The Debtor has listed your claim on Schedule F as a General Unsecured claim in the amount of $2,159.75. If you agree with this characterization and amount, you do not need to complete and return this form. If you disagree, please complete and return this form accordingly.

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

DEADLINE FOR FILING CLAIMS: 5:00 P.M. (PACIFIC TIME), APRIL 1, 2013

UNITED STATES BANKRUPTCY COURT DISTRICT OF DELAWARE

PROOF OF CLAIM

Indicate Debtor against which you assert a claim by checking the appropriate box below. **(Check only one Debtor per claim form.)**

- [X] School Specialty, Inc. (Case No. 13-10125)
- [ ] Delta Education, LLC (Case No. 13-10124)
- [ ] Bird-in-Hand Woodworks, Inc. (Case No. 13-10126)
- [ ] Califone International, Inc. (Case No. 13-10127)
- [ ] Childcraft Education Corp, Inc. (Case No. 13-10128)
- [ ] Classroomdirect.com, LLC (Case No. 13-10129)
- [ ] Frey Scientific, Inc. (Case No. 13-10130)
- [ ] Premier Agendas, Inc. (Case No. 13-10131)
- [ ] Sax Arts & Crafts, Inc. (Case No. 13-10132)
- [ ] Sportime, LLC (Case No. 13-10133)

NOTE: *This form should not be used to make a claim for an administrative expense* ***(other than a claim asserted under 11 U.S.C. § 503(b)(9))*** *arising after the commencement of the case. A "request" for payment of an administrative expense* ***(other than a claim asserted under 11 U.S.C. § 503(b)(9))*** *may be filed pursuant to 11 U.S.C § 503.*

Name of Creditor (the person or other entity to whom the debtor owes money or property):

ABLE GENERATION

Name and address where notices should be sent: NameID: 11309865

ABLE GENERATION
8 MILLS RD
WHITEFILED, ME 04353

Telephone number: (207) 549-4757 email: INFORMATION@ABLEGENERATION.COM

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

Telephone number: email:

- [ ] Check this box if this claim amends a previously filed claim.

Court Claim Number: _____
(If known)

Filed on: _____

- [ ] 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: $ 2,159.75
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: ____ ____ ____ ____

3a. Debtor may have scheduled account as: 2567
(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 [ ] 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:** $_____

6. Claim Pursuant to 11 U.S.C. § 503(b)(9): Indicate the amount of your claim arising from the value of any goods received by the Debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

$_____ (See instruction #6)

7. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #7)

8. 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 8, 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:

9. Signature: (See instruction #9)
Check the appropriate box.

- [X] 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: PETER FROEHLICH
Title: OWNER
Company: ABLE GENERATION
Address and telephone number (if different from notice address above):

(Signature) 03/13/13 (Date)

Telephone number: Email:

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).
- [ ] 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)(__).

Amount entitled to priority:

$_____

* *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*

COURT USE ONLY

RECEIVED
MAR 18 2013
KURTZMAN CARSON CONSULTANTS

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.

1310125130227154723000038

School Specialty

Featuring Proprietary Products:

Sax® Childcraft® abc® Sportime®
Classroom Direct® Education Essentials®

SCHOOL SPECIALTY
PO BOX 1579
APPLETON WI 54912-1579

Corporate FID# 39-0971239

PO Number	Rev #	DC	Date	Page #
2427132	0	111	18-SEP-12	1 of 1

THE ABOVE PURCHASE ORDER AND REVISION # MUST APPEAR ON ALL INVOICES, PACKAGES, PACKING SLIPS, SHIPPING PAPERS AND CORRESPONDENCE.

