

Fill in this information to identify the case:

Debtor name WesCoast Textiles, Inc.
United States Bankruptcy Court for the: Central District of California
Case number (if known): 8:19-bk-10492-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 <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>1,711,659.83</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>1,711,659.83</u>

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, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>2,081,650.99</u>
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 <i>Schedule E/F</i>	\$ <u>154,494.35</u>
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 <i>Schedule E/F</i>	+\$ <u>2,492,413.72</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>4,728,559.06</u>

Fill in this information to identify the case:

Debtor name WesCoast Textiles, Inc.United States Bankruptcy Court for the: Central District of CaliforniaCase number (if known): 8:19-bk-10492-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

\$ 220.00

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

9 0 7 4

\$ 0.00

3.2. Bank of America - Checking

Checking

9 0 6 1

\$ 0.00

4. Other cash equivalents (Identify all)

4.1. _____ \$ _____

4.2. _____ \$ _____

5. Total of Part 1

\$ 220.00

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. _____ \$ _____

7.2. _____ \$ _____

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.

\$ _____

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:	1,412,372.84	-	22,497.96	= →	\$ 1,389,874.88
	face amount		doubtful or uncollectible accounts			
11b. Over 90 days old:	77,753.65	-	31,186.21	= →	\$ 46,567.44
	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.

\$ 1,436,442.32

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.

\$ _____

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WesCoast Textiles, Inc.

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Case Number (if known)

Name

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
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ _____
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
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

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. Office furniture Desks and Chairs	\$ 4,250.00	Comp Sales	\$ 722.10
40. Office fixtures	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software Software Licenses-Landware	\$ 32,000.00	_____	\$ Unknown
42. Collectibles <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.

\$ 722.10

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
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____
49. Aircraft and accessories			
49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	\$ _____	_____	\$ _____
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ _____

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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Name

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		\$ _____	_____	\$ _____
55.2		\$ _____	_____	\$ _____
55.3		\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ _____

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. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites www.wescoasttextile.com	\$ _____	_____	Unknown
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ 0.00

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 from Broncs, Inc. \$ 274,275.41

_____ \$ _____

78. Total of Part 11.

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

\$ 274,275.41

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

- ☒ No
☐ Yes

Debtor

WesCoast Textiles, Inc.

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Name

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. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 220.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 1,436,442.32	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 722.10	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 0.00	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$ 0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 274,275.41	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 1,711,659.83	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. 1,711,659.83		\$ 1,711,659.83

Fill in this information to identify the case:

Debtor name WesCoast Textiles, Inc.
United States Bankruptcy Court for the: Central District of California of _____ (State)
Case number (if known): 8:19-bk-10492-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
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 _____

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

Lien against assets\$ 1,353,988.31\$ \$275,217.51

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

2.2 Creditor's name
EMPLOYMENT DEVELOPMENT DEPT

Creditor's mailing address

BANKRUPTCY GROUP MIC 92E
PO BOX 826880, SACRAMENTO, CA 9421

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

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

Describe debtor's property that is subject to a lien

\$ 72,564.94\$ Unknown

Describe the lien

Tax 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

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

\$ 2,081,650.99

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**
HAPPY ROCK MERCHANT SOLUTIONS LLC

Describe debtor's property that is subject to a lien

Future sales agreement

\$Unknown

\$ \$1,436,442.32

Creditor's mailing address

149 WEST 36TH ST
12TH FLOOR, NEW YORK, NY 10018

Creditor's email address, if known

Date debt was incurred 3/27/2018

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 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

2.4 **Creditor's name**
INTERNAL REVENUE SERVICE

Describe debtor's property that is subject to a lien

\$655,097.74

\$ Unknown

Creditor's mailing address

PO BOX 7346
PHILADELPHIA, PA 19101-7346

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

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

Describe the lien

Tax 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

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**
YELLOWSTONE CAPITAL WEST LLC**Describe debtor's property that is subject to a lien****Creditor's mailing address**116 NASSAU ST
STE 804, NEW YORK, NY 10038

\$Unknown

\$ Unknown

Creditor's email address, if known**Date debt was incurred****Last 4 digits of account number****Describe the lien**

Loan

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes

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

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****Describe the lien****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).

