any power of attorney, and 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.

Posting Date	Document Type	Document No.	Customer No.	Description	Amount	Remaining Amount
12/31/2009	Credit Memo	SC9.1222	C40024A	Credit Memo SC9.1222	-1,817.64	-101.88
2/25/2010	Payment	ACH IN	C40024A	797107-1 & 9292857 vendor returns	-4,003.33	-97.13
3/25/2010	Payment	ACH IN	C40024A	SCHOOL SPECIALTY	-139.81	-139.81
10/13/2010	Credit Memo	SC10.0772	C40024A	Credit Memo SC10.0772	-455.4	-455.4
12/28/2010	Credit Memo	SC10.1229	C40024A	Credit Memo SC10.1229	-66	-66
7/31/2012	Credit Memo	SC12.0610	C40024A	Credit Memo SC12.0610	-581.46	-581.46
8/29/2012	Credit Memo	SC12.0738	C40024A	Credit Memo SC12.0738	-120	-120
12/14/2009	Invoice	SI9.17243	C40024A	Order SO9.15711	404.76	404.76
12/18/2009	Invoice	SI9.17901	C40024A	Order SO9.16171	1,171.20	1,171.20
1/15/2010	Invoice	SI10.00450	C40024A	Order SOO10.537	192	192
1/15/2010	Invoice	SI10.00451	C40024A	Order SOO10.538	314.4	314.4
1/25/2010	Invoice	SI10.00746	C40024A	Order SO10.00180	460.4	460.4
2/17/2010	Invoice	SI10.01818	C40024A	Order SO10.01114	786.25	786.25
4/29/2010	Payment	ACH IN	C40024A	claim missing product SI10.03902	55.45	55.45
4/6/2011	Invoice	SI11.04762	C40024A	Order SO11.04204	377.03	377.03
5/5/2011	Invoice	SI11.06385	C40024A	Invoice SI11.06385	10.59	10.59
9/9/2011	Payment	CC PAY	C40024A	SI11.04723 DM	10.13	10.13
8/30/2012	Invoice	SI12.14965	C40024A	Order SO12.11919	467.28	233.64
9/25/2012	Invoice	SI12.16910	C40024A	Order SO12.14709	233.64	233.64
11/12/2012	Invoice	SI12.20543	C40024A	Order SO12.13507	387.42	387.42
11/12/2012	Invoice	SI12.20576	C40024A	Order SO12.17498	514.14	514.14
11/13/2012	Invoice	SI12.20698	C40024A	Order SO12.17499	4,684.10	4,684.10
11/15/2012	Invoice	SI12.20789	C40024A	Order SO12.17734	1,162.26	1,162.26
11/15/2012	Invoice	SI12.20798	C40024A	Order SO12.17733	369.6	369.6
11/15/2012	Invoice	SI12.20807	C40024A	Order SO12.17731	271.8	271.8
11/19/2012	Invoice	SI12.20893	C40024A	Order SO12.17884	172.8	172.8
11/21/2012	Invoice	SI12.21082	C40024A	Order SO12.17992	581.46	581.46
11/21/2012	Invoice	SI12.21089	C40024A	Order SO12.18031	271.2	271.2
11/26/2012	Invoice	SI12.21281	C40024A	Order SO12.18184	581.46	581.46
11/29/2012	Invoice	SI12.21689	C40024A	Order SO12.18375	190.2	190.2
11/30/2012	Invoice	SI12.21718	C40024A	Order SO12.18482	769.56	769.56
11/30/2012	Invoice	SI12.21788	C40024A	Order SO12.14068	147	147
12/5/2012	Invoice	SI12.22242	C40024A	Order SO12.18736	581.46	581.46
12/6/2012	Invoice	SI12.22356	C40024A	Order SO12.19011	543.6	543.6
12/6/2012	Invoice	SI12.23670	C40024A	Order SO12.18879	467.4	467.4
12/10/2012	Invoice	SI12.22996	C40024A	Order SO12.19305	145.86	145.86
12/11/2012	Invoice	SI12.23137	C40024A	Order SO12.19304	387.42	387.42
12/13/2012	Invoice	SI12.23453	C40024A	Order SO12.19564	249	249
12/13/2012	Invoice	SI12.23454	C40024A	Order SO12.19563	581.46	581.46
12/14/2012	Invoice	SI12.23581	C40024A	Order SO12.17499	659.34	659.34
12/14/2012	Invoice	SI12.23617	C40024A	Order SO12.18370	118.14	118.14
12/18/2012	Invoice	SI12.24042	C40024A	Order SO12.20141	785.4	785.4
12/21/2012	Invoice	SI12.24495	C40024A	Order SO12.18375	99.6	99.6
12/21/2012	Invoice	SI12.24603	C40024A	Order SO12.18879	259.2	259.2
1/10/2013	Invoice	SI13.00301	C40024A	Order SO13.00234	622.8	622.8
1/11/2013	Invoice	SI13.00339	C40024A	Order SO13.00365	871.2	871.2
1/11/2013	Invoice	SI13.00341	C40024A	Order SO12.20138	22.8	22.8
1/11/2013	Invoice	SI13.00359	C40024A	Order SO13.00359	152.46	152.46
1/14/2013	Invoice	SI13.00452	C40024A	Order SO13.00446	415.8	415.8
1/15/2013	Invoice	SI13.00541	C40024A	Order SO13.00565	252	252
1/21/2013	Invoice	SI13.00855	C40024A	Order SO13.00696	586.74	586.74
1/24/2013	Invoice	SI13.01034	C40024A	Order SO13.00913	1,194.60	1,194.60
					16,398.77	21787.09