Ship To:C W RICHARDSON CDC
Attention: Kern Co Supt of Schools , *
Your PO#: 302909
1515 FELIZ DR
BAKERSFIELD CA 93307-3521
United States

Supplier: ABLE GENERATION
8 MILLS RD
WHITEFILED ME 04353
United States

Bill To:SCHOOL SPECIALTY INC
PO BOX 1017
APPLETON WI 54912-1017
United States

Buyer: FLOW CELL DIRECTS	FOB:	Acct Number:
Phone: e-mail please	Freight Terms: FOB	**Delivery Date(s): SEE DATE(S) BELOW**
Fax:	Via:	Our SO Number: 22242442
Email: FLOW_CELL_DIRECTS@schoolspecialty.com		

Quantity	Our Item / Your Item	UOM / Item Description		Unit Price	Extended	Line No
	Mark for: Kern Co Supt of Schools , *					
1	012388 201AR	EACH CHAIR WOOD ABLE GENERATION #A REGULAR	**Do Not Deliver Before 18-SEP-12**	$273.0000	$273.00	1
1	011939 2019	EACH TRAY FOR REGULAR PLAY CHAIR SIZE 0	**Do Not Deliver Before 18-SEP-12**	$126.0000	$126.00	2

Iv# 962
Shipped 9/24/12

Routing Instructions:
Ship via School Specialty 2012/2013 Routing Guide.

To obtain your copy of the 2012/2013 Routing Guide, please call 855-223-8017 or contact SSIRouting@CHRobinson.com.

Corporate transportation must approve routing deviations. Bill of Lading copy MUST accompany invoice. Bills payable upon order completion; terms discounted from date of invoice. Our PO number MUST appear on Bill of Lading with instructions for carrier to place on Freight Bill and mark as such. Failure to do so will incur a chargeback of $50.

Terms and Conditions:
Standard Terms and Conditions of Purchase are an integral part of this Purchase Order and are herein incorporated by this reference. All prices and amounts on this order are expressed in USD.
Please formally acknowledge receipt of Purchase Order and estimated delivery date(s); take note of the Do Not Deliver Before date(s) in the body of this Purchase Order.

Total $ 399.00 **USD**

Invoice

able
generation
8 Mills Rd.
Whitefield, ME 04353
Ph.: 800.875.2457
Fax: 207.549.7942

Date	Invoice #
9/24/2012	962

Bill To	Ship To
Abilitations Accounts Payable P.O. Box 1017 Appleton, Wisconsin 54912-1017	C.W. Richardson CDC Attn: Kern Co. Supt. of Schools 1515 Feliz Dr. Bakersfield, CA 93307-3521

P.O. No.	Terms	Shipped	Via	F.O.B.	SUPPLIER #	CUST. P.O. #	SALES ORD. #
2427132	Net 30	9/24/2012	UPS	Whitefield ME	2567	302909	22242442

Quantity	Item Code	Description	Price Each	Amount
1	201A-R	Module A Play Chair-Regular	273.00	273.00
1	2019	Tray (Reg. only)	126.00	126.00

Total $399.00

School Specialty

Featuring Proprietary Products:

Sax® Childcraft® abc® Sportime®
Classroom Direct® Education Essentials®

SCHOOL SPECIALTY
PO BOX 1579
APPLETON WI 54912-1579

Corporate FID# 39-0971239

PO Number	Rev #	DC	Date	Page #
2423063	0	111	17-SEP-12	1 of 1

THE ABOVE PURCHASE ORDER AND REVISION # MUST APPEAR ON ALL INVOICES, PACKAGES, PACKING SLIPS, SHIPPING PAPERS AND CORRESPONDENCE.

Ship To: SOUTHEAST LEXINGTON CDC HD STRT
Attention: JANIAH, *
Your PO#: JANIAH
3712 ARBOR CT
LEXINGTON KY 40517-3321
United States

Supplier: ABLE GENERATION
8 MILLS RD
WHITEFILED ME 04353
United States

Bill To: SCHOOL SPECIALTY INC
PO BOX 1017
APPLETON WI 54912-1017
United States

Buyer: FLOW CELL DIRECTS	FOB:	Acct Number:
Phone: e-mail please	Freight Terms: FOB	**Delivery Date(s): SEE DATE(S) BELOW**
Fax:	Via:	Our SO Number: 22229945
Email: FLOW_CELL_DIRECTS@schoolspecialty.com		