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 _____

Fill in this information to identify the case:

Debtor WesCoast Textiles, Inc.

United States Bankruptcy Court for the: Central District of California

Case number 8:19-bk-10492-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
 ABARCA MARGARITO JR CASTREJON
 1918 S MARINE ST

SANTA ANA, CA, 92704

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:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Wages, Salaries, Commissions

Total claim

\$ 2,855.02

Priority amount

\$ 2,855.02

2.2 Priority creditor's name and mailing address
 AGUILAR MAGDALENO
 10070 GILBERT ST
 APT 126
 ANAHEIM, CA, 92804

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:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Wages, Salaries, Commissions

\$ 1,514.49

\$ 1,514.49

2.3 Priority creditor's name and mailing address
 ALEJO ALFREDO PALACIO
 14121 SHOEMAKER AVE

NORWALK, CA, 90806

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:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Wages, Salaries, Commissions

\$ Unknown

\$ _____

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

2.4 Priority creditor's name and mailing address

\$ 1,836.88

\$ 1,836.88

ALMANZA JOSE MARTINEZ
443 BREED ST

LOS ANGELES, CA, 90033

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)

2.5 Priority creditor's name and mailing address

\$ Unknown

\$

AQUINO ERADIO
6343 LINCOLN AVE U2

BUENA PARK, CA, 90620

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)

2.6 Priority creditor's name and mailing address

\$ Unknown

\$

AVALOS CONSTANTINO
14122 RAINTREE RD

TUSTIN, CA, 92780

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)

2.7 Priority creditor's name and mailing address

\$ Unknown

\$

AVILA GENARO
8907 HEWITT PL
APT 3
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:

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

2.⁸ Priority creditor's name and mailing address

\$ 849.56

\$ 849.56

AVILA JOSE ANTONIO CANCECO
8907 HEWITT

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

GARDEN GROVE, CA, 92844

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)

2.⁹ Priority creditor's name and mailing address

\$ Unknown

\$

BARBOZA JOSE
7611 21 ST
APT A
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:

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)

2.¹⁰ Priority creditor's name and mailing address

\$ Unknown

\$

BAUTISTA CIRILO LOPEZ
1101 ST LOUIS AVE A

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

LONG BEACH, CA, 90813

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)

2.¹¹ Priority creditor's name and mailing address

\$ Unknown

\$

BENITEZ JOSE L
8943 HEWITT PL
APT 1
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:

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. ¹² Priority creditor's name and mailing address

\$ 2,256.34

\$ 2,256.34

BORBOLLA BASILIO LINARES
7911 HOPI RD

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

STANTON, CA, 90680

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. ¹³ Priority creditor's name and mailing address

\$ Unknown

\$

CABRERA HILARION
16230 CORNUTA AVE
APT 4
BELLFLOWER, CA, 90706

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. ¹⁴ Priority creditor's name and mailing address

\$ Unknown

\$

CALIFORNIA 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 & 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. ¹⁵ Priority creditor's name and mailing address

\$ 3,400.35

\$ 3,400.35

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

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. ¹⁶ Priority creditor's name and mailing address

\$ 1,872.75

\$ 1,872.75

CAMACHO JOSE PABLO
10861 LOWDEN ST

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

STANTON, CA, 90680

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. ¹⁷ Priority creditor's name and mailing address

\$ Unknown

\$

CARBAJAL RANDY
5562 MEINHARDT RD

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

WESTMINSTER, CA, 92683

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. ¹⁸ Priority creditor's name and mailing address

\$ 1,364.65

\$ 1,364.65

CARDONA ADELSON
2209 E 11TH ST

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

LONG BEACH, CA, 90804

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. ¹⁹ Priority creditor's name and mailing address

\$ Unknown

\$

CARRASCO ELIAS
4829 ASTON AVE

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

COMMERCE, CA, 90040

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. ²⁰	<p>Priority creditor's name and mailing address</p> <p>CASTELLANOS MARTIN MARTINEZ 2012 E 7TH APT #A LONG BEACH, CA, 90804</p> <p>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) (<u>4</u>)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages, Salaries, Commissions</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>2,081.88</u></p> <p>\$ <u>2,081.88</u></p>
2. ²¹	<p>Priority creditor's name and mailing address</p> <p>CASTILLA JOSE FERNANDEZ 839 W 167TH APT 8 GARDENA, CA, 90247</p> <p>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) (<u>4</u>)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Wages, Salaries, Commissions</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>1,271.60</u></p> <p>\$ <u>1,271.60</u></p>
2. ²²	<p>Priority creditor's name and mailing address</p> <p>CASTILLO HUGO ARROYO 8611 CERRITOS AVE APT #C STANTON, CA, 90680</p> <p>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) (<u>4</u>)</p>	<p>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</p> <p>Basis for the claim: <u>Wages, Salaries, Commissions</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>Unknown</u></p> <p>\$ _____</p>
2. ²³	<p>Priority creditor's name and mailing address</p> <p>CASTLLANOS AARON 1537 PINE AVE LONG BEACH, CA, 90813</p> <p>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) (<u>4</u>)</p>	<p>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</p> <p>Basis for the claim: <u>Wages, Salaries, Commissions</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$ <u>Unknown</u></p> <p>\$ _____</p>

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. ²⁴ Priority creditor's name and mailing address

\$ 2,669.93

\$ 2,669.93

CASTRO ALEXIS
17501 GERALDINE LN
APT A
HUNTINGTON BEACH, CA, 92647

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. ²⁵ Priority creditor's name and mailing address

\$ Unknown

\$

CASTRO EDWIN FIGUEROA
233 W TILLER AVE

ANAHEIM, CA, 92802

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. ²⁶ Priority creditor's name and mailing address

\$ Unknown

\$

CASTRO LUIS OTERO
1547 GARDENA AVE

LOS ANGELES, CA, 90813

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. ²⁷ Priority creditor's name and mailing address

\$ Unknown

\$

CATALAN JORGE
1964 E 130TH ST

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

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. ²⁸ Priority creditor's name and mailing address

\$ 1,322.99

\$ 1,322.99

CHAIREZ GUSTAVO
1421 E BASSETT WAY

ANAHEIM, CA, 92805

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. ²⁹ Priority creditor's name and mailing address

\$ Unknown

\$

CONTRERAS FERNANDO
10270 SENTRY DR 2

STANTON, CA, 90680

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. ³⁰ Priority creditor's name and mailing address

\$ Unknown

\$

CRUZ CARMELO DILLANES
8361 15TH ST 16

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. ³¹ Priority creditor's name and mailing address

\$ Unknown

\$

CRUZ VICTOR MARTINEZ
1845 PINE AVE 1

LONG BEACH, CA, 90806

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. ³² Priority creditor's name and mailing address

\$ 1,548.38

\$ 1,548.38

CURIEL FRANCISCO SANCHEZ
2115 W BALL RD
APT B
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. ³³ Priority creditor's name and mailing address

\$ 4,346.52

\$ 4,346.52

DELGADO SEGUNDO
6204 HOOD AVE

HUNTINGTON PARK, CA, 90255

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. ³⁴ Priority creditor's name and mailing address

\$ 1,620.00

\$ 1,620.00

DEPT OF INDUSTRIAL RELATIONS
320 W 4TH ST STE 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

2. ³⁵ Priority creditor's name and mailing address

\$ 2,595.32

\$ 2,595.32

DIAZ CORNELIO PEREZ
1724 W BALL RD
APT2
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. ³⁶ **Priority creditor's name and mailing address**

\$ Unknown

\$

ESPANA ERNESTO
4840 E ILLINOIS AVE

FRESNO, CA, 93727

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. ³⁷ **Priority creditor's name and mailing address**

\$ 930.39

\$ 930.39

ESPINO JUAN JOSE RAMIREZ
7281 LAZA 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

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. ³⁸ **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

Last 4 digits of account number

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

Basis for the claim:

Taxes & Other Government Units

Is the claim subject to offset?

- ☒ No
☐ Yes

2. ³⁹ **Priority creditor's name and mailing address**

\$ Unknown

\$

GAMA JUAN MANUEL SOTELO
825 N GARFIELD ST

SANTA ANA, CA, 92701

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. ⁴⁰ Priority creditor's name and mailing address

\$ Unknown

\$

GARCIA ALEJANDRO
1052 NORMAN CT

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

LONG BEACH, CA, 90813

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. ⁴¹ Priority creditor's name and mailing address

\$ 1,564.91

\$ 1,564.91

GARCIA FRANCISCO LOPEZ
1421 E 15TH ST A

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

LONG BEACH, CA, 90813

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. ⁴² Priority creditor's name and mailing address

\$ 2,030.43

\$ 2,030.43

GARCIA GABRIEL LOPEZ
1020 E 12TH ST
APT 7
LONG BEACH, CA, 90813

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. ⁴³ Priority creditor's name and mailing address

\$ 1,359.19

\$ 1,359.19

GARCIA MAURICIO LOPEZ
1526 SHERMAN PL

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

LONG BEACH, CA, 90804

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. ⁴⁴ Priority creditor's name and mailing address

\$ Unknown

\$

GARCIA PEDRO
1025 GAVIOTA AVE

LONG BEACH, CA, 90813

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. ⁴⁵ Priority creditor's name and mailing address

\$ Unknown

\$

GARZON MIGUEL A
1719 SHERMAN PL #7

LONG BEACH, CA, 90804

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. ⁴⁶ Priority creditor's name and mailing address

\$ Unknown

\$

GIRON VICTOR MANUEL
1250 E LA PALMA AVE 303

ANAHEIM, CA, 92805

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. ⁴⁷ Priority creditor's name and mailing address

\$ Unknown

\$

GOMEZ BRYAN
13862 EDWARDS ST
APT A
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:

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. ⁴⁸ Priority creditor's name and mailing address

\$517.95

\$517.95

GONZALES ENRIQUE
1495 PETERSON AVE 5

LONG BEACH, CA, 90813

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. ⁴⁹ Priority creditor's name and mailing address

\$1,966.32

\$1,966.32

GONZALEZ CARLOS
6941 CAMPUS DR
APT A
BUENA PARK, CA, 90621

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. ⁵⁰ Priority creditor's name and mailing address

\$2,343.98

\$2,343.98

HERNANDEZ ELVA
21615 DOLORES ST

CARSON, CA, 90745

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. ⁵¹ Priority creditor's name and mailing address

\$ Unknown

\$

HERNANDEZ FELIX LOPEZ
1040 HOFFMAN #202

LONG BEACH, CA, 90813

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. ⁵² Priority creditor's name and mailing address

\$ 2,592.71

\$ 2,592.71

HERNANDEZ JUAN
1150 GLADYS AVE 4

LONG BEACH, CA, 90804

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. ⁵³ Priority creditor's name and mailing address

\$ 680.34

\$ 680.34

HERNANDEZ LUIS MORALES
239 W 111TH PL

LOS ANGELES, CA, 90061

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. ⁵⁴ Priority creditor's name and mailing address

\$ 2,269.33

\$ 2,269.33

HERNANDEZ MELZAR G LEMUS
1001 N VANNESS

APT #C
SANTA ANA, CA, 92701

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. ⁵⁵ Priority creditor's name and mailing address

\$ 2,071.55

\$ 2,071.55

HERNANDEZ RAFAEL
1747 CERRITOS AVE

APT 8
LONG BEACH, CA, 90813

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. ⁵⁶ Priority creditor's name and mailing address

\$ Unknown

\$

HERNANDEZ ROBERTO
2130 W CRESCENT AVE
APT #2165
ANAHEIM, CA, 92801

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. ⁵⁷ Priority creditor's name and mailing address

\$ Unknown

\$

HERNANDEZ SALVADOR
1125 JUNIPERO AVE
APT 1
LONG BEACH, CA, 90804

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. ⁵⁸ Priority creditor's name and mailing address

\$ 1,470.60

\$ 1,470.60

HERNANDEZ SERVERINO H
1116 NORMAN CT
APT B
LONG BEACH, CA, 90813

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. ⁵⁹ Priority creditor's name and mailing address

\$ 1,941.94

\$ 1,941.94

HERRERA J JESUS FLORES
7375 9TH ST
APT # 234
BUENA PARK, CA, 90621

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. ⁶⁰ Priority creditor's name and mailing address

\$ Unknown

\$

HERRERA PABLO JR
2130 W CRESCENT AVE
APT #2165
ANAHEIM, CA, 92801

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. ⁶¹ Priority creditor's name and mailing address

\$ Unknown

\$

BANEZ JOSE GARCIA
1027 E 11TH
APT#B
LONGBEACH, CA, 90813

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. ⁶² Priority creditor's name and mailing address

\$ 2,206.62

\$ 2,206.62

KIM KOOK JIN
16319 GRIDLEY RD

NORWALK, CA, 90650

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. ⁶³ Priority creditor's name and mailing address

\$ 5,487.68

\$ 5,487.68

KIM TAE OH
1584 AVENIDA SELVA

FULLERTON, CA, 92833

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. ⁶⁴ Priority creditor's name and mailing address

LANDA ADOLFO
1319 E WILSHIRE AVE
APT J
FULLERTON, CA, 92831

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

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. ⁶⁵ Priority creditor's name and mailing address

LIMON GENOBEBO
8041 MONACO #61

STANTON, CA, 90680

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 1,818.54

\$ 1,818.54

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. ⁶⁶ Priority creditor's name and mailing address

LINARES ARMANDO ALFONSO SANCHEZ
10250 BEACH BLVD
APT 202
STANTON, CA, 90680

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 2,493.95

\$ 2,493.95

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. ⁶⁷ Priority creditor's name and mailing address

LOPEZ ADRIAN
1248 MAHANNA AVE
APT 4
LONG BEACH, CA, 90813

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

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. ⁶⁸ Priority creditor's name and mailing address

\$ Unknown

\$

LOPEZ ANTONIO MENDEZ
1550 GARDENA AVE

LONG BEACH, CA, 90813

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. ⁶⁹ Priority creditor's name and mailing address

\$ Unknown

\$

LOPEZ FELICIANO
1147 MAHANNA
APT D
LONG BEACH, CA, 90813

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. ⁷⁰ Priority creditor's name and mailing address

\$ Unknown

\$

LOPEZ FELIPE P
816 WALNUT AVE

LONG BEACH, CA, 90813

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. ⁷¹ Priority creditor's name and mailing address

\$ Unknown

\$

LOPEZ JORGE
12980 CT ST 62

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)

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. ⁷² Priority creditor's name and mailing address

\$ 2,474.45

\$ 2,474.45

LOPEZ JUAN MANUEL GARCIA
1020 ORANGE AVE A LONG

BEACH, CA, 90813

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. ⁷³ Priority creditor's name and mailing address

\$ 2,004.16

\$ 2,004.16

LOPEZ LEONARDO CORTEZ
1102 GARDENIA AVE
APT F
LONG BEACH, CA, 90813

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. ⁷⁴ Priority creditor's name and mailing address

\$ Unknown

\$

LOPEZ MARTIN GARCIA
1495 PETERSON AVE #17

LONG BEACH, CA, 90813

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. ⁷⁵ Priority creditor's name and mailing address

\$ Unknown

\$

LOPEZ MIGUEL MELGAR
261 NEVADA ST 9

LONG BEACH, CA, 90806

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. ⁷⁶ Priority creditor's name and mailing address

\$ 1,833.55

\$ 1,833.55

LOPEZ RAFAEL GARCIA
1495 PETERSON AVE 17

LONG BEACH, CA, 90813

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. ⁷⁷ Priority creditor's name and mailing address

\$ Unknown

\$

LOPEZ RODRIGO
1330 GAVIOTA AVE

LONG BEACH, CA, 90813

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. ⁷⁸ Priority creditor's name and mailing address

\$ Unknown

\$

MALDONADO EIVI J
11811 SANTA ROSALIA

STANTON, CA, 90680

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. ⁷⁹ Priority creditor's name and mailing address

\$ Unknown

\$

MARCIAL JOSE
920 FAIR WAY

SANTA ANA, CA, 92703

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. ⁸⁰ Priority creditor's name and mailing address

\$ Unknown

\$

MARTINEZ ALFONSO
2215 EARL AVE
APT #1
LONG BEACH, CA, 90806

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. ⁸¹ Priority creditor's name and mailing address

\$ 294.59

\$ 294.59

MARTINEZ FELICIANO
2215 EARL AVE 1

LONG BEACH, CA, 90806

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. ⁸² Priority creditor's name and mailing address

\$ 1,515.05

\$ 1,515.05

MARTINEZ IGNACIO
1116 1/2 GARDENIA AVE

LONG BEACH, CA, 90813

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. ⁸³ Priority creditor's name and mailing address

\$ 2,495.61

\$ 2,495.61

MARTINEZ JUAN C SANCHEZ
8273 CERRITOS AVE

STANTON, CA, 90680

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. ⁸⁴ Priority creditor's name and mailing address

\$312.42

\$312.42

MARTINEZ MARIANO
4402 HARDING AVE

LOS ANGELES, CA, 90066

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. ⁸⁵ Priority creditor's name and mailing address

\$ Unknown

\$

MARTINEZ MOISES AEDO
1135 GLADYS AVE

LONG BEACH, CA, 90804

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. ⁸⁶ Priority creditor's name and mailing address

\$ Unknown

\$

MARTINEZ NESTOR MEDINA
427 E 24TH ST 1

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. ⁸⁷ Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$2,967.15

\$2,967.15

MARTINEZ OMAR LOPEZ
1771 GAVIOTA AVE
APT #2
LONG BEACH, CA, 90813

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. ⁸⁸ Priority creditor's name and mailing address

\$ 1,880.81

\$ 1,880.81

MARTINEZ OSCAR
1116 12 GARDENIA AVE 12

LONG BEACH, 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:

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. ⁸⁹ Priority creditor's name and mailing address

\$ Unknown

\$

MARTINEZ ULBERTO ROLANDO
821 E PACIFIC COAST HWY B

LONG BEACH, CA, 90806

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. ⁹⁰ Priority creditor's name and mailing address

\$ Unknown

\$

MELGAR AVELINO LOPEZ
1137 HOFFMAN AVE 2

LONG BEACH, CA, 90813

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. ⁹¹ Priority creditor's name and mailing address

\$ 2,018.33

\$ 2,018.33

MENA JOSE MARTIN
13064 MAGNOLIA ST

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:

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. ⁹² Priority creditor's name and mailing address

\$ Unknown

\$

MENDEZ RAMIRO GARCIA
1027 E 11TH ST
APT B
LONGBEACH, CA, 90813

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. ⁹³ Priority creditor's name and mailing address

\$ Unknown

\$

MERINO BRUNO AVILES
8100 ORANGEWOOD AVE APT #8

STANTON, CA, 90680

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. ⁹⁴ Priority creditor's name and mailing address

\$ 2,094.22

\$ 2,094.22

MILLAN GUADALUPE
11201 EUCLID ST
APT 24
GARDEN GROVE, CA, 92890

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. ⁹⁵ Priority creditor's name and mailing address

\$ 637.74

\$ 637.74

MORALES HAROL
3096 CLUB HOUSE CIR

COSTA MESA, CA, 90626

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. ⁹⁶ Priority creditor's name and mailing address

\$ 3,498.56

\$ 3,498.56

ORTIZ SANTIAGO
1694 E 110TH 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:

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. ⁹⁷ Priority creditor's name and mailing address

\$ 1,755.00

\$ 1,755.00

PACHECO PEDRO TELLEZ
10250 BEACH BLVD #244

STANTON, CA, 90680

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. ⁹⁸ Priority creditor's name and mailing address

\$ Unknown

\$

PALACIOS CESAR ARTURO
457 S PARKER ST

ORANGE, CA, 92868

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. ⁹⁹ Priority creditor's name and mailing address

\$ 1,588.49

\$ 1,588.49

PAZ JULIO C
837 W 167TH PL
APT 5
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:

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. ¹⁰⁰ Priority creditor's name and mailing address

\$ Unknown

\$

PEREZ JAVIER HERNANDEZ
1116 NORMAN CT
APT #B
LONG BEACH, CA, 90813

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. ¹⁰¹ Priority creditor's name and mailing address

\$ Unknown

\$

PEREZ OLEGARIO MARTINEZ
12803 BELHAUEN 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. ¹⁰² Priority creditor's name and mailing address

\$ Unknown

\$

PEREZ VICTORIANO
904 ALAMITOS AVE
APT #4
LONG BEACH, CA, