

Fill in this information to identify the case:

Debtor 1 Sheltering Arms Children and Family Services, Inc.
 Debtor 2 _____
 (Spouse, if filing) _____
 United States Bankruptcy Court Eastern District of New York
 Case number: 24-41037

FILED
 U.S. Bankruptcy Court
 Eastern District of New York
 3/11/2024
 Robert A. Gavin, Clerk

Official Form 410

Proof of Claim

Filed: USBC - Eastern District of New York
 Shelter Arms Children & Family
 Services Inc (CLM)
 24-41037 (JMM)



04/22

Read the instructions before filling out this form. This form is for making a request for payment of an administrative expense. Make such a request

SCX

s form to

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?		<u>Staples, Inc.</u>	
		Name of the current creditor (the person or entity to be paid for this claim)	
		Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?		<input checked="" type="checkbox"/> No <input type="checkbox"/> 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? .		Where should payments to the creditor be sent? (if different)
	<u>Staples, Inc.</u>		<u>Staples, Inc.</u>
	Name		Name
	<u>Staples / Shane Anderson</u> <u>7 Technology Circle</u> <u>Columbia, SC 29203</u>		<u>PO Box 105748</u>
	Contact phone <u>8033338799</u>		Atlanta, FL 30348
	Contact email <u>david.anderson@staples.com</u>		Contact phone <u>8887151000 x 51305</u>
		Contact email <u>ARREMITTANCE@STAPLES.COM</u>	
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____			
4. Does this claim amend one already filed?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____	
5. Do you know if anyone else has filed a proof of claim for this claim?		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

MM/DD/YYYY

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:

0136

7. How much is the claim?

\$ 3390.17

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 healthcare information.

Goods Sold – Office Products

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)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Check all that apply:	<div style="text-align: right;">Amount entitled to priority</div> <div style="border: 1px solid black; padding: 5px;"> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p> <p><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ _____</p> <p><input type="checkbox"/> Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ _____</p> <p><input type="checkbox"/> Wages, salaries, or commissions (up to \$15,150*) 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). \$ _____</p> <p><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____</p> <p><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____</p> <p><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(_) that applies \$ _____</p> </div> <p style="font-size: small;">* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.</p>
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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 3/11/2024
MM / DD / YYYY

/s/ Shane Anderson

Signature

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

Name	<u>Shane Anderson</u>		
	First name	Middle name	Last name
Title	<u>Credit Risk Analyst</u>		
Company	<u>Staples Business Advantage</u>		
	Identify the corporate servicer as the company if the authorized agent is a servicer		
Address	<u>7 Technology Circle</u>		
	<u>Number Street</u>		
	<u>Columbia, SC 29203</u>		
	<u>City State ZIP Code</u>		
Contact phone	<u>8033338799</u>	Email	<u>David.anderson@staples.com</u>



INVOICE DETAIL

INVOICE DATE	CUSTOMER	SUMMARY INVOICE
4/1/23	YN1060136	8069785117
PLEASE PAY BY	TERMS	SUMMARY INVOICE AMOUNT
5/1/23	1/10 Net 30 Days	\$ 2,908.79

Staples

SHELTERING ARMS CHILDREN & FAMILY
25 BROADWAYSERVICES INC
NEW YORK, NY 10004

SHELTERING ARMS CHILDREN & FAMILY
500 BERGEN AVEPAULS HOUSE-FOSTER CARE
BRONX, NY 10455

Bill to Account: NY1010690

Ship to Account:

Budget Ctr: 1001
P O Number: 20231691 /20231691
Ordered By: MINERVA SOTO

Invoice Number: 3534523521
Order: 7607111913-000-001

Order Line	Item Number	Description / Unit of Measure	Order Qty	Ship Qty	Unit Price	Extended Price
1	478887	BOX FILE LTR/LGL WHITE 12/CT	5	5	\$ 27.78	\$ 138.90
2	404772	AVY COPY LBL 1UP 100 FULL SHT	1	1	\$ 35.74	\$ 35.74
3	260265	AVY LSR LBL 6UP 100-3 1/3 X 4	1	1	\$ 19.16	\$ 19.16
						Subtotal: \$ 193.80
						Total: \$ 193.80



INVOICE DETAIL

INVOICE DATE	CUSTOMER	SUMMARY INVOICE
11/27/21	YN1060136	8064383754
PLEASE PAY BY	TERMS	SUMMARY INVOICE AMOUNT
12/27/21	1/10 Net 30 Days	\$ 5,427.08

Staples

SHELTERING ARMS CHILDREN & FAMILY
25 BROADWAYSERVICES INC
NEW YORK, NY 10004

MORRIS AVE DC
565 MORRIS AVE
BRONX, NY 10451

Bill to Account: NY1010690

Ship to Account:

Budget Ctr: 8019
P O Number: 20220820 /20220820
Ordered By: JENNIFER RODRIGUEZ

Invoice Number: 3493565932
Order: 734228389-000-001

Order Line	Item Number	Description / Unit of Measure	Order Qty	Ship Qty	Unit Price	Extended Price
1	414392	HP 304A C/M/Y COLOR TONER 3PK	2	2	\$ 354.91	\$ 709.82
2	492072	SPLS 8.5X11 30% REC COPY CS	20	20	\$ 45.16	\$ 903.20
3	646161	WRIST SUPPORT	1	1	\$ 13.10	\$ 13.10
5	318923	COPPERTOP BATTERY AA 8 PK	6	6	\$ 9.21	\$ 55.26
6	24444513	CONNECT 4 SHOTS	2	2	\$ 22.99	\$ 45.98
7	23999119	FIVE LITTLE MONKEYS JUMPING	1	1	\$ 21.49	\$ 21.49
8	281598	G.030 CROSS FIRE AIRSOFT RIFLE	2	2	\$ 18.29	\$ 36.58
9	404293	NAME BDG BLUE BORDER LBL	1	1	\$ 2.11	\$ 2.11
						Subtotal: \$ 1,787.54
						Total: \$ 1,787.54



INVOICE DETAIL

INVOICE DATE	CUSTOMER	SUMMARY INVOICE
10/1/22	YN1060136	8067761261
PLEASE PAY BY	TERMS	SUMMARY INVOICE AMOUNT
10/31/22	1/10 Net 30 Days	\$ 9,211.36

Staples

SHELTERING ARMS CHILDREN & FAMILY
25 BROADWAYSERVICES INC
NEW YORK, NY 10004

SHELTERING ARMS CHILDREN & FAMILY
4433 3RD AVE
BRONX, NY 10457

Bill to Account: NY1010690

Ship to Account:

Budget Ctr: 8050
P O Number: 20230358 /20230358
Ordered By: ROSILYN WRIGHT

Invoice Number: 3519355153
Order: 7365515083-003-001

Order Line	Item Number	Description / Unit of Measure	Order Qty	Ship Qty	Unit Price	Extended Price
1	135848	STAPLES 8.5X11 COPY CS	1	1	\$ 39.99	\$ 39.99
1	135848	STAPLES 8.5X11 COPY CS	1	1	\$ 39.99	\$ 39.99
1	135848	STAPLES 8.5X11 COPY CS	1	1	\$ 39.99	\$ 39.99
1	271674	SHARPIE 36CT FINE BLACK BOX	1	1	\$ 17.16	\$ 17.16
1	125369	SHARPIE MARKER FINE RED DZ	3	3	\$ 6.56	\$ 19.68
2	475715	CRAYOLA 24/BX COLORED PENCILS	3	3	\$ 4.49	\$ 13.47
2	123372	BIC ROUND STIC MED BLK DZ	4	4	\$ 0.87	\$ 3.48
2	24528007	P-TOUCH PTD220 LABELER	1	1	\$ 39.99	\$ 39.99
2	2638679	EXPO 16PK ASST	2	2	\$ 21.99	\$ 43.98
2	221689	FOLDR 1/3CUT LTR MANILA 250	2	2	\$ 14.08	\$ 28.16
						Subtotal: \$ 285.89
						Total: \$ 285.89



INVOICE DETAIL

INVOICE DATE	CUSTOMER	SUMMARY INVOICE
10/1/22	YN1060136	8067761261
PLEASE PAY BY	TERMS	SUMMARY INVOICE AMOUNT
10/31/22	1/10 Net 30 Days	\$ 9,211.36

Staples

SHELTERING ARMS CHILDREN & FAMILY
25 BROADWAYSERVICES INC
NEW YORK, NY 10004

SHELTERING ARMS CHILDREN & FAMILY
4433 3RD AVE
BRONX, NY 10457

Bill to Account: NY1010690

Ship to Account:

Budget Ctr: 8050
P O Number: 20230358 /20230358
Ordered By: ROSILYN WRIGHT

Invoice Number: 3519355154
Order: 7365515675-002-001

Order Line	Item Number	Description / Unit of Measure	Order Qty	Ship Qty	Unit Price	Extended Price
1	2768001	COPPERTOP AA ALKALINE BX/24	2	2	\$ 19.81	\$ 39.62
1	812295	WALL CLOCK 14 IN PLASTIC ROUND	3	3	\$ 10.42	\$ 31.26
1	822838	CW ANTBC HAND SOAP 4GAL	4	4	\$ 8.61	\$ 34.44
6	1686752	GLASS CLEANR PKT DSLVBLE 25PK	4	4	\$ 17.29	\$ 69.16
8	2767340	COPPERTOP ALKALINE BOX OF 12 D	3	3	\$ 18.87	\$ 56.61
						Subtotal: \$ 231.09
						Total: \$ 231.09



INVOICE DETAIL

INVOICE DATE	CUSTOMER	SUMMARY INVOICE
12/24/22	YN1060136	8068693597
PLEASE PAY BY	TERMS	SUMMARY INVOICE AMOUNT
1/23/23	1/10 Net 30 Days	\$ 224.27

Staples

SHELTERING ARMS CHILDREN & FAMILY
25 BROADWAYSERVICES INC
NEW YORK, NY 10004

BRUNER YRC ANNEX
3030 BRUNER AVE
BRONX, NY 10469

Bill to Account: NY1010690

Ship to Account:

Budget Ctr: 1002
P O Number: 20231095 /0231095
Ordered By: THEODORA DIGGS

Invoice Number: 3526160367
Order: 7369705641-002-001

Order Line	Item Number	Description / Unit of Measure	Order Qty	Ship Qty	Unit Price	Extended Price
2	24523461	DETERGENT,LDRY,2/CT,CLR	5	5	\$ 46.99	\$ 234.95
						Subtotal: \$ 234.95
						Total: \$ 234.95



INVOICE DETAIL

INVOICE DATE	CUSTOMER	SUMMARY INVOICE
6/10/23	YN1060136	8070559093
PLEASE PAY BY	TERMS	SUMMARY INVOICE AMOUNT
7/10/23	1/10 Net 30 Days	\$ 1,300.01

Staples

SHELTERING ARMS CHILDREN & FAMILY
25 BROADWAYSERVICES INC
NEW YORK, NY 10004

SHELTERING ARMS - KIDWISE
133-25 GUY BREWER BLVD
JAMAICA, NY 11434

Bill to Account: NY1010690

Ship to Account:

Budget Ctr: 2107-KIDWISE
P O Number: 20231984 /20231984
Ordered By: GEORGIA JEFFERSON