Quantity	Our Item / Your Item	UOM / Item Description		Unit Price	Extended	Line No

REF CONTACT NAME JANIAH
-REF CONTACT PH 859-245-5195
-REF CUST PO

Mark for: JANIAH, *

1	012388 201AR	EACH	**Do Not Deliver Before 17-SEP-12** CHAIR WOOD ABLE GENERATION #A REGULAR	$273.0000	$273.00	1

IV# 9638
Shipd 9/24/12

COPY

Routing Instructions:
Ship via School Specialty 2012/2013 Routing Guide.

To obtain your copy of the 2012/2013 Routing Guide, please call 855-223-8017 or contact SSIRouting@CHRobinson.com.

Corporate transportation must approve routing deviations. Bill of Lading copy MUST accompany invoice. Bills payable upon order completion; terms discounted from date of invoice. Our PO number MUST appear on Bill of Lading with instructions for carrier to place on Freight Bill and mark as such. Failure to do so will incur a chargeback of $50.

Terms and Conditions:
Standard Terms and Conditions of Purchase are an integral part of this Purchase Order and are herein incorporated by this reference. All prices and amounts on this order are expressed in USD.
Please formally acknowledge receipt of Purchase Order and estimated delivery date(s); take note of the Do Not Deliver Before date(s) in the body of this Purchase Order.

Total **$ 273.00** **USD**

Invoice

able
generation

8 Mills Rd.
Whitefield, ME 04353
Ph.: 800.875.2457
Fax: 207.549.7942

Date	Invoice #
9/24/2012	963

Bill To	Ship To
Abilitations Accounts Payable P.O. Box 1017 Appleton, Wisconsin 54912-1017	Southeast Lexington CDC HD Start Attn: Janiah 3712 Arbor Ct. Lexington, KY 40517-3321

P.O. No.	Terms	Shipped	Via	F.O.B.	SUPPLIER #	CUST. P.O. #	SALES ORD. #
2423063	Net 30	9/24/2012	UPS	Whitefield ME	2567	Janiah	22229945

Quantity	Item Code	Description	Price Each	Amount
1	201A-R	Module A Play Chair-Regular	273.00	273.00

COPY

Total $273.00

School Specialty

Featuring Proprietary Products:

Sax® Childcraft® abc® Sportime®
Classroom Direct® Education Essentials®

SCHOOL SPECIALTY
PO BOX 1579
APPLETON WI 54912-1579

Corporate FID# 39-0971239

PO Number	Rev #	DC	Date	Page #
2471888	0	111	25-OCT-12	1 of 1

THE ABOVE PURCHASE ORDER AND REVISION # MUST APPEAR ON ALL INVOICES, PACKAGES, PACKING SLIPS, SHIPPING PAPERS AND CORRESPONDENCE.

Ship To: WAIMANALO ELEM INTERM SCHOOL
Attention: Mrs. Meg Takahama, *
Your PO#: D003017908052431
41-1330 KALANIANAOLE HWY
ROOM U2
WAIMANALO HI 96795-1214
United States

Supplier: ABLE GENERATION
8 MILLS RD
WHITEFILED ME 04353
United States

Bill To: SCHOOL SPECIALTY INC
PO BOX 1017
APPLETON WI 54912-1017
United States

Buyer: FLOW CELL DIRECTS	FOB:	Acct Number:
Phone: e-mail please	Freight Terms: FOB	**Delivery Date(s): SEE DATE(S) BELOW**
Fax:	Via:	Our SO Number: 22358802
Email: FLOW_CELL_DIRECTS@schoolspecialty.com		

Quantity	Our Item / Your Item	UOM	Item Description	Unit Price	Extended	Line No
	Mark for: Mrs. Meg Takahama, *					
2	012388 201AR	EACH	**Do Not Deliver Before 16-OCT-12** CHAIR WOOD ABLE GENERATION #A REGULAR	$273.0000	$546.00	1

Inv. # 964
Shipd. 10/31/12

COPY

40#

20-16-13

Routing Instructions:
Ship via School Specialty 2012/2013 Routing Guide.

