

**Fill in this information to identify the case:**

Debtor name Broncs, Inc.  
United States Bankruptcy Court for the: Central District of California  
Case number (if known): 8:19-bk-10941-CB (State)

☐ Check if this is an amended filing

**Official Form 206Sum**  
**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B* .....

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B* .....

\$ 9,518,471.62

1c. **Total of all property:**

Copy line 92 from *Schedule A/B* .....

\$ 9,518,471.62

**Part 2: Summary of Liabilities**

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* .....

\$ 1,382,278.80

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 6a of *Schedule E/F* .....

\$ 132,824.50

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F* .....

+\$ 7,676,374.60

4. **Total liabilities** .....  
Lines 2 + 3a + 3b

\$ 9,191,477.90

## Fill in this information to identify the case:

Debtor name Broncs, Inc.United States Bankruptcy Court for the: Central District of CaliforniaCase number (if known): 8:19-bk-10941-CB☐ Check if this is an amended filing

## Official Form 206A/B

## Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

## Part 1: Cash and cash equivalents

## 1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

## All cash or cash equivalents owned or controlled by the debtor

## Current value of debtor's interest

## 2. Cash on hand

\$ 0.00

## 3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. Bank of America - Checking	Checking	2 4 7 2	\$ 0.00
3.2. Bank of America - Checking	Checking	1 4 1 7	\$ 0.00

## 4. Other cash equivalents (Identify all)

4.1. \_\_\_\_\_ \$ \_\_\_\_\_

4.2. \_\_\_\_\_ \$ \_\_\_\_\_

## 5. Total of Part 1

\$ 0.00

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

## Part 2: Deposits and prepayments

## 6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

## Current value of debtor's interest

## 7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Security Deposit with Liberty Property Ltd Ptnshp \_\_\_\_\_ \$ Unknown

7.2. Loan reserve held by Loeb Capital \_\_\_\_\_ \$ 366,709.38

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. \_\_\_\_\_ \$ \_\_\_\_\_  
 8.2. \_\_\_\_\_ \$ \_\_\_\_\_

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ 366,709.38

**Part 3: Accounts receivable**

**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes. Fill in the information below.

**Current value of debtor's interest**

**11. Accounts receivable**

11a. 90 days old or less:	392,385.82	-	38,193.59	=	..... →	\$ 354,192.23
	face amount		doubtful or uncollectible accounts			
11b. Over 90 days old:	7,662.82	-	1,324.30	=	..... →	\$ 6,338.52
	face amount		doubtful or uncollectible accounts			

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 360,530.75

**Part 4: Investments**

**13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes. Fill in the information below.

**Valuation method used for current value**

**Current value of debtor's interest**

**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. \_\_\_\_\_ \$ \_\_\_\_\_  
 14.2. \_\_\_\_\_ \$ \_\_\_\_\_

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_  
 15.2. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. \_\_\_\_\_ \$ \_\_\_\_\_  
 16.2. \_\_\_\_\_ \$ \_\_\_\_\_

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>19. Raw materials</b>				
Yarn - at Garden Grove facility	03/17/2019 MM / DD / YYYY	175,975.00 \$		175,975.00 \$
<b>20. Work in progress</b>				
Greige Goods - at Garden Grove facility	03/17/2019 MM / DD / YYYY	72,443.25 \$		72,443.25 \$
<b>21. Finished goods, including goods held for resale</b>				
Fabrics - at Garden Grove facility	03/17/2019 MM / DD / YYYY	61,896.70 \$		61,896.70 \$
<b>22. Other inventory or supplies</b>				
Material for Garments-3rd Pty Possession-Mexico	02/27/2019 MM / DD / YYYY	730,687.96 \$		730,687.96 \$
<b>23. Total of Part 5</b>				1,041,002.91 \$
Add lines 19 through 22. Copy the total to line 84.				

**24. Is any of the property listed in Part 5 perishable?**

- ☒ No
- ☐ Yes

**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☒ No
- ☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>28. Crops—either planted or harvested</b>			
	\$		\$
<b>29. Farm animals</b> <i>Examples:</i> Livestock, poultry, farm-raised fish			
	\$		\$
<b>30. Farm machinery and equipment</b> (Other than titled motor vehicles)			
	\$		\$
<b>31. Farm and fishing supplies, chemicals, and feed</b>			
	\$		\$
<b>32. Other farming and fishing-related property not already listed in Part 6</b>			
	\$		\$

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ \_\_\_\_\_

34. **Is the debtor a member of an agricultural cooperative?**

- ☐ No  
☐ Yes. Is any of the debtor's property stored at the cooperative?  
☐ No  
☐ Yes

35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No  
☐ Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_

36. **Is a depreciation schedule available for any of the property listed in Part 6?**

- ☐ No  
☐ Yes

37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**

- ☐ No  
☐ Yes

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.  
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. <b>Office furniture</b> Office Furniture	\$ 31,574.19	Comp Sales	\$ 5,364.62
40. <b>Office fixtures</b> Leasehold Improvements	\$ 0.00		\$ 0.00
41. <b>Office equipment, including all computer equipment and communication systems equipment and software</b> Computers and Office Equipment	\$ 81,888.51	Comp Sales	\$ 13,913.28
42. <b>Collectibles</b> <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ 19,277.90

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No  
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☐ No  
☒ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1 4 Forklifts	\$ 18,000.00		\$ Unknown
47.2 4 Forklifts & 6 pallet jacks subject to liens on Schedule D	\$ 0.00		\$ Unknown
47.3	\$		\$
47.4	\$		\$
<b>48. Watercraft, trailers, motors, and related accessories</b> Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1	\$		\$
48.2	\$		\$
<b>49. Aircraft and accessories</b>			
49.1	\$		\$
49.2	\$		\$
<b>50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b> Knitting, Dyeing and Finishing Equipment subject to liens on Schedule D			
	\$ 12,593,800.00	Comp Sales	\$ 6,020,000.00
<b>51. Total of Part 8.</b> Add lines 47 through 50. Copy the total to line 87.			\$ 6,020,000.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No  
☒ Yes

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**Part 9: Real property****54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1	12601 Industry Street, Garden Grove, CA	Assignee of Lease			Unknown
			\$ _____		\$ _____
55.2	12641 Industry Street, Garden Grove, CA	Assignee of Lease			Unknown
			\$ _____		\$ _____
55.3	12691 Pala Drive, Garden Grove, CA	Assignee of Lease			Unknown
			\$ _____		\$ _____
56.	<b>Total of Part 9.</b> Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.				0.00

**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
- ☐ Yes

**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
- ☒ Yes. Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest	
60.	<b>Patents, copyrights, trademarks, and trade secrets</b>				
		\$ _____		\$ _____	
61.	<b>Internet domain names and websites</b> www.wescoasttextile.com			Unknown	
		\$ _____		\$ _____	
62.	<b>Licenses, franchises, and royalties</b> South Coast AQMD License			Unknown	
		\$ _____		\$ _____	
63.	<b>Customer lists, mailing lists, or other compilations</b>				
		\$ _____		\$ _____	
64.	<b>Other intangibles, or intellectual property</b>				
		\$ _____		\$ _____	
65.	<b>Goodwill</b>				
		\$ _____		\$ _____	
66.	<b>Total of Part 10.</b> Add lines 60 through 65. Copy the total to line 89.				0.00

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Broncs, Inc.  
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67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes. Fill in the information below.

**Current value of  
debtor's interest**

71. Notes receivable

Description (include name of obligor)

\_\_\_\_\_ — \_\_\_\_\_ = → \$ \_\_\_\_\_  
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ Tax year \_\_\_\_\_ \$ \_\_\_\_\_

73. Interests in insurance policies or annuities

\_\_\_\_\_ \$ \_\_\_\_\_

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\_\_\_\_\_ \$ \_\_\_\_\_

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\_\_\_\_\_ \$ \_\_\_\_\_

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

\_\_\_\_\_ \$ \_\_\_\_\_

77. Other property of any kind not already listed Examples: Season tickets, country club membership

Inter-Company due from WesCoast Textiles Inc. \$ 1,121,781.83  
Inter-Company due from Codi Sheridan Inc. \$ 589,168.85

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

**\$ 1,710,950.68**

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No  
☐ Yes



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**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1.</i>	\$ 0.00	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	\$ 366,709.38	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	\$ 360,530.75	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	\$ 1,041,002.91	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	\$ 19,277.90	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	\$ 6,020,000.00	
88. <b>Real property.</b> <i>Copy line 56, Part 9.</i> ..... ➔		\$ 0.00
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ \$ 1,710,950.68	
91. <b>Total.</b> Add lines 80 through 90 for each column. .... 91a.	\$ 9,518,471.62	+ 91b. \$ 0.00
92. <b>Total of all property on Schedule A/B.</b> Lines 91a + 91b = 92. .... 9,518,471.62		\$ 9,518,471.62

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Debtor name Broncs, Inc.  
United States Bankruptcy Court for the: Central District of California of California (State)  
Case number (if known): 8:19-bk-10941-CB

☐ Check if this is an amended filing

## Official Form 206D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

## Part 1: List Creditors Who Have Secured Claims

## 2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A  
Amount of claim  
Do not deduct the value of collateral.

Column B  
Value of collateral that supports this claim

**2.1** Creditor's name  
AMERICAN CAPITAL GROUP INC  
Creditor's mailing address  
STE 750, IRVINE, CA 92618  
Creditor's email address, if known  
\_\_\_\_\_  
Date debt was incurred 9/22/14  
Last 4 digits of account number \_\_\_\_\_  
Do multiple creditors have an interest in the same property?  
☐ No  
☒ Yes.  
Multiple creditors have an interest in the same property listed on Schedule A/B.