Invoice Number: 3540136395
Order: 7610367558-000-001

Order Line	Item Number	Description / Unit of Measure	Order Qty	Ship Qty	Unit Price	Extended Price
1	1667670	KCUP CAFE BUSTELO ESPRESSO 24CT	3	3	\$ 12.14	\$ 36.42
1	328425	ULTRA PAPER PLATES 10 1/16 INC	3	3	\$ 16.10	\$ 48.30
1	328422	ULTRALUX 6 7/8 INCH PAPER PLAT	3	3	\$ 7.33	\$ 21.99
1	470743	COFFEEMATE CREAMER 50CT	3	3	\$ 4.71	\$ 14.13
1	808298	TISSUE FACIAL KLEENEX 2PLY	1	1	\$ 34.84	\$ 34.84
1	356652	DUST-OFF 7OZ. 6 PK	2	2	\$ 36.69	\$ 73.38
1	1053785	CM SWEET ITALIAN CREAMER 50/BX	3	3	\$ 7.90	\$ 23.70
1	576583	POLAND SPRING 8OZ 12-PK	6	6	\$ 15.53	\$ 93.18
1	2739895	KCUP SBUX SUMATRA 24CT	2	2	\$ 22.99	\$ 45.98
1	518718	INVISIBLE TAPE 16PK BOX	2	2	\$ 11.40	\$ 22.80
1	24295905	3X3 POP WTRCLR 12PK 100 SHT/PD	1	1	\$ 13.19	\$ 13.19
2	1440262	KCUP SBUX FR ROAST 24CT	3	3	\$ 22.99	\$ 68.97
2	24441635	SS FORK 960PCS SERIES-W	1	1	\$ 64.98	\$ 64.98
2	24441637	SS KNIFE 960PCS SERIES-W	1	1	\$ 68.18	\$ 68.18
2	2634547	COBALT PL TBLCVR 54X108	1	1	\$ 24.19	\$ 24.19
3	187021	CLASP ENV BRN KRAFT 9X12 -100	2	2	\$ 8.76	\$ 17.52
4	187039	CLASP ENV BRN KRAFT 10X13 -100	2	2	\$ 10.41	\$ 20.82
5	712666	TROPICANA O JUICE 10OZ 24CT	4	4	\$ 22.30	\$ 89.20
6	712665	TROPICANA APL JUICE 10OZ 24CT	4	4	\$ 22.30	\$ 89.20
7	328423	ULTRALUX PAPER PLATES 8 1/2 IN	2	2	\$ 8.75	\$ 17.50
8	1645765	VANITY FAIR EVERYDAY 300/PK	4	4	\$ 12.50	\$ 50.00
9	1169284	BEAN BAG CHAIR DGBEANSMSLDGN	2	2	\$ 128.99	\$ 257.98
						Subtotal: \$ 1,196.45
						Total: \$ 1,196.45



INVOICE DETAIL

INVOICE DATE	CUSTOMER	SUMMARY INVOICE
10/22/22	YN1060136	8068001299
PLEASE PAY BY	TERMS	SUMMARY INVOICE AMOUNT
11/21/22	1/10 Net 30 Days	\$ 3,597.82

Staples

SHELTERING ARMS CHILDREN & FAMILY
25 BROADWAYSERVICES INC
NEW YORK, NY 10004

BRUNER YRC ANNEX
3030 BRUNER AVE
BRONX, NY 10469

Bill to Account: NY1010690

Ship to Account:

Budget Ctr: 1002
P O Number: 20230769 /20230769
Ordered By: THEODORA DIGGS

Invoice Number: 3521034392
Order: 7601349795-000-001

Order Line	Item Number	Description / Unit of Measure	Order Qty	Ship Qty	Unit Price	Extended Price
1	915656	SCOTT HRT W CORE PLUGS 1150FT	2	2	\$ 62.05	\$ 124.10
1	751160	DISINFECTANT CLEANER SURFACE	6	6	\$ 3.05	\$ 18.30
2	777124	CLEAN UP CLEANER WITH BLEACH	2	2	\$ 61.99	\$ 123.98
3	538983	TRASH BAGS 55-60GAL RECYC 100C	4	4	\$ 35.75	\$ 143.00
4	24474487	NITRILE PF EXAM LG GLOVES BLK	4	4	\$ 22.70	\$ 90.80
5	24474488	NITRILE PF EXAM MD GLOVES BLK	4	4	\$ 22.70	\$ 90.80
6	2519639	AIR GAIN MOONLIGHT BREEZ 2/PK	4	4	\$ 8.16	\$ 32.64
7	102435	BOUNTY GIANT 12PK SAS 95 SHEET	2	2	\$ 33.46	\$ 66.92
8	637721	FABULOSO CLEANER 1-GAL	2	2	\$ 57.88	\$ 115.76
9	931431	NITRILE DISP GLOVE PWDFR XL BX	4	4	\$ 10.99	\$ 43.96
						Subtotal: \$ 850.26
						Total: \$ 850.26

General Unsecured Claim	4779.98	3390.17
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