

Fill in this information to identify the case:Debtor Powin, LLCUnited States Bankruptcy Court for the: _____ District of New Jersey
(State)Case number 25-16137**Modified Official Form 410
Proof of Claim****04/25**

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 or 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>Control Source 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? <u>Control Source Inc.</u> <u>5211 Union Rd.</u> <u>Gastonia, NC 28056</u> Contact phone _____ Contact email <u>See summary page</u> Uniform claim identifier (if you use one): _____	Where should payments to the creditor be sent? (if different) <u>Control Source Inc.</u> <u>PO Box 551177</u> <u>Gastonia, NC 28055, United States</u> Contact phone <u>704-824-5335</u> Contact email <u>See summary page</u>
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 _____ MM / DD / YYYY	
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? _____	



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?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>25617</u> <u> </u> <u> </u>
7. How much is the claim? \$ <u>131,941.60</u>	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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?	<p>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 health care information.</p> <p><u>Goods sold</u></p>
9. Is all or part of the claim secured?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature or property: <div><input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i>. <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____</div> Basis for perfection: _____ <small>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.)</small> Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount 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) _____ % <div><input type="checkbox"/> Fixed <input type="checkbox"/> Variable</div></div>
10. Is this claim based on a lease?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____</div>
11. Is this claim subject to a right of setoff?	<div><input checked="" type="checkbox"/> No</div> <div><input type="checkbox"/> Yes. Identify the property: _____</div>



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☒ No

☐ Yes. Check all that apply:

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

Amount entitled to priority

\$ _____

☐ Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$17,150*) 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).

\$ _____

☐ 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 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?

☐ No

☒ Yes. 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.

\$ 131,941.60

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)(3) 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 acknowledgement 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 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 09/24/2025
MM / DD / YYYY

/s/Crystal Davis
Signature

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

Name Crystal Davis
First name Middle name Last name

Title President

Company Control Source Inc.
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address _____

Contact phone _____ Email _____



Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (866) 507-8031 | International 001-310-823-9000

Debtor: 25-16137 - Powin, LLC District: District of New Jersey, Trenton Division		
Creditor: Control Source Inc. 5211 Union Rd. Gastonia, NC, 28056 Phone: Phone 2: Fax: Email: crystal.davis@controlsource.com	Has Supporting Documentation: Yes, supporting documentation successfully uploaded Related Document Statement:	
	Has Related Claim: No Related Claim Filed By:	
	Filing Party: Creditor	
Disbursement/Notice Parties: Control Source Inc. PO Box 551177 Gastonia, NC, 28055 United States Phone: 704-824-5335 Phone 2: Fax: E-mail: crystal.davis@controlsource.com DISBURSEMENT ADDRESS		
Other Names Used with Debtor:	Amends Claim: No Acquired Claim: No	
Basis of Claim: Goods sold	Last 4 Digits: Yes - 25617	Uniform Claim Identifier:
Total Amount of Claim: 131,941.60	Includes Interest or Charges: No	
Has Priority Claim: No	Priority Under:	
Has Secured Claim: No Amount of 503(b)(9): Yes: 131,941.60 Based on Lease: No Subject to Right of Setoff: No	Nature of Secured Amount: Value of Property: Annual Interest Rate: Arrearage Amount: Basis for Perfection: Amount Unsecured:	
Submitted By: Crystal Davis on 24-Sep-2025 11:44:51 a.m. Pacific Time Title: President Company: Control Source Inc.		



Control Source Inc.
 PO Box 551177
 Gastonia, NC 28055
 1-888-827-1882
 www.controlsource.com

Powin, LLC
 20550 SW 115th Ave
 Tualatin, OR 97062

Statement	
CUSTOMER ID	
25617	
AS OF DATE	PAGE
06/20/2025	1 of 1

Total Amount Due: 131,941.60
--

CSI Federal Tax ID: 56-2029636

Invoice Number	Invoice Date	Due Date	Purchase Order Number	Amount Due
1107955	11/14/2024	12/14/2024	#PO-15038	132.95
1107956	11/14/2024	12/14/2024	#PO-15037	132.95
1108944	01/06/2025	02/05/2025	#PO-13406	121.20
1109794	02/12/2025	03/14/2025	#PO-16626	5,410.25
1110228	02/27/2025	03/29/2025	#PO-16626	8,257.75
1111024	03/28/2025	04/27/2025	#PO-16673	81,723.25
1111025	03/28/2025	04/27/2025	#PO-16672	34,170.00
1111698	04/25/2025	05/25/2025	#PO-16673	284.75
1111919	05/02/2025	06/01/2025	#PO-17813	1,708.50
Total Amount Due:				131,941.60