To obtain your copy of the 2012/2013 Routing Guide, please call 855-223-8017 or contact SSIRouting@CHRobinson.com.

Corporate transportation must approve routing deviations. Bill of Lading copy MUST accompany invoice. Bills payable upon order completion; terms discounted from date of invoice. Our PO number MUST appear on Bill of Lading with instructions for carrier to place on Freight Bill and mark as such. Failure to do so will incur a chargeback of $50.

Terms and Conditions:
Standard Terms and Conditions of Purchase are an integral part of this Purchase Order and are herein incorporated by this reference. All prices and amounts on this order are expressed in USD.
Please formally acknowledge receipt of Purchase Order and estimated delivery date(s); take note of the Do Not Deliver Before date(s) in the body of this Purchase Order.

Total $ 546.00 **USD**

Invoice

able
generation
8 Mills Rd.
Whitefield, ME 04353
Ph.: 800.875.2457
Fax: 207.549.7942

Date	Invoice #
10/31/2012	964

Bill To

Abilitations
Accounts Payable
P.O. Box 1017
Appleton, Wisconsin 54912-1017

Ship To

Waimanalo Elem. Interm. School
Attn: Mrs. Meg Takahama
41-1330 Kalanianaole Hwy.
Room U2
Waimanalo, HI 96795-1214

P.O. No.	Terms	Shipped	Via	F.O.B.	SUPPLIER #	CUST. P.O. #	SALES ORD. #
2471888	Net 30	10/31/2012	UPS	Whitefield ME	2567	D003017908052431	22358802

Quantity	Item Code	Description	Price Each	Amount
2	201A-R	Module A Play Chair-Regular	273.00	546.00

COPY

Total $546.00

School Specialty

Featuring Proprietary Products:

Sax® Childcraft® abc® Sportime®
Classroom Direct® Education Essentials®

SCHOOL SPECIALTY
PO BOX 1579
APPLETON WI 54912-1579

Corporate FID# 39-0971239

PO Number	Rev #	DC	Date	Page #
2494577	0	111	20-NOV-12	1 of 1

THE ABOVE PURCHASE ORDER AND REVISION # MUST APPEAR ON ALL INVOICES, PACKAGES, PACKING SLIPS, SHIPPING PAPERS AND CORRESPONDENCE.

Ship To: SAINT JAMES HOSPITAL
Attention: HUGHES, JODI
Your PO#: H00400000080592
2500 W REYNOLDS ST
PONTIAC IL 61764-9774
United States

Supplier: ABLE GENERATION
8 MILLS RD
WHITEFILED ME 04353
United States

Bill To: SCHOOL SPECIALTY INC
PO BOX 1017
APPLETON WI 54912-1017
United States

Buyer: FLOW CELL DIRECTS	FOB:	Acct Number:
Phone: e-mail please	Freight Terms: FOB	**Delivery Date(s): SEE DATE(S) BELOW**
Fax:	Via:	Our SO Number: 22473042
Email: FLOW_CELL_DIRECTS@schoolspecialty.com		

Quantity	Our Item / Your Item	UOM / Item Description		Unit Price	Extended	Line No

REF CONTACT NAME JODI HUGHES
REF CONTACT PH# 815-842-4961
REF CUST PO# H00400000080592
REF CONTACT NAME JODI HUGHES
REF CONTACT PH# 815-842-4961
REF CUST PO# H00400000080592

Mark for: HUGHES, JODI

1	011939 2019	EACH TRAY FOR REGULAR PLAY CHAIR SIZE 0	**Do Not Deliver Before 20-NOV-12**	$126.0000	$126.00	1

Inv # 965
shipd 11/28/12

COPY

9# 24x18x3

Routing Instructions:
Ship via School Specialty 2012/2013 Routing Guide.

To obtain your copy of the 2012/2013 Routing Guide, please call 855-223-8017 or contact SSIRouting@CHRobinson.com.

Corporate transportation must approve routing deviations. Bill of Lading copy MUST accompany invoice. Bills payable upon order completion; terms discounted from date of invoice. Our PO number MUST appear on Bill of Lading with instructions for carrier to place on Freight Bill and mark as such. Failure to do so will incur a chargeback of $50.

Terms and Conditions:
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Please formally acknowledge receipt of Purchase Order and estimated delivery date(s); take note of the Do Not Deliver Before date(s) in the body of this Purchase Order.

Total $ 126.00 **USD**

able
generation

8 Mills Rd.
Whitefield, ME 04353
Ph.: 800.875.2457
Fax: 207.549.7942

Invoice

Date	Invoice #
11/28/2012	965

Bill To	Ship To
Abilitations Accounts Payable P.O. Box 1017 Appleton, Wisconsin 54912-1017	Saint James Hospital Attn: Jodi Hughes 2500 W. Reynolds St. Pontiac, IL 61764-9774

P.O. No.	Terms	Shipped	Via	F.O.B.	SUPPLIER #	CUST. P.O. #	SALES ORD. #
2494577	Net 30	11/28/2012	UPS	Whitefield ME	2567	H00400000080592	22473042

Quantity	Item Code	Description	Price Each	Amount
1	2019	Tray (Reg. only)	126.00	126.00

COPY

Total $126.00

School Specialty

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Sax® Childcraft® abc® Sportime®
Classroom Direct® Education Essentials®

SCHOOL SPECIALTY
PO BOX 1579
APPLETON WI 54912-1579

Corporate FID# 39-0971239

PO Number	Rev #	DC	Date	Page #
2507643	0	111	07-DEC-12	1 of 1

THE ABOVE PURCHASE ORDER AND REVISION # MUST APPEAR ON ALL INVOICES, PACKAGES, PACKING SLIPS, SHIPPING PAPERS AND CORRESPONDENCE.

Ship To: DEPT OF ASSISTIVE & REHAB SERVICES
Attention: ALANIZ, SUSIE
Your PO#: 859691
313 W VILLAGE BLVD
STE 112
LAREDO TX 78041-2275
United States

Supplier: ABLE GENERATION
8 MILLS RD
WHITEFILED ME 04353
United States

Bill To: SCHOOL SPECIALTY INC
PO BOX 1017
APPLETON WI 54912-1017
United States

Buyer: FLOW CELL DIRECTS	FOB:	Acct Number:
Phone: e-mail please	Freight Terms: Parcel	**Delivery Date(s): SEE DATE(S) BELOW**
Fax:	Via:	Our SO Number: 22533124
Email: FLOW_CELL_DIRECTS@schoolspecialty.com		

Quantity	Our Item / Your Item	UOM / Item Description		Unit Price	Extended	Line No

REF CONTACT NAME SUSIE ALANIZ
REF CONTACT PH# 956 661 0930
REF CUST PO# 859691

Mark for: ALANIZ, SUSIE

1	012395 2020R/2021R	EACH	**Do Not Deliver Before 07-DEC-12** TABLE FOR ABLE GENERATION REGULAR	$269.7500	$269.75	1

SHIPD 12/18
IV # 966

COPY

28# 28 24 4

Routing Instructions:
Ship via School Specialty 2012/2013 Routing Guide.

To obtain your copy of the 2012/2013 Routing Guide, please call 855-223-8017 or contact SSIRouting@CHRobinson.com.

Corporate transportation must approve routing deviations. Bill of Lading copy MUST accompany invoice. Bills payable upon order completion; terms discounted from date of invoice. Our PO number MUST appear on Bill of Lading with instructions for carrier to place on Freight Bill and mark as such. Failure to do so will incur a chargeback of $50.

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Please formally acknowledge receipt of Purchase Order and estimated delivery date(s); take note of the Do Not Deliver Before date(s) in the body of this Purchase Order.

Total $ 269.75 **USD**

able
generation

8 Mills Rd.
Whitefield, ME 04353
Ph.: 800.875.2457
Fax: 207.549.7942

Invoice

Date	Invoice #
12/11/2012	966

Bill To
Abilitations Accounts Payable P.O. Box 1017 Appleton, Wisconsin 54912-1017

Ship To
Dept. of Assitive & Rehab. Srvcs. Attn: Susie Alaniz 313 W. Village Blvd. Ste. 112 Laredo, TX 78041-2275

P.O. No.	Terms	Shipped	Via	F.O.B.	SUPPLIER #	CUST. P.O. #	SALES ORD. #
2507643	Net 30	12/11/2012	UPS	Whitefield ME	2567	859691	22533124

Quantity	Item Code	Description	Price Each	Amount
1	2020R/2021R	Table/Legs-Reg.	269.75	269.75

COPY

Total $269.75

School Specialty

Featuring Proprietary Products:

Sax® Childcraft® abc® Sportime®
Classroom Direct® Education Essentials®

SCHOOL SPECIALTY
PO BOX 1579
APPLETON WI 54912-1579

Corporate FID# 39-0971239

PO Number	Rev #	DC	Date	Page #
2515384	0	111	17-DEC-12	1 of 1

THE ABOVE PURCHASE ORDER AND REVISION # MUST APPEAR ON ALL INVOICES, PACKAGES, PACKING SLIPS, SHIPPING PAPERS AND CORRESPONDENCE.

Ship To: LANDON HOUSTON
Your PO#: 0008135800
309 S WOODLAWN AVE
LIMA OH 45805-3164
United States

Supplier: ABLE GENERATION
8 MILLS RD
WHITEFILED ME 04353
United States

Bill To: SCHOOL SPECIALTY INC
PO BOX 1017
APPLETON WI 54912-1017
United States

Buyer: FLOW CELL DIRECTS	FOB:	Acct Number:
Phone: e-mail please	Freight Terms: Parcel	**Delivery Date(s): SEE DATE(S) BELOW**
Fax:	Via:	Our SO Number: 22572402
Email: FLOW_CELL_DIRECTS@schoolspecialty.com		

Quantity	Our Item / Your Item	UOM	Item Description	Unit Price	Extended	Line No
1	012388 201AR	EACH	**Do Not Deliver Before 17-DEC-12** CHAIR WOOD ABLE GENERATION #A REGULAR	$273.0000	$273.00	1

REF CONTACT NAME
REF CONTACT PH# 419 221 1385 X3061
REF CUST PO# 0008135800
INSIDE DELIVERY
TAILGATE DELIVERY

Mark for:

Iv # 967
SHPRD 12/23/12

COPY

Routing Instructions:
Ship via School Specialty 2012/2013 Routing Guide.

To obtain your copy of the 2012/2013 Routing Guide, please call 855-223-8017 or contact SSIRouting@CHRobinson.com.

Corporate transportation must approve routing deviations. Bill of Lading copy MUST accompany invoice. Bills payable upon order completion; terms discounted from date of invoice. Our PO number MUST appear on Bill of Lading with instructions for carrier to place on Freight Bill and mark as such. Failure to do so will incur a chargeback of $50.

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Please formally acknowledge receipt of Purchase Order and estimated delivery date(s); take note of the Do Not Deliver Before date(s) in the body of this Purchase Order.

Total $ 273.00 **USD**

able
generation

8 Mills Rd.
Whitefield, ME 04353
Ph.: 800.875.2457
Fax: 207.549.7942

Invoice

Date	Invoice #
12/23/2012	967

Bill To
Abilitations Accounts Payable P.O. Box 1017 Appleton, Wisconsin 54912-1017

Ship To
Landon Houston 309 S Woodlawn Ave. Lima, OH 45805-3164

P.O. No.	Terms	Shipped	Via	F.O.B.	SUPPLIER #	CUST. P.O. #	SALES ORD. #
2515384	Net 30	12/23/2012	UPS	Whitefield ME	2567	0008135800	22572402

Quantity	Item Code	Description	Price Each	Amount
1	201A-R	Module A Play Chair-Regular	273.00	273.00

COPY

Total $273.00

able
generation

8 Mills Rd.
Whitefield, ME 04353
Ph.: 800.875.2457
Fax: 207.549.7942

Invoice

Date	Invoice #
12/31/2012	968

Bill To	Ship To
Abilitations Accounts Payable P.O. Box 1017 Appleton, Wisconsin 54912-1017	Sarah Pollnow 2310 W. Alvina Ave. Milwaukee, WI 53221

P.O. No.	Terms	Shipped	Via	F.O.B.	SUPPLIER #	CUST. P.O. #	SALES ORD. #
2519291	Net 30	12/31/2012	UPS	Whitefield ME	2567	Ref 7505547	22590370

Quantity	Item Code	Description	Price Each	Amount
1	201A-R	Module A Play Chair-Regular	273.00	273.00

COPY

Total $273.00

School Specialty

Featuring Proprietary Products:

Sax® Childcraft® abc® Sportime®
Classroom Direct® Education Essentials®

SCHOOL SPECIALTY
PO BOX 1579
APPLETON WI 54912-1579

Corporate FID# 39-0971239

PO Number	Rev #	DC	Date	Page #
2519291	0	111	27-DEC-12	1 of 1

THE ABOVE PURCHASE ORDER AND REVISION # MUST APPEAR ON ALL INVOICES, PACKAGES, PACKING SLIPS, SHIPPING PAPERS AND CORRESPONDENCE.

Ship To: SARAH POLLNOW
Your PO#: Reference 7505547
2310 W ALVINA AVE
MILWAUKEE WI 53221
United States

Supplier: ABLE GENERATION
8 MILLS RD
WHITEFILED ME 04353
United States

Bill To: SCHOOL SPECIALTY INC
PO BOX 1017
APPLETON WI 54912-1017
United States

Buyer: FLOW CELL DIRECTS	FOB:	Acct Number:
Phone: e-mail please	Freight Terms: Parcel	**Delivery Date(s): SEE DATE(S) BELOW**
Fax:	Via:	Our SO Number: 22590370
Email: FLOW_CELL_DIRECTS@schoolspecialty.com		

Quantity	Our Item / Your Item	UOM / Item Description		Unit Price	Extended	Line No
			Call 24hrs prior to delivery SARAH (414) 732-6886			
			Call 24hrs prior to delivery SARAH (414) 732-6886			
	Mark for:					
1	012388 201AR	EACH	**Do Not Deliver Before 27-DEC-12** CHAIR WOOD ABLE GENERATION #A REGULAR	$273.0000	$273.00	1

IU# 968
Shipd. 12/31/12

COPY

21# 20-16-8

Routing Instructions:
Ship via School Specialty 2012/2013 Routing Guide.

To obtain your copy of the 2012/2013 Routing Guide, please call 855-223-8017 or contact SSIRouting@CHRobinson.com.

Corporate transportation must approve routing deviations. Bill of Lading copy MUST accompany invoice. Bills payable upon order completion; terms discounted from date of invoice. Our PO number MUST appear on Bill of Lading with instructions for carrier to place on Freight Bill and mark as such. Failure to do so will incur a chargeback of $50.

Terms and Conditions:
Standard Terms and Conditions of Purchase are an integral part of this Purchase Order and are herein incorporated by this reference. All prices and amounts on this order are expressed in USD.
Please formally acknowledge receipt of Purchase Order and estimated delivery date(s); take note of the Do Not Deliver Before date(s) in the body of this Purchase Order.

Total $ 273.00 **USD**