## Describe debtor's property that is subject to a lien

Sames SS-SI.5 Single Jersey Machine, S/N F-000993

\$ Unknown\$ Unknown

## Describe the lien

Equipment Lease Agmt #30-01598

## Is the creditor an insider or related party?

- ☒ No  
☐ Yes

## Is anyone else liable on this claim?

- ☒ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

## As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

**2.2** Creditor's name  
AMERICAN CAPITAL GROUP, INC.  
Creditor's mailing address  
23382 MILL CREEK DR STE 115  
STE 115, LAGUNA HILLS, CA 92653  
Creditor's email address, if known  
\_\_\_\_\_  
Date debt was incurred \_\_\_\_\_  
Last 4 digits of account number \_\_\_\_\_  
Do multiple creditors have an interest in the same property?  
☐ No  
☒ Yes. Have you already specified the relative priority?  
☐ No. Specify each creditor, including this creditor, and its relative priority.  
Multiple creditors have an interest in the same property listed on Schedule A/B  
☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

## Describe debtor's property that is subject to a lien

Sames SS-SI-5 Single Jersey Machine, S/N F-001137

\$ Unknown\$ Unknown

## Describe the lien

Equipment Lease #30-010443

## Is the creditor an insider or related party?

- ☒ No  
☐ Yes

## Is anyone else liable on this claim?

- ☒ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

## As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

## 3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 1,382,278.80

**Part 1: Additional Page**

Column A

**Amount of claim**

Do not deduct the value of collateral.

Column B

**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.3** **Creditor's name**  
AMUR EQUIPMENT FINANCE

**Describe debtor's property that is subject to a lien**

N 1 Superslit slitting line No 4 and accessories

\$ Unknown

\$ Unknown

**Creditor's mailing address**

308 N LOCUST ST STE 100  
GRAND ISLAND, NE 68801

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe the lien**

Equipment Lease

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**2.4** **Creditor's name**  
ASCENTIUM CAPITAL LLC

**Describe debtor's property that is subject to a lien**

Textile Machine, 2 Rope Opening and Slitting line, RW 2600 X 2400FW

\$ Unknown

\$ Unknown

**Creditor's mailing address**

23970 HWY 59 N  
HUMBLE, TX 77339

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe the lien**

Equipment Financing Agmt #2211950

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**Part 1: Additional Page**

Column A

**Amount of claim**

Do not deduct the value of collateral.

Column B

**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.5** **Creditor's name**  
CAPITAL EQUIPMENT SOLUTIONS LLC

**Creditor's mailing address**

5480 Corporate Dr Ste 350  
Troy, MI 48098

**Creditor's email address, if known**

**Date debt was incurred** 4/23/18

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe debtor's property that is subject to a lien**

Lien against assets

\$1,353,988.31

\$ 3,137,940.87

**Describe the lien**

Term Note, Security Agreement

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☒ Contingent

☒ Unliquidated

☐ Disputed

**2.6** **Creditor's name**  
CRESTMARK EQUIPMENT FINANCE

**Creditor's mailing address**

40950 WOODWARD AVE STE 201  
BLOOMFIELD HILLS, MI 48304-5127

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe debtor's property that is subject to a lien**

PTT200 Set Making Machine

\$ Unknown

\$ Unknown

**Describe the lien**

Equipment Lease Agmt #16062

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.7</b> <b>Creditor's name</b> DIRECT CAPITAL	<b>Describe debtor's property that is subject to a lien</b> New Compacting Machine Mod Complex revolution 2500 complete with all devices	\$ <u>Unknown</u>	\$ <u>Unknown</u>
<b>Creditor's mailing address</b> 155 COMMERCE WAY PORTSMOUTH, NH 03801			
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b>	<b>Describe the lien</b> Master EFA Agmt #ME01730880		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

<b>2.8</b> <b>Creditor's name</b> ELGORT TEXTILE ASSOCIATES INC	<b>Describe debtor's property that is subject to a lien</b> Vendor for Lafer Open Width Compactor, #KSA5000	\$ <u>Unknown</u>	\$ <u>Unknown</u>
<b>Creditor's mailing address</b> 145 BLACKBURN ST YORK, SC 29745			
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b>	<b>Describe the lien</b> Equipment Lease		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		

**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.9</b> <b>Creditor's name</b> EMPLOYMENT DEVELOPMENT DEPT	<b>Describe debtor's property that is subject to a lien</b>	<b>Amount of claim</b> \$28,290.49	<b>Value of collateral that supports this claim</b> \$ Unknown
<b>Creditor's mailing address</b> BANKRUPTCY GROUP MIC 92E PO BOX 826880, SACRAMENTO, CA 942			
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b>	<b>Describe the lien</b> Tax Lien		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

<b>2.10</b> <b>Creditor's name</b> FINANCIAL PACIFIC LEASING INC	<b>Describe debtor's property that is subject to a lien</b>	<b>Amount of claim</b> \$ Unknown	<b>Value of collateral that supports this claim</b> \$ Unknown
<b>Creditor's mailing address</b> 3455 S 344TH WAY STE 300 FEDERAL WAY, WA 98063	Tubetex Rfg. Napping/Raising Machine. Contract #001-0890343-905		
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b>	<b>Describe the lien</b> Lease Agmt		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

**Part 1: Additional Page**

Column A

**Amount of claim**

Do not deduct the value of collateral.

Column B

**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.11** **Creditor's name**  
FINANCIAL PACIFIC LEASING INC

**Creditor's mailing address**  
3455 S 344TH WAY  
STE 300, FEDERAL WAY, WA 98001

**Creditor's email address, if known**

**Describe debtor's property that is subject to a lien**

Lafer Open Width compactor, Model KSA 500 w/attachments

\$ Unknown

\$ Unknown

**Date debt was incurred**  
**Last 4 digits of account number**

**Describe the lien**

Lease Agmt #118871

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**2.12** **Creditor's name**  
HAPPY ROCK MERCHANT SOLUTIONS LLC

**Creditor's mailing address**

dba GoCAP FINANCIAL  
149 WEST 36TH ST, 12TH FLOOR, NEW

**Creditor's email address, if known**

**Date debt was incurred** 3/27/2018

**Last 4 digits of account number**

**Describe debtor's property that is subject to a lien**

Future sales agreement

\$ Unknown

\$ 360,530.75

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe the lien**

Master Factoring/Security Agmt

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.13** **Creditor's name**  
HITACHI CAPITAL AMERICA CORP

**Creditor's mailing address**  
7808 CREEKRIDGE CIR STE 250  
EDINA, MN 55439

**Creditor's email address, if known**

**Describe debtor's property that is subject to a lien**

1-Dual Flow High Pressure Rapid Dying Machine; 2 Tubes Loading Capacity 350-500 Kg batch w/DTC 7700 Controller

\$ Unknown

\$ Unknown

**Date debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_

**Describe the lien**

Installment Payment Agmt #4486400-001

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Is the creditor an insider or related party?**

☒ No  
☐ Yes

**Is anyone else liable on this claim?**

☒ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent  
☒ Unliquidated  
☐ Disputed

**2.14** **Creditor's name**  
HUB INTERNATIONAL INS

**Creditor's mailing address**  
3455 WILSHIRE BLVD  
LOS ANGELES, CA 90010

**Creditor's email address, if known**

**Describe debtor's property that is subject to a lien**

Vendor for Auto Lab SPS

\$ Unknown

\$ Unknown

**Date debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_

**Describe the lien**

Equipment Lease

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Is the creditor an insider or related party?**

☒ No  
☐ Yes

**Is anyone else liable on this claim?**

☒ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☒ Contingent  
☒ Unliquidated  
☐ Disputed



**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p><b>2.15</b> <b>Creditor's name</b>                  HUNTINGTON TECHNOLOGY FINANCE INC</p> <hr/> <p><b>Creditor's mailing address</b>                  2285 FRANKLIN RD                  BLOOMFIELD HILLS, MI 48302</p> <hr/> <p><b>Creditor's email address, if known</b></p> <hr/> <p><b>Date debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____</p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                 Multiple creditors have an interest in the same property listed on Schedule A/B             </div> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p><b>Describe debtor's property that is subject to a lien</b>                  Superslit Slitting Line Roller w/MM 2600 Working Width Arm</p> <hr/> <p><b>Describe the lien</b>                  Master Lease Agmt #1988-001</p> <hr/> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p><b>As of the petition filing date, the claim is:</b>                  Check all that apply.  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ <u>Unknown</u></p> <p>\$ <u>Unknown</u></p>
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<p><b>2.16</b> <b>Creditor's name</b>                  HUNTINGTON TECHNOLOGY FINANCE INC</p> <hr/> <p><b>Creditor's mailing address</b>                  2285 FRANKLIN RD                  BLOOMFIELD HILLS, MI 48302</p> <hr/> <p><b>Creditor's email address, if known</b></p> <hr/> <p><b>Date debt was incurred</b> <u>11/3/2017</u>  <b>Last 4 digits of account number</b> _____</p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                 Multiple creditors have an interest in the same property listed on Schedule A/B             </div> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p><b>Describe debtor's property that is subject to a lien</b>                  TMT Computer Color Kitchen: Auto Actual Checking Dispensing System</p> <hr/> <p><b>Describe the lien</b>                  Equipment Finance Agmt #1988-004</p> <hr/> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p><b>As of the petition filing date, the claim is:</b>                  Check all that apply.  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ <u>Unknown</u></p> <p>\$ <u>Unknown</u></p>
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**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.17** **Creditor's name**  
 HUNTINGTON TECHNOLOGY FINANCE  
 INC

**Creditor's mailing address**

2285 FRANKLIN RD  
 BLOOMFIELD HILLS, MI 48302

**Creditor's email address, if known**

anthonylfs@aol.com

**Date debt was incurred** 8/11/17

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe debtor's property that is subject to a lien**

Superslit Slitting Line Roller w/MM 2600 Working Width Arm

\$ Unknown

\$ Unknown

**Describe the lien**

Equipment Finance Agmt #1988-003

**Is the creditor an insider or related party?**

☒ No  
☐ Yes

**Is anyone else liable on this claim?**

☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent  
☒ Unliquidated  
☐ Disputed

**2.18** **Creditor's name**  
 INTERNATIONAL FINANCIAL SVC CORP

**Creditor's mailing address**

1113 S MILWAUKEE AVE STE 301  
 LIBERTYVILLE, IL 60048

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe debtor's property that is subject to a lien**

Double Drum MC20/24 Raising Machine

\$ Unknown

\$ Unknown

**Describe the lien**

Equipment Financing Agmt #2403810

**Is the creditor an insider or related party?**

☒ No  
☐ Yes

**Is anyone else liable on this claim?**

☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent  
☒ Unliquidated  
☐ Disputed

**Part 1: Additional Page**

Column A

**Amount of claim**

Do not deduct the value of collateral.

Column B

**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.19** **Creditor's name**  
KEY EQUIPMENT FINANCE

**Describe debtor's property that is subject to a lien**

Ferraro EasyComplex FV 1500 Shrinking Machine for Tubular Knit Fabric

\$ Unknown

\$ Unknown

**Creditor's mailing address**

7077 E MARILYN RD  
STE 125, SCOTTSDALE, AZ 85254

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Describe the lien**

Equipment Lease #1988-002

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**2.20** **Creditor's name**  
KNIGHT CAPITAL FUNDING

**Describe debtor's property that is subject to a lien**

\$ Unknown

\$ Unknown

**Creditor's mailing address**

9 E LOOCKERMAN ST  
STE 202-543, DOVER, DE 19901

**Creditor's email address, if known**

**Date debt was incurred** 10/24/2018

**Last 4 digits of account number**

**Describe the lien**

Loan

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**Part 1: Additional Page**

Column A

**Amount of claim**

Do not deduct the value of collateral.

Column B

**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.21** **Creditor's name**  
LCA BANK CORPORATION/STRADA CAPITAL CORP

**Creditor's mailing address**

23046 AVENIDA DE LA CARLOTA  
STE 350, LAGUNA HILLS, CA 92653

**Creditor's email address, if known**

**Date debt was incurred** 2/24/2017

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe debtor's property that is subject to a lien**

Auto Lab SPS

\$ Unknown

\$ Unknown

**Describe the lien**

Lease Agmt #100-014365

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**2.22** **Creditor's name**  
LIBERTY PROPERTY LTD PTNSHP

**Creditor's mailing address**

650 E SWEDESFORD RD STE 400  
WAYNE, PA 19087

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe debtor's property that is subject to a lien**

Assignee of building leases for 12691 Pala Dr., 12601 Industry St. and 12641 Industry St, Garden Grove, CA

\$ Unknown

\$ Unknown

**Describe the lien**

Real Property Lease Agmts

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p><b>2.23</b> <b>Creditor's name</b>                  MANTIS FUNDING LLC</p> <hr/> <p><b>Creditor's mailing address</b>                  64 BEAVER ST #344                  NEW YORK, NY 10004</p> <hr/> <p><b>Creditor's email address, if known</b></p> <hr/> <p><b>Date debt was incurred</b> _____  <b>Last 4 digits of account number</b> _____</p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                 Multiple creditors have an interest in the same property listed on Schedule A/B  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____             </div>	<p><b>Describe debtor's property that is subject to a lien</b></p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> <p><b>Describe the lien</b>                  Loan</p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p><b>As of the petition filing date, the claim is:</b>                  Check all that apply.  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ <u>Unknown</u></p> <p>\$ <u>Unknown</u></p>
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<p><b>2.24</b> <b>Creditor's name</b>                  PAWNEE LEASING CORP</p> <hr/> <p><b>Creditor's mailing address</b>                  3801 AUTOMATION WAY STE 207                  COLLINS, CO 80525</p> <hr/> <p><b>Creditor's email address, if known</b></p> <hr/> <p><b>Date debt was incurred</b> <u>1/16/17</u>  <b>Last 4 digits of account number</b> _____</p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                 Multiple creditors have an interest in the same property listed on Schedule A/B  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____             </div>	<p><b>Describe debtor's property that is subject to a lien</b>                  Lafer Open Width Compactor, Model KSA500 H=2600, s/n 10 azl4452</p> <div style="border: 1px solid black; height: 150px; width: 100%;"></div> <p><b>Describe the lien</b>                  Lease Agmt #2016 1227/2017010337</p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p><b>As of the petition filing date, the claim is:</b>                  Check all that apply.  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ <u>Unknown</u></p> <p>\$ <u>Unknown</u></p>
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**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p><b>2.25</b> <b>Creditor's name</b>                  PROVIDENCE CAPITAL FUNDING</p> <hr/> <p><b>Creditor's mailing address</b>                  145 BLACKBURN ST                  YORK, SC 29745</p> <hr/> <p><b>Creditor's email address, if known</b>                  _____</p> <hr/> <p><b>Date debt was incurred</b> 1/16/17</p> <p><b>Last 4 digits of account number</b> _____</p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Multiple creditors have an interest in the same property listed on Schedule A/B</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p> </div>	<p><b>Describe debtor's property that is subject to a lien</b>                  Lafer Open Width Compactor, Model KSA500 H=2600, S/N 10AZL 4452</p> <hr/> <p><b>Describe the lien</b>                  Lease Agmt #2016 1227</p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p><b>As of the petition filing date, the claim is:</b>                  Check all that apply.  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ <u>Unknown</u></p> <p>\$ <u>Unknown</u></p>
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<p><b>2.26</b> <b>Creditor's name</b>                  SOUTHWEST TOYOTA LIFT</p> <hr/> <p><b>Creditor's mailing address</b>                  PO BOX 1070                  3725 NOBEL CT, MIRA LOMA, CA 91752</p> <hr/> <p><b>Creditor's email address, if known</b>                  _____</p> <hr/> <p><b>Date debt was incurred</b> _____</p> <p><b>Last 4 digits of account number</b> _____</p> <p><b>Do multiple creditors have an interest in the same property?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Multiple creditors have an interest in the same property listed on Schedule A/B</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p> </div>	<p><b>Describe debtor's property that is subject to a lien</b>                  6 Toyota BHBW23 Pallet Jacks, S/N 22357, 22363, 22363, 22457, 22364, 22365</p> <hr/> <p><b>Describe the lien</b>                  Equipment Lease Agmt #40640762</p> <p><b>Is the creditor an insider or related party?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Is anyone else liable on this claim?</b>  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p><b>As of the petition filing date, the claim is:</b>                  Check all that apply.  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ <u>Unknown</u></p> <p>\$ <u>Unknown</u></p>
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**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.27** **Creditor's name**  
STEARNS BANK NA / EQUIPMENT  
FINANCE DIV  
  
**Creditor's mailing address**  
500 13TH ST, PO BOX 750  
ALBANY, MN 56307  
  
**Creditor's email address, if known**

**Describe debtor's property that is subject to a lien**

Two Slitter Machines

\$ Unknown      \$ Unknown

**Date debt was incurred** \_\_\_\_\_  
**Last 4 digits of account number** \_\_\_\_\_

**Describe the lien**

Lease Agmt #2118333-001

**Do multiple creditors have an interest in the same property?**

- ☐ No  
☒ Yes. Have you already specified the relative priority?  
☐ No. Specify each creditor, including this creditor, and its relative priority.

**Is the creditor an insider or related party?**

- ☒ No  
☐ Yes

**Is anyone else liable on this claim?**

- ☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Multiple creditors have an interest in the same property listed on Schedule A/B

**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**2.28** **Creditor's name**  
STRADA CAPITAL CORP  
  
**Creditor's mailing address**  
23046 AVENIDA DE LA CARLOTA  
STE 350, LAGUNA HILLS, CA 92653  
  
**Creditor's email address, if known**

**Describe debtor's property that is subject to a lien**

2007 Genie Z-45/25J Articulated Boom Lift;  
Kubota RTV900 2 Passenger Vehicle 4X4

\$ Unknown      \$ Unknown

**Date debt was incurred** 6/19/2017  
**Last 4 digits of account number** \_\_\_\_\_

**Describe the lien**

Equipment Finance Agmt #10-015425

**Do multiple creditors have an interest in the same property?**

- ☐ No  
☒ Yes. Have you already specified the relative priority?  
☐ No. Specify each creditor, including this creditor, and its relative priority.

**Is the creditor an insider or related party?**

- ☒ No  
☐ Yes

**Is anyone else liable on this claim?**

- ☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Multiple creditors have an interest in the same property listed on Schedule A/B

**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent  
☒ Unliquidated  
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Part 1: Additional Page**

Column A  
**Amount of claim**

Do not deduct the value of collateral.

Column B  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**2.29** **Creditor's name**  
STRADA CAPITAL CORP

**Describe debtor's property that is subject to a lien**

Used Vanguard Feed Needles

\$ Unknown

\$ Unknown

**Creditor's mailing address**

23046 AVENIDA DE LA CARLOTA  
STE 350, LAGUNA HILLS, CA 92653

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe the lien**

Equipment Finance Agmt # 10-015915

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed

**2.30** **Creditor's name**  
TECHNOLOGY FINANCE CORPORATION

**Describe debtor's property that is subject to a lien**

Ferraro Easy Comptex FV 1500 Shrinking Machine for Tubular Knit Fabric

\$ Unknown

\$ Unknown

**Creditor's mailing address**

7077 EAST MARILYN RD STE 125  
SCOTTSDALE, AZ 85254

**Creditor's email address, if known**

**Date debt was incurred**

**Last 4 digits of account number**

**Do multiple creditors have an interest in the same property?**

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

**Describe the lien**

Equipment Lease #1988-002

**Is the creditor an insider or related party?**

☒ No

☐ Yes

**Is anyone else liable on this claim?**

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent

☒ Unliquidated

☐ Disputed



**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.31</b> <b>Creditor's name</b> TOYOTA FINANCIAL	<b>Describe debtor's property that is subject to a lien</b> 2 Toyota Forklifts Model 8FGCU30; Serial Nos 66669, 66645 (Rebas Inc)	\$ <u>Unknown</u>	\$ <u>Unknown</u>
<b>Creditor's mailing address</b> 8951 CYPRESS WATERS BLVD #300 COPPELL, TX 75019			
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b>	<b>Describe the lien</b> Equipment Lease Agmt		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

<b>2.32</b> <b>Creditor's name</b> TOYOTA FINANCIAL	<b>Describe debtor's property that is subject to a lien</b> 2 Toyota Forklifts, Model 8FGCU20, Serial Nos 81581, 81588	\$ <u>Unknown</u>	\$ <u>Unknown</u>
<b>Creditor's mailing address</b> 8951 CYPRESS WATERS BLVD #300 COPPELL, TX 75019			
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b>	<b>Describe the lien</b> Equipment Lease Agmt		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

**Part 1: Additional Page**

**Column A**  
**Amount of claim**  
Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<b>2.33</b> <b>Creditor's name</b> TOYOTA FINANCIAL	<b>Describe debtor's property that is subject to a lien</b> 6 Toyota Pallet Jacks, Model 8HBW23; Serial Nos. 22357, 22362, 22363, 22457, 22364, 22365 (SW Material Handling)	\$ <u>Unknown</u>	\$ <u>Unknown</u>
<b>Creditor's mailing address</b> 8951 CYPRESS WATERS BLVD #300 COPPELL, TX 75019			
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b>	<b>Describe the lien</b> Equipment Lease Agmt		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

<b>2.34</b> <b>Creditor's name</b> TRITON CAPITAL	<b>Describe debtor's property that is subject to a lien</b> Equipment	\$ <u>Unknown</u>	\$ <u>Unknown</u>
<b>Creditor's mailing address</b> 1660 HOTEL CIR N STE 215 SAN DIEGO, CA 92108			
<b>Creditor's email address, if known</b>			
<b>Date debt was incurred</b> 5/51/18	<b>Describe the lien</b> Financing Agmt #784220		
<b>Last 4 digits of account number</b>			
<b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	<b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Multiple creditors have an interest in the same property listed on Schedule A/B</b> <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	<b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A  
**Amount of claim**  
Do not deduct the value of collateral.

Column B  
**Value of collateral that supports this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.35 Creditor's name  
YELLOWSTONE CAPITAL WEST LLC

Describe debtor's property that is subject to a lien

\$Unknown \$ Unknown

Creditor's mailing address

116 NASSAU ST STE 804  
NEW YORK, NY 10038

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☐ No

☒ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

Multiple creditors have an interest in the same property listed on Schedule A/B

☐ Yes. The relative priority of creditors is specified on lines

Describe the lien

Loan

Is the creditor an insider or related party?

☒ No  
☐ Yes

Is anyone else liable on this claim?

☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent  
☒ Unliquidated  
☐ Disputed

2. Creditor's name

Describe debtor's property that is subject to a lien

\$ \$

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☐ No

☐ Yes. Have you already specified the relative priority?

☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines

Describe the lien

Is the creditor an insider or related party?

☐ No  
☐ Yes

Is anyone else liable on this claim?

☐ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent  
☐ Unliquidated  
☐ Disputed

Debtor

Broncs, Inc.  
Name

Case number (if known) 8:19-bk-10941-CB

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
J Scott Bovitz Bovitz & Spitzer 1100 Wilshire Blvd Ste 2403 Los Angeles, CA, 90017-1961	Line 2. <u>12</u>	_____
Loeb Long Term Solutions LLC 4131 S State St Chicago, IL, 60609	Line 2. <u>5</u>	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____
	Line 2. ____	_____

## Fill in this information to identify the case:

Debtor Broncs, Inc.

United States Bankruptcy Court for the: Central District of California

Case number 8:19-bk-10941-CB  
(If known)

☐ Check if this is an amended filing

## Official Form 206E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1 Priority creditor's name and mailing address**

ABREGO LEODEGARIO  
10325 GRAPE ST  
  
LOS ANGELES, CA, 90002

Date or dates debt was incurred  
\_\_\_\_\_

Last 4 digits of account  
number \_\_\_\_\_

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( 4 )

As of the petition filing date, the claim is: \$ 2,068.50

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Basis for the claim:  
Wages, Salaries, Commissions

Is the claim subject to offset?

- ☒ No  
☐ Yes

Total claim

Priority amount

**2.2 Priority creditor's name and mailing address**

AGUIRRE FEDERICO  
523 S LEMON ST  
  
ANAHEIM, CA, 92805

Date or dates debt was incurred  
\_\_\_\_\_

Last 4 digits of account  
number \_\_\_\_\_

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( 4 )

As of the petition filing date, the claim is: \$ Unknown

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:  
Wages, Salaries, Commissions

Is the claim subject to offset?

- ☒ No  
☐ Yes

**2.3 Priority creditor's name and mailing address**

AGUIRRE-TAVIRA ARELI  
219 W 57TH ST  
  
LOS ANGELES, CA, 90032

Date or dates debt was incurred  
\_\_\_\_\_

Last 4 digits of account  
number \_\_\_\_\_

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( 4 )

As of the petition filing date, the claim is: \$ Unknown

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:  
Wages, Salaries, Commissions

Is the claim subject to offset?

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>4</sup> Priority creditor's name and mailing address

\$ Unknown

\$

BASILIO JOSE  
142 W 83RD ST 1

LOS ANGELES, CA, 90003

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

2. <sup>5</sup> Priority creditor's name and mailing address

\$ 1,670.00

\$ 1,670.00

BELTRAN RAYMUNDO  
1157 LOS PALOS ST

LOS ANGELES, CA, 90023

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

2. <sup>6</sup> Priority creditor's name and mailing address

\$ 1,438.76

\$ 1,438.76

CAMPOS CESAR BALLINAS  
6801 OTIS AVE

BELL, CA, 90201

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

2. <sup>7</sup> Priority creditor's name and mailing address

\$ Unknown

\$

CAMPUZANO ANDRES  
1491 E 25TH ST

LOS ANGELES, CA, 90011

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>8</sup> Priority creditor's name and mailing addressCATALAN JORGE  
1964 E 130TH ST  
  
COMPTON, CA, 90222

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☒
- Disputed

\$ 1,438.07

\$ 1,438.07

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

2. <sup>9</sup> Priority creditor's name and mailing addressCITY OF GARDEN GROVE  
1122 ACACIA PKWY  
Anaheim, CA, 92804

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

\$ Unknown

\$

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Taxes &amp; Other Government Units

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

2. <sup>10</sup> Priority creditor's name and mailing addressCOUNTY OF ORANGE  
PO BOX 4515  
TREASURER TAX COLLECTOR  
SANTA ANA, CA, 92702-4515

As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

\$ Unknown

\$

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Taxes &amp; Other Government Units

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

2. <sup>11</sup> Priority creditor's name and mailing addressCUEVAS OSCAR  
440 W LA VETA AVE 3  
  
ORANGE, CA, 92866

As of the petition filing date, the claim is: \$ 1,695.69

\$ 1,695.69

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☒
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>12</sup> Priority creditor's name and mailing address

\$ 498.14

\$ 498.14

CURIEL ELIDA  
11408 LONG BEACH BLVD

LYNWOOD, CA, 90206

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>13</sup> Priority creditor's name and mailing address

\$ 1,193.27

\$ 1,193.27

DAO DOMINIC HUNG  
9562 WASHINGTON AVE  
APT#4  
GARDEN GROVE, CA, 92844

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>14</sup> Priority creditor's name and mailing address

\$ Unknown

\$

DELGADO PABLO  
1633 E 45TH ST

LOS ANGELES, CA, 90011

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>15</sup> Priority creditor's name and mailing address

\$ 1,620.00

\$ 1,620.00

DEPT OF INDUSTRIAL RELATIONS  
320 W. 4th Street  
Suite 450  
Los Angeles, CA, 90013

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Contributions to employee benefits

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (5)

Is the claim subject to offset?

- ☒ No  
☐ Yes



**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>16</sup> **Priority creditor's name and mailing address**

\$ Unknown

\$

DOMINGUEZ MIGUEL ANGEL  
811 S FAIRVIEW ST P2

SANTA ANA, CA, 92704

**As of the petition filing date, the claim is:**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Date or dates debt was incurred**

**Last 4 digits of account number**

**Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)

**Basis for the claim:**

Wages, Salaries, Commissions

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

2. <sup>17</sup> **Priority creditor's name and mailing address**

\$ 84,324.00

\$

EMPLOYERS ASSURANCE  
7110 N FRESNO ST STE 250  
Fresno, CA, 93720

**As of the petition filing date, the claim is:**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Date or dates debt was incurred**

**Last 4 digits of account number**

**Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (5)

**Basis for the claim:**

Contributions to employee benefits

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

2. <sup>18</sup> **Priority creditor's name and mailing address**

\$ Unknown

\$

ENRIQUEZ RAMIRO  
6976 LONG BEACH BLVD APT7

LONG BEACH, CA, 90805

**As of the petition filing date, the claim is:**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Date or dates debt was incurred**

**Last 4 digits of account number**

**Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)

**Basis for the claim:**

Wages, Salaries, Commissions

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

2. <sup>19</sup> **Priority creditor's name and mailing address**

\$ Unknown

\$

FLORES LUIS  
1186 12 E 56 ST

LOS ANGELES, CA, 90011

**As of the petition filing date, the claim is:**

*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**Date or dates debt was incurred**

**Last 4 digits of account number**

**Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)

**Basis for the claim:**

Wages, Salaries, Commissions

**Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>20</sup> Priority creditor's name and mailing address

\$ Unknown

\$

FRANCHISE TAX BOARD  
BANKRUPTCY SECTION MS A-340  
PO BOX 2952  
SACRAMENTO, CA, 95812-2952

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Taxes &amp; Other Government Units

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>21</sup> Priority creditor's name and mailing address

\$ Unknown

\$

FRANCISCO TOMAS J  
151 E 54TH ST  
  
LOS ANGELES, CA, 90011

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>22</sup> Priority creditor's name and mailing address

\$ Unknown

\$

GASCA MIGUEL  
1723 E 112 TH ST  
  
LOS ANGELES, CA, 90059

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>23</sup> Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ 102.43

\$

HONG DAVID YOUNGKI  
12522 SEMORA ST  
  
CERRITOS, CA, 90703

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>24</sup> Priority creditor's name and mailing address

\$ 3,105.43

\$ 3,105.43

HUYNH VAN BO  
10321 LAMPSON AVE

GARDEN GROVE, CA, 92840

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>25</sup> Priority creditor's name and mailing address

\$ 930.24

\$

INTERNAL REVENUE SERVICE  
PO BOX 7346  
PHILADELPHIA, PA, 19101-7346

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Taxes & Other Government Units

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>26</sup> Priority creditor's name and mailing address

\$ 1,271.67

\$

J JESUS FLORES HERRERA

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>27</sup> Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ Unknown

\$

JIMENEZ FLUMENCIO  
4037 34 MORGAN AVE

LOS ANGELES, CA, 90011

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>28</sup> Priority creditor's name and mailing address

\$6,188.35

\$6,188.35

LEE SAM YOUNG  
1259 W 168TH ST 6

GARDENA, CA, 90247

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>29</sup> Priority creditor's name and mailing address

\$Unknown

\$

LLAMAS ADRIAN GARCIA  
827 W 43RD ST  
APT #107  
LOS ANGELES, CA, 90037

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>30</sup> Priority creditor's name and mailing address

\$Unknown

\$

LOPEZ AMBROSIO  
6040 COMPTON AVE

LOS ANGELES, CA, 90001

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>31</sup> Priority creditor's name and mailing address

\$1,691.44

\$1,691.44

LOS ANGELES COUNTY TAX COLLECTOR  
PO BOX 54027  
Los Angeles, CA, 90054

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Taxes &amp; Other Government Units

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>32</sup> Priority creditor's name and mailing address

\$ 1,309.35

\$ 1,309.35

MENDOZA TONIEL ALVAREZ  
1463 118 E 25TH ST

LOS ANGELES, CA, 90011

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

2. <sup>33</sup> Priority creditor's name and mailing address

\$ Unknown

\$

MOLINA GABRIEL  
5350 BLACKWELDER ST

LOS ANGELES, CA, 90016

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

2. <sup>34</sup> Priority creditor's name and mailing address

\$ Unknown

\$

MORALES ROBERTO  
6518 PROSPECT AVE  
APT C  
BELL, CA, 90201

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

2. <sup>35</sup> Priority creditor's name and mailing address

\$ 2,525.67

\$ 2,525.67

MORENO PEDRO CATALAN  
434 OLIVE AVE 5

LONG BEACH, CA, 90802

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account number

Is the claim subject to offset?

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>36</sup> Priority creditor's name and mailing address

\$ Unknown

\$

NGUYEN THE T  
9362 MELBA DR

GARDEN GROVE, CA, 92841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>37</sup> Priority creditor's name and mailing address

\$ 1,636.85

\$ 1,636.85

NGUYEN THONG  
13581 PALOMAR ST

WESTMINSTER, CA, 92683

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>38</sup> Priority creditor's name and mailing address

\$ 1,055.98

\$ 1,055.98

NOLASCO ARCADIO  
1212 N TAMARIND AVE

COMPTON, CA, 90222

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>39</sup> Priority creditor's name and mailing address

\$ 3,926.78

\$ 3,926.78

ORTIZ MANUEL  
1424 W BEVERLY TER

MONTELBEELO, CA, 90640

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>40</sup> Priority creditor's name and mailing address

\$ Unknown

\$

PARALTA EDUARDO  
1313 LOS CANTOS AVE

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

ARVIN, CA, 93203

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>41</sup> Priority creditor's name and mailing address

\$ 1,179.02

\$ 1,179.02

PEREZ FRANCISCO J  
1349 N BALLISTA AVE

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

LA PUENTE, CA, 91744

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>42</sup> Priority creditor's name and mailing address

\$ 1,794.20

\$ 1,794.20

PEREZ RENYO ANTONIO J  
14403 CERECITA DR

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

WHITTIER, CA, 90604

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>43</sup> Priority creditor's name and mailing address

\$ 1,823.29

\$ 1,823.29

PHAM MINH VAN  
235 S BEACH BLVD  
SPC#105  
ANAHEIM, CA, 92804

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>44</sup> Priority creditor's name and mailing address

\$ Unknown

\$

RIOS OMAR  
315 1/2 WEST 46 ST  
  
LOS ANGELES, CA, 90037

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>45</sup> Priority creditor's name and mailing address

\$ 1,059.10

\$ 1,059.10

ROMERO NICOLAS  
11516 12 S BUDLONG AVE  
  
LOS ANGELES, CA, 90044

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>46</sup> Priority creditor's name and mailing address

\$ Unknown

\$

SANTIAGO JUAN  
4419 AVALON BLVD  
APT 12  
LOS ANGELES, CA, 90011

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>47</sup> Priority creditor's name and mailing address

\$ Unknown

\$

STATE BOARD OF EQUALIZATION  
ACCOUNT INFORMATION GROUP MIC 29  
PO BOX 942879  
SACRAMENTO, CA, 94279-0029

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Taxes &amp; Other Government Units

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?

- ☒ No  
☐ Yes



**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>48</sup> Priority creditor's name and mailing address

\$ 2,228.28

\$ 2,228.28

TRAN BAY  
917 S BRUCE ST

ANAHEIM, CA, 92804

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>49</sup> Priority creditor's name and mailing address

\$ 1,105.29

\$ 1,105.29

TRINH HOWARD  
841 KINGSLEY DR

ARCADIA, CA, 91007

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>50</sup> Priority creditor's name and mailing address

\$ 141.13

\$ 141.13

YANEZ RIGOBERTO  
401 W ROOSEVELT AVE  
APT 12  
MONTEBELLO, CA, 90640

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

2. <sup>51</sup> Priority creditor's name and mailing address

\$ 3,803.57

\$ 3,803.57

YOON DAE S  
1131 W SEPULVEDA BLVD  
#N-204  
TORRANCE, CA, 90502

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Wages, Salaries, Commissions

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

- ☒ No  
☐ Yes

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. <sup>52</sup> Priority creditor's name and mailing address

\$ Unknown

\$

ZUNIGA ANGEL  
11111 BARCLAY DR

GARDEN GROVE, CA, 92841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Wages, Salaries, Commissions

Last 4 digits of account  
number

Is the claim subject to offset?

- ☒ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (4)

2. Priority creditor's name and mailing address

\$

\$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( )

2. Priority creditor's name and mailing address

\$

\$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( )

2. Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$

\$

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

Specify Code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) ( )

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> A AND R BOX 1160 N ARMANDO ST  ANAHEIM, CA, 92806   Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  \$ 0.00
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> AERIOCONNECT 107 N REINO RD #231  NEWBURY PARK, CA, 91320  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  \$ 2,400.18
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> AMERICAN EXPRESS PO Box 981535  El Paso, TX, 79998-1535  Date or dates debt was incurred _____ Last 4 digits of account number <u>2007</u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Credit Card Debt  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  \$ 11,831.44
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> AMERITEX 13610 IMPERIAL HWY STE 2  Santa Fe Springs, CA, 90670  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  \$ 4,501.58
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> ANTEXTETIL SA DE CV CIUDAD INDUSTRIAL XICHTENCATL III C CENTRAL LOTE 3A MANZANA 2 90250 TLAXCO, MEXICO  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  \$ 48,277.28
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> APOLLO TECHNOLOGIES 31441 Santa Margarita Pkwy A-219  Rancho Santa Margarita, CA, 92688  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  \$ 4,920.00

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. 7 Nonpriority creditor's name and mailing address

AZITEX TRADING CORP  
1850 E 15TH ST  
  
LOS ANGELES, CA, 90021

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 9,919.43

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. 8 Nonpriority creditor's name and mailing address

BANK OF AMERICA  
PO Box 98238  
El Paso, TX, 79998-2238

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 4,705.82

Basis for the claim: Overdrawn Bank Account

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. 9 Nonpriority creditor's name and mailing address

BNSF LOGISTICS  
1600 LAKESIDE PKWY  
  
FLOWER MOUND, TX, 75028

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 2,679.21

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. 10 Nonpriority creditor's name and mailing address

C S AMERICA INC  
1305 GRAHAM ST  
  
BURLINGTON, NC, 27217

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 2,723.76

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. 11 Nonpriority creditor's name and mailing address

CABRERA JOSE  
10691 STAMPS RD  
  
DOWNEY, CA, 90241

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 6,106.75

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>12</sup> Nonpriority creditor's name and mailing address

CALIFORNIA COAST CREDIT UNION  
PO BOX 502080

SAN DIEGO, CA, 92150

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>13</sup> Nonpriority creditor's name and mailing address

CALIFORNIA WATER BOARDS  
PO BOX 1977

SACRAMENTO, CA, 95812

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 1,400.00

Basis for the claim:

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>14</sup> Nonpriority creditor's name and mailing address

CAMACHO JOSE ALBERTO ALVAREZ  
16338 1/2 CORNUTA AVE

BELLFLOWER, CA, 90706

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 27.86

Basis for the claim:

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>15</sup> Nonpriority creditor's name and mailing address

CAPITAL ONE  
PO Box 60599  
City of Industry, CA, 91716

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 9,085.40

Basis for the claim: Credit Card Debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number 6449

3. <sup>16</sup> Nonpriority creditor's name and mailing address

CAPITAL TEXTILE GROUP INC  
967 E SANDHILL AVE

CARSON, CA, 90746

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<p>3. <u>17</u> Nonpriority creditor's name and mailing address</p> <p>CHASE PO Box 15298 Wilmington, DE, 19850</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>2219</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 12,217.61</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. <u>18</u> Nonpriority creditor's name and mailing address</p> <p>CHASE PO Box 15298 Wilmington, DE, 19850</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>7746</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 27,971.21</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Credit Card Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. <u>19</u> Nonpriority creditor's name and mailing address</p> <p>CHUN JOEL P 12691 PALA DR Garden Grove, CA, 92841</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 5,794,306.94</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. <u>20</u> Nonpriority creditor's name and mailing address</p> <p>CITY OF GARDEN GROVE WATER DEPT 11222 ACACIA PKWAY GARDEN GROVE, CA, 92840</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 274,589.90</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Utility Services</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3. <u>21</u> Nonpriority creditor's name and mailing address</p> <p>COLOR MASTER INDUSTRIES INC 17155 MARGAY AVE CARSON, CA, 90746</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <u>\$ 3,400.00</u></p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Suppliers or Vendors</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>22</sup>	<b>Nonpriority creditor's name and mailing address</b> CONCENTRA 40 CENTERPOINTE DR  LA PALMA, CA, 90623	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,400.47
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>23</sup>	<b>Nonpriority creditor's name and mailing address</b> COWAY USA INC 4221 Wilshire Blvd #210 Los Angeles, CA, 90010	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>24</sup>	<b>Nonpriority creditor's name and mailing address</b> DELUXE PO BOX 742572  CINCINNATI, OH, 45274-2572	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 547.84
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>25</sup>	<b>Nonpriority creditor's name and mailing address</b> DIVERSITY LAW GROUP 515 SOUTH FIGUEROA ST STE 1250 LOS ANGELES, CA, 90071	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 16,589.87
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Services  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>26</sup>	<b>Nonpriority creditor's name and mailing address</b> DMV 12645 BEACH BLVD  STANTON, CA, 90680	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,469.00
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>27</sup> Nonpriority creditor's name and mailing address

ESCOBAR AURELIO  
C/O ARMOND M JACKSON  
2 VENTURE PLZ STE 240  
IRVINE, CA, 92618

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

\$ Unknown

Basis for the claim: Litigation: Case #30-2018-00979111

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>28</sup> Nonpriority creditor's name and mailing address

ESCOBAR AURELIO  
C/O ARMOND M JACKSON  
2 VENTURE PLZ STE 240  
IRVINE, CA, 92618

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

\$ Unknown

Basis for the claim: Litigation: Case #30-2018-01018964

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>29</sup> Nonpriority creditor's name and mailing address

EWOO CO  
636-3 IDONG KOO-RI  
SOHOL-EUB POCHON-SI  
GYEONGGI-DO, SOUTH KOREA

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>30</sup> Nonpriority creditor's name and mailing address

F AND F KNITTING MILLS  
4291 BANDINI BLVD  
VERNON, CA, 90058

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>31</sup> Nonpriority creditor's name and mailing address

FAMVANS  
10870 Kalama River Ave  
Fountain Valley, CA, 92708

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 0.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_



**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>32</sup> Nonpriority creditor's name and mailing address

FEDEX  
5930 CORPORATE AVE  
  
CYPRESS, CA, 90630

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 1,520.11

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>33</sup> Nonpriority creditor's name and mailing address

FERRARO SPA  
VIA BUSTO ARSIZIO 120  
  
LONATE POZZOLO VA, LA, 21015

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 1,096.80

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>34</sup> Nonpriority creditor's name and mailing address

FRONTIER SPINNING MILLS  
1823 BOONE TRAIL RD  
  
SANFORD, NC, 27330

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 103,067.60

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>35</sup> Nonpriority creditor's name and mailing address

GENCORE TRADING  
1577 W 132ND ST  
  
GARDENA, CA, 90249

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 14,468.96

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>36</sup> Nonpriority creditor's name and mailing address

GO TEXTILE  
841 S SAN PEDRO ST  
  
LOS ANGELES, CA, 90014

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 409.67

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>37</sup>	<b>Nonpriority creditor's name and mailing address</b> GOODS TEXTILE 1577 W 132ND ST  GARDENA, CA, 90249	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	\$ 339.50
3. <sup>38</sup>	<b>Nonpriority creditor's name and mailing address</b> GREENBERG AND BASS LLP 16000 VENTURA BLVD STE 1000 ENCINO, CA, 91436	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Services  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	\$ 9,772.33
3. <sup>39</sup>	<b>Nonpriority creditor's name and mailing address</b> HILOTEX 1614 W 207TH ST  TORRANCE, CA, 90501	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	\$ Unknown
3. <sup>40</sup>	<b>Nonpriority creditor's name and mailing address</b> HOME DEPOT CREDIT SERV PO Box 790345 St Louis, MO, 63179	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Credit Card Debt  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> 0302	\$ 13,528.11
3. <sup>41</sup>	<b>Nonpriority creditor's name and mailing address</b> HUB CITY 3435 WILSHIRE BLVD #3000  LOS ANGELES, CA, 90010	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	\$ Unknown

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>42</sup>	Nonpriority creditor's name and mailing address INTEGRATED DATA SOLUTION 3227 PRODUCER WAY STE 119 POMONA, CA, 91768	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,000.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>43</sup>	Nonpriority creditor's name and mailing address INTER PACIFIC EQUIPMENT 740 S LOS ANGELES ST #204  LOS ANGELES, CA, 90015	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>44</sup>	Nonpriority creditor's name and mailing address JAMAS PO BOX 845402  LOS ANGELES, CA, 90084	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,100.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>45</sup>	Nonpriority creditor's name and mailing address JK KING PO BOX 160  WHITSETT, NC, 27377	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>46</sup>	Nonpriority creditor's name and mailing address JOHN'S KNITTING INC 1701 W ROSECRANS AVE  GARDENA, CA, 90249	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 7,585.65
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: Suppliers or Vendors  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

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Amount of claim

3. <sup>47</sup> Nonpriority creditor's name and mailing addressKERN-LIEBERS USA TEXTILE INC  
PO BOX 519

MATTEWS, NC, 28106

## As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

\$ 1,864.38

Basis for the claim: Suppliers or Vendors

## Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>48</sup> Nonpriority creditor's name and mailing addressKIM KYU HONG  
3435 WILSHIRE BLVD #1970

LOS ANGELES, CA, 90010

## As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

## Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>49</sup> Nonpriority creditor's name and mailing addressKIM TAEHO  
1584 AVENIDA SELVA

FULLERTON, CA, 92833

## As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

\$ 22,757.66

Basis for the claim: Expense Reimbursement

## Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>50</sup> Nonpriority creditor's name and mailing addressLAKHANY AMIN  
521 ELKWOOD CT

BREA, CA, 92821

## As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☒
- Disputed

\$ 188.40

Basis for the claim: Suppliers or Vendors

## Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>51</sup> Nonpriority creditor's name and mailing addressLEKOS DYE AND FINISHING INC  
3131 HARCOURT ST

RANCHO DOMINGUEZ, CA, 90221

## As of the petition filing date, the claim is:

Check all that apply.

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

\$ 4,169.33

Basis for the claim: Suppliers or Vendors

## Is the claim subject to offset?

- ☒
- No
- 
- ☐
- Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>52</sup> Nonpriority creditor's name and mailing addressLIBERTY MUTUAL INSURANCE  
100 LIBERTY WAY

DOVER, NH, 03820

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 2,548.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>53</sup> Nonpriority creditor's name and mailing addressM AND K METAL CO  
14400 S FIGUEROA ST

GARDENA, CA, 90248

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 4,774.88

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>54</sup> Nonpriority creditor's name and mailing addressM-TEX CO  
249 W 131 ST ST

LOS ANGELES, CA, 90061

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>55</sup> Nonpriority creditor's name and mailing addressMAMMIS MARKET  
1429 CHERRY AVE

LONG BEACH, CA, 90813

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>56</sup> Nonpriority creditor's name and mailing addressMARIO CROSTA  
CORSO SEMPIONE 67  
21052 BUSTO  
ARSIZIO VA, LA

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 2: Additional Page**

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Amount of claim

3. <sup>57</sup>	<b>Nonpriority creditor's name and mailing address</b> MCMASTER-CARR PO Box 7690  Chicago, IL, 60680	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,237.60
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>58</sup>	<b>Nonpriority creditor's name and mailing address</b> MEASUREMENT CONTROL SYSTEMS 1331 S Lyon St  Santa Ana, CA, 90007	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 3,120.81
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>59</sup>	<b>Nonpriority creditor's name and mailing address</b> MONARCH KNITTING MACHINERY CORP PO BOX 5009  MONROE, NC, 28111-5009	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 834.17
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>60</sup>	<b>Nonpriority creditor's name and mailing address</b> MOP SUPPLY INC PO Box 73275 San Clemente, CA, 92673	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 0.00
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>61</sup>	<b>Nonpriority creditor's name and mailing address</b> NEEDLE USA 1931 E DEL AMO BLVD  RANCHO DOMINGUEZ, CA, 90220	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

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Amount of claim

3. <sup>62</sup> Nonpriority creditor's name and mailing address

NEMAN BROTHERS AND ASSOCIATES INC  
1525 S BROADWAY ST  
  
LOS ANGELES, CA, 90015

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 154,539.40

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>63</sup> Nonpriority creditor's name and mailing address

NORTHGATE GONZALEZ FINANCIAL LLC  
PO BOX 15539  
  
ANAHEIM, CA, 92803

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 25.00

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>64</sup> Nonpriority creditor's name and mailing address

OHIO RACK INC  
PO BOX 3517 1405 S LIBERTY AVE  
  
ALLIANCE, OH, 44601

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>65</sup> Nonpriority creditor's name and mailing address

ORANGE COUNTY SANITATION DISTRICT  
10844 ELLIS AVE  
  
FOUNTAIN VALLEY, CA, 92708

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 126,542.07

Basis for the claim: Utility Services

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. <sup>66</sup> Nonpriority creditor's name and mailing address

OSCAR QUINTANA  
210 W WALNUT  
  
COMPTON, CA, 90220

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☒ Disputed

\$ Unknown

Basis for the claim:

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 2: Additional Page**

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Amount of claim

3. <sup>67</sup>	<b>Nonpriority creditor's name and mailing address</b> OTI RIGGING AND MACHINERY MOVING INC PO BOX 1598  GARDENA, CA, 90249	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ Unknown
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>68</sup>	<b>Nonpriority creditor's name and mailing address</b> PACIFIC SOURCING GROUP 5717 FERGUSON DR  COMMERCE, CA, 90022	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 440,788.29
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>69</sup>	<b>Nonpriority creditor's name and mailing address</b> PACK EUN YOUNG 13090 SYCAMORE VLG DR  NORWALK, CA, 90650	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,255.24
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Expense Reimbursement  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>70</sup>	<b>Nonpriority creditor's name and mailing address</b> PARK ANNIE E 1025 DEWEY AVE 304  LOS ANGELES, CA, 90006	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 45,376.65
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Expense Reimbursement  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>71</sup>	<b>Nonpriority creditor's name and mailing address</b> PUMPING SOLUTIONS INC 1906 S QUAKER RIDGE PL  ONTARIO, CA, 91761	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 4,945.73
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	



**Part 2: Additional Page**

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Amount of claim

3. <sup>72</sup>	<b>Nonpriority creditor's name and mailing address</b> QUAKER TRANSPORTATION INC 1851 CHARTER LN STE 101 LANCASTER, PA, 17601	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 17,330.00
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>73</sup>	<b>Nonpriority creditor's name and mailing address</b> RAMIREZ BUTCH 100 Loma Ave #402 Long Beach, CA, 90803	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 0.00
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>74</sup>	<b>Nonpriority creditor's name and mailing address</b> RECON 1927 5TH AVE  SAN DIEGO, CA, 92101	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 9,481.00
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>75</sup>	<b>Nonpriority creditor's name and mailing address</b> RIVER ROLL OFF SVC 8632 CALABASH AVE  FONTANA, CA, 92335	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 2,400.00
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>76</sup>	<b>Nonpriority creditor's name and mailing address</b> SKY EXPRESS WORLD COURIER INC 1407 PALOMA ST  LOS ANGELES, CA, 90021	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ 1,552.05
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Basis for the claim:</b> Suppliers or Vendors  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

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Amount of claim

3. <sup>77</sup>	<b>Nonpriority creditor's name and mailing address</b> SOCALGAS 12631 MONARCH ST  GARDEN GROVE, CA, 92841	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Utility Services	\$ 307,522.11
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>78</sup>	<b>Nonpriority creditor's name and mailing address</b> SOLUENT INC 751 S WEIR CANYON RD UNIT 157-126 ANAHEIM, CA, 92808	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors	\$ 300.00
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>79</sup>	<b>Nonpriority creditor's name and mailing address</b> SOUTH COAST AQMD PO BOX 4943  DIAMOND BAR, CA, 91765-0943	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>	\$ 9,186.76
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>80</sup>	<b>Nonpriority creditor's name and mailing address</b> SOUTHERN CALIFORNIA EDISON 2244 WALNUT GROVE AVE  ROSEMEAD, CA, 91770	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Utility Services	\$ 112,442.95
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. <sup>81</sup>	<b>Nonpriority creditor's name and mailing address</b> T-MOBILE 12921 SE 38TH  BELLEVUE, WA, 98006	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Suppliers or Vendors	\$ 1,073.28
	<b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <sup>82</sup> Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ 158.56

Basis for the claim: Suppliers or Vendors

Is the claim subject to offset?

- ☒ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ \_\_\_\_\_

Basis for the claim:

Is the claim subject to offset?

- ☐ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ \_\_\_\_\_

Basis for the claim:

Is the claim subject to offset?

- ☐ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ \_\_\_\_\_

Basis for the claim:

Is the claim subject to offset?

- ☐ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

3. Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

\$ \_\_\_\_\_

Basis for the claim:

Is the claim subject to offset?

- ☐ No  
☐ Yes

Date or dates debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 3: List Others to Be Notified About Unsecured Claims**

4. **List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2.** Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. Dean G Rallis Jr Anglin Flewelling Rasmussen et al 301 N Lake Ave Ste 1100 Pasadena, CA, 91101-4158	Line <u>3.65</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.2. Lorraine Anderson 2728 W 176th St Torrance, CA, 90504	Line <u>3.4</u> <input type="checkbox"/> Not listed. Explain: _____	_____
4.3. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.4. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.1. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.5. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.6. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.7. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.8. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.9. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.10. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____
4.11. _____	Line _____ <input type="checkbox"/> Not listed. Explain: _____	_____

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims****5. Add the amounts of priority and nonpriority unsecured claims.****Total of claim amounts**5a. **Total claims from Part 1**

5a. \$ 132,824.50

5b. **Total claims from Part 2**

5b. + \$ 7,676,374.60

5c. **Total of Parts 1 and 2**

5c. \$ 7,809,199.10

Lines 5a + 5b = 5c.

**Fill in this information to identify the case:**

Debtor name Broncs, Inc.

United States Bankruptcy Court for the: Central District of California

Case number (if known): 8:19-bk-10941-CB Chapter 11

☐ Check if this is an amended filing

**Official Form 206G**

**Schedule G: Executory Contracts and Unexpired Leases**

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Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Water cooler lease Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>COWAY USA INC 4221 Wilshire Blvd #210 Los Angeles, CA, 90010</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equipment Leases: Forklifts and Pallet Jacks Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TOYOTA FINANCIAL 8951 CYPRESS WATERS BLVD #300 COPPELL, TX, 75019</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Insurance Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LIBERTY MUTUAL INSURANCE 100 Liberty Way Dover, NH, 03820</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Security Agreement/Term Note Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CAPITAL EQUIPMENT SOLUTIONS LLC 5480 Corporate Dr Ste 350 Troy, MI, 48098</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Loan Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MANTIS FUNDING LLC 64 BEAVER ST #344 NEW YORK, NY, 10004</p>

Debtor Broncs, Inc. Case number (if known) 8:19-bk-10941-CB  
Name

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.6	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Loan Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>YELLOWSTONE CAPITAL WEST LLC</p> <p>116 NASSAU ST STE 804</p> <p>NEW YORK, NY, 10038</p>
2.7	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Agreement # 784220 Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TRITON CAPITAL</p> <p>1660 HOTEL CIR N STE 215</p> <p>SAN DIEGO, CA, 92108</p>
2.8	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Ferraro EasyComplex FV 1500 shrinking machine Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TECHNOLOGY FINANCE CORPORATION</p> <p>7077 EAST MARILYN RD STE 125</p> <p>SCOTTSDALE, AZ, 85254</p>
2.9	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Agmt #10-015915 Used Vanguard Needles Lessor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STRADA CAPITAL CORP</p> <p>23046 AVENIDA DE LA CARLOTA STE 350</p> <p>LAGUNA HILLS, CA, 92653</p>
2.10	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: 2007 Genie articulated boom lift; Kubota RTV 900</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STRADA CAPITAL CORP</p> <p>23046 AVENIDA DE LA CARLOTA STE 350</p> <p>LAGUNA HILLS, CA, 92653</p>
2.11	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: 2 Slitter machines Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STEARNS BANK NA / EQUIPMENT FINANCE DIV</p> <p>500 13TH ST, PO BOX 750</p> <p>ALBANY, MN, 56307</p>
2.12	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: 6 Toyota BHBW23 Forklift Trucks; Agmt #40640762 Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SOUTHWEST TOYOTA LIFT</p> <p>PO BOX 1070</p> <p>3725 NOBEL CT</p> <p>MIRA LOMA, CA, 91752</p>

Debtor Broncs, Inc.  
Name  
Case number (if known) 8:19-bk-10941-CB

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.13	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Lafer Open width compactor Model KSA500 Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PROVIDENCE CAPITAL FUNDING</p> <p>145 BLACKBURN ST</p> <p>York, SC, 29745</p>
2.14	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Lafer Open width compactor Model KSA 500 Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PAWNEE LEASING CORP</p> <p>3801 AUTOMATION WAY STE 207</p> <p>FORT COLLINS, CO, 80525</p>
2.15	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Assignee of Bldg Leases 12629 Pala Dr, 12601/12641 Industry St Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LIBERTY PROPERTY LTD PTNSHP</p> <p>650 E SWEDES FORD RD STE 400</p> <p>WAYNE, PA, 19087</p>
2.16	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Auto Lab SPS Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LCA BANK CORPORATION/STRADA CAPITAL CORP</p> <p>23046 AVENIDA DE LA CARLOTA</p> <p>STE 350</p> <p>LAGUNA HILLS, CA, 92653</p>
2.17	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Loan Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>KNIGHT CAPITAL FUNDING</p> <p>9 E LOOCKERMAN ST STE 202-543</p> <p>DOVER, DE, 19901</p>
2.18	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Ferraro EasyComplex FV 1500 shrinking machine Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>KEY EQUIPMENT FINANCE</p> <p>7077 E MARILYN RD STE 125</p> <p>SCOTTSDALE, AZ, 85254</p>
2.19	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Double drum MC20/24 raising machine Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>INTERNATIONAL FINANCIAL SVC CORP</p> <p>1113 S MILWAUKEE AVE STE 301</p> <p>LIBERTYVILLE, IL, 60048</p>



Debtor Broncs, Inc. Case number (if known) 8:19-bk-10941-CB  
Name

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.20	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: TMT computer color kitchen/auto actual system Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HUNTINGTON TECHNOLOGY FINANCE INC 2285 FRANKLIN RD  BLOOMFIELD HILLS, MI, 48302</p>
2.21	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Superslit slitting line roller w/MM 2600 arm Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HUNTINGTON TECHNOLOGY FINANCE INC 2285 FRANKLIN RD  BLOOMFIELD HILLS, MI, 48302</p>
2.22	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Dual flow high pressure rapid drying machine Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HITACHI CAPITAL AMERICA CORP 7808 CREEKRIDGE CIR STE 250  EDINA, MN, 55439</p>
2.23	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Master Factoring/Security Agreement Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HAPPY ROCK MERCHANT SOLUTIONS LLC dba GoCAP FINANCIAL 149 WEST 36TH ST, 12TH FLOOR NEW YORK, NY, 10018</p>
2.24	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Tubetex Rfg Napping/Raising machine Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>FINANCIAL PACIFIC LEASING INC 3455 S 344TH WAY STE 300  FEDERAL WAY, WA, 98063</p>
2.25	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Lafer Open width compactor; Model KSA 500 Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>FINANCIAL PACIFIC LEASING INC 3455 S 344TH WAY STE 300  FEDERAL WAY, WA, 98063</p>
2.26	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equip Lease: Compacting machine mod Compctx revolution 2500 Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>DIRECT CAPITAL 155 COMMERCE WAY  PORTSMOUTH, NH, 03801</p>

Debtor Broncs, Inc.  
Name  
Case number (if known) 8:19-bk-10941-CB

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.27	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	Equip Lease: PTT200 Set making machine Lessee	CRESTMARK EQUIPMENT FINANCE 40950 WOODWARD AVE STE 201  BLOOMFIELD HILLS, MI, 48304-5127
2.28	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	Equip Lease: Textile Machine, 2 rope opening/slitting line Lessee	ASCENTIUM CAPITAL LLC 23970 HWY 59 N  HUMBLE, TX, 77339
2.29	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	Equip Lease: N 1 Superslit slitting line No 4 and accessories Lessee	AMUR EQUIPMENT FINANCE 308 N LOCUST ST STE 100 Grand Island, NE, 68801
2.30	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	Equip Lease: Sames SS-SI-T Single Jersey Machine S/N F-001137 Lessee	AMERICAN CAPITAL GROUP, INC. 23382 MILL CREEK DR STE 115  LAGUNA HILLS, CA, 92653
2.31	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract	Equip Lease: Sames SS-SI.5; Single Jersey Machine Lessee	AMERICAN CAPITAL GROUP INC 23382 MILL CREEK DR STE 115 LAGUNA HILLS, CA, 92653
2.____	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract		
2.____	State what the contract or lease is for and the nature of the debtor's interest  State the term remaining List the contract number of any government contract		

## Fill in this information to identify the case:

Debtor name Broncs, Inc.United States Bankruptcy Court for the: Central District of CaliforniaCase number (If known): 8:19-bk-10941-CB☐ Check if this is an amended filing

## Official Form 206H

## Schedule H: Codebtors

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Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

## 1. Does the debtor have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

## 2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 <u>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>FINANCIAL PACIFIC LEA</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 <u>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>ASCENTUM CAPITAL LL</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 <u>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>TECHNOLOGY FINANCE</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 <u>Codi Sheridan, Inc</u>	Codi Sheridan, Inc. 12691 Pala Drive Garden Grove, CA, 92841	<u>YELLOWSTONE CAPITA</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5 <u>WesCoast Textiles</u>	WesCoast Textiles, Inc. 12691 Pala Dr Garden Grove, CA, 92841	<u>HAPPY ROCK MERCHAN</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6 <u>Codi Sheridan, Inc</u>	Codi Sheridan, Inc. 12691 Pala Drive Garden Grove, CA, 92841	<u>CAPITAL EQUIPMENT S</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor

Broncs, Inc.  
Name

## Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.7 <u>WesCoast Textiles</u>	WesCoast Textiles, Inc. 12691 Pala Dr Garden Grove, CA, 92841	<u>HUNTINGTON TECHNOI</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8 <u>WesCoast Textiles</u>	WesCoast Textiles, Inc. 12691 Pala Dr Garden Grove, CA, 92841	<u>ASCENTIUM CAPITAL LI</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.9 <u>WesCoast Textiles</u>	WesCoast Textiles, Inc. 12691 Pala Dr Garden Grove, CA, 92841	<u>YELLOWSTONE CAPITA</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.10 <u>WesCoast Textiles</u>	WesCoast Textiles, Inc. 12691 Pala Dr Garden Grove, CA, 92841	<u>CAPITAL EQUIPMENT S</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.11 <u>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>STRADA CAPITAL CORP</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.12 <u>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>STEARNS BANK NA / EC</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.13 <u>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>KEY EQUIPMENT FINAN</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.14 <u>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>PAWNEE LEASING COR</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor

Broncs, Inc.  
Name

Main Document

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Case number (if known) 8:19-bk-10941-CB

**Additional Page if Debtor Has More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.15 Joel P Chun	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	STRADA CAPITAL CORP	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.16 Joel P Chun	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	CAPITAL EQUIPMENT S	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.17 Joel P Chun	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	HAPPY ROCK MERCHAI	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.18 Joel P Chun	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	LCA BANK CORPORATI	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.19 Joel P Chun	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	YELLOWSTONE CAPITA	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.20 Joel P Chun	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	KNIGHT CAPITAL FUND	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.____	_____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.____	_____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case and this filing:

Debtor Name Broncs, Inc.

United States Bankruptcy Court for the: Central District of California

Case number (if known): 8:19-bk-10941-CB

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 04/15/2019  
MM / DD / YYYY

  
Signature of individual signing on behalf of debtor

Printed name \_\_\_\_\_

Position or relationship to debtor \_\_\_\_\_