-----Invoice Age in Days -----				
Current	<= 30	31 to 60	61 to 90	OVER 90
0.00	1,993.25	115,893.25	8,257.75	5,797.35



Control Source Inc.
PO Box 551177
Gastonia, NC 28055
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INVOICE	
Page	1 of 1
Invoice Number	1111919
Invoice Date	05/02/2025
Order Number	1130026
Order Date	04/25/2025
Terms	Net 30
Due Date	06/01/2025
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

Powin, LLC
2235 W Casmalla Street
Rialto, CA 92377

Attn: Accounts Payable

Ordered By: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-17813	Origin	1009 - Crystal Davis

****DIRECT SHIPMENT****

Carrier: UPS Ground

Tracking #: Delivery Note: 22-037419

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
61S34180	6	6	0	284.75	1,708.50

Customer Part Number: E-B-00757

Total Lines: 1

Sub-Total: 1,708.50
Tax: 0.00
Amount Due: **1,708.50**

Send US\$ Payments To: CONTROL SOURCE INC
PO BOX 551177
GASTONIA, NC 28055



Control Source Inc.
PO Box 551177
Gastonia, NC 28055
1-888-827-1882
www.controlsource.com

INVOICE	
Page	1 of 1
Invoice Number	1111698
Invoice Date	04/25/2025
Order Number	1126851
Order Date	01/22/2025
Terms	Net 30
Due Date	05/25/2025
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

Mesa DC Warehouse
7524 E Warner Rd
Mesa, AZ 85212

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-16673	Origin	1009 - Crystal Davis

****DIRECT SHIPMENT****

Carrier: PICK UP OR DELIVERY

Tracking #: Delivery #22-36433

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
61S34180	288	1	0	284.75	284.75

Customer Part Number: E-B-00757

Note: Deliver 1/15/25 Project P.EDF0480

Total Lines: 1

Sub-Total: 284.75
Tax: 0.00
Amount Due: **284.75**

Send US\$ Payments To: CONTROL SOURCE INC
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INVOICE	
Page	1 of 1
Invoice Number	1111025
Invoice Date	03/28/2025
Order Number	1126792
Order Date	01/21/2025
Terms	Net 30
Due Date	04/27/2025
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

Mesa DC Warehouse
7524 E Warner Rd
Attn: Janice Mahn
Mesa, AZ 85212

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-16672	Origin	1009 - Crystal Davis

****DIRECT SHIPMENT****

Carrier: PICK UP OR DELIVERY

Tracking #: Delivery Note # 22-27863

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
61S34180	120	120	0	284.75	34,170.00

Customer Part Number: E-B-00757

Note: Deliver 1/15/25 Project P.STR0400

Total Lines: 1

Sub-Total: 34,170.00

Tax: 0.00

Amount Due: 34,170.00

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GASTONIA, NC 28055



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Gastonia, NC 28055
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INVOICE	
Page	1 of 1
Invoice Number	1111024
Invoice Date	03/28/2025
Order Number	1126851
Order Date	01/22/2025
Terms	Net 30
Due Date	04/27/2025
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

Mesa DC Warehouse
7524 E Warner Rd
Mesa, AZ 85212

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-16673	Origin	1009 - Crystal Davis

****DIRECT SHIPMENT****

Carrier: PICK UP OR DELIVERY

Tracking #: Delivery Note # 22-27574

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
61S34180	288	287	0	284.75	81,723.25

Customer Part Number: E-B-00757

Note: Deliver 1/15/25 Project P.EDF0480

Total Lines: 1

Sub-Total: 81,723.25

Tax: 0.00

Amount Due: 81,723.25

Send US\$ Payments To: CONTROL SOURCE INC
PO BOX 551177
GASTONIA, NC 28055



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Gastonia, NC 28055
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INVOICE	
Page	1 of 1
Invoice Number	1110228
Invoice Date	02/27/2025
Order Number	1126594
Order Date	01/14/2025
Terms	Net 30
Due Date	03/29/2025
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

GTI-NEW YORK-CM
3100 Lake Shore Road
Ravenswood Project GTI to Ravenswood-1 S
Buffalo, NY 14219

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-16626	Origin	1009 - Crystal Davis

****DIRECT SHIPMENT****

Order Note: Project ID: P.BHE0030

Delivery Instructions: Customer will arrange pick up

Carrier: COLLECT

Tracking #: Delivery Note # : 22-017066

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
61S34180	48	29	0	284.75	8,257.75

Customer Part Number: E-B-00757

Total Lines: 1

Sub-Total: 8,257.75
Tax: 0.00
Amount Due: 8,257.75

Send US\$ Payments To: CONTROL SOURCE INC
PO BOX 551177
GASTONIA, NC 28055



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1-888-827-1882
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INVOICE	
Page	1 of 1
Invoice Number	1108944
Invoice Date	01/06/2025
Order Number	1120650
Order Date	06/11/2024
Terms	Net 30
Due Date	02/05/2025
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

Mesa DC Warehouse
7524 E Warner Rd
Mesa, AZ 85212

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-13406	Origin	1009 - Crystal Davis

Order Note: Project P.INV0031

Carrier: FedEx Second Day Collect

Tracking #: 771165913912

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
14011540 S-15X12-400MM Customer Part Number: M30102-65501-023	2	2	0	11.75	23.50
144D3111 NEMA 4, 4X, external operation S-type handle, ON(I)-OFF(0) front operation, black, padlockable, defeatable, shaft not included Customer Part Number: P10907-01000-022	2	2	0	48.85	97.70

Total Lines: 2

Sub-Total: 121.20
Tax: 0.00
Amount Due: **121.20**

Send US\$ Payments To: CONTROL SOURCE INC
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INVOICE	
Page	1 of 1
Invoice Number	1107956
Invoice Date	11/14/2024
Order Number	1123612
Order Date	09/24/2024
Terms	Net 30
Due Date	12/14/2024
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

Mesa DC Warehouse
7524 E Warner Rd
Mesa, AZ 85212

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-15037	Origin	1009 - Crystal Davis

Carrier: Fed Ex Ground

Tracking #: 779936682976

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
144D3111 NEMA 4, 4X, external operation S-type handle, ON(I)-OFF(0) front operation, black, padlockable, defeatable, shaft not included Customer Part Number: P10907-01000-022 Note: Deliver 11/19/24	2	2	0	48.85	97.70
14011540 S-15X12-400MM Customer Part Number: M30102-65501-023 Note: Deliver 11/19/24	3	3	0	11.75	35.25

Total Lines: 2

Sub-Total: 132.95
Tax: 0.00
Amount Due: 132.95

Send US\$ Payments To: CONTROL SOURCE INC
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INVOICE	
Page	1 of 1
Invoice Number	1107955
Invoice Date	11/14/2024
Order Number	1123610
Order Date	09/24/2024
Terms	Net 30
Due Date	12/14/2024
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

Mesa DC Warehouse
7524 E Warner Rd
Mesa, AZ 85212

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-15038	Origin	1009 - Crystal Davis

Carrier: Fed Ex Ground

Tracking #: Fedex 779937262888

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
144D3111 NEMA 4, 4X, external operation S-type handle, ON(I)-OFF(0) front operation, black, padlockable, defeatable, shaft not included Customer Part Number: P10907-01000-022 Note: Deliver 11/19/24	2	2	0	48.85	97.70
14011540 S-15X12-400MM Customer Part Number: M30102-65501-023 Note: Deliver 11/19/24	3	3	0	11.75	35.25

Total Lines: 2

Sub-Total: 132.95
Tax: 0.00
Amount Due: **132.95**

Send US\$ Payments To: CONTROL SOURCE INC
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INVOICE	
Page	1 of 1
Invoice Number	1109794
Invoice Date	02/12/2025
Order Number	1126594
Order Date	01/14/2025
Terms	Net 30
Due Date	03/14/2025
Customer Number	25617

Bill To:

Powin, LLC
20550 SW 115th Ave
Tualatin, OR 97062

Ship To:

GTI-NEW YORK-CM
3100 Lake Shore Road
Ravenswood Project GTI to Ravenswood-1 S
Buffalo, NY 14219

Attn: Accounts Payable

<i>PO Number</i>	<i>F.O.B.</i>	<i>Sales Representative</i>
#PO-16626	Origin	1009 - Crystal Davis

****DIRECT SHIPMENT****

Order Note: Project ID: P.BHE0030

Delivery Instructions: Customer will arrange pick up

Carrier: COLLECT

Tracking #: Delivery Note # 22-009947

<i>Part Number</i>	<i>Ordered</i>	<i>Shipped</i>	<i>Back Ordered</i>	<i>Price</i>	<i>Amount</i>
61S34180	48	19	0	284.75	5,410.25

Customer Part Number: E-B-00757

Total Lines: 1

Sub-Total: 5,410.25
Tax: 0.00
Amount Due: **5,410.25**

Send US\$ Payments To: CONTROL SOURCE INC
PO BOX 551177
GASTONIA, NC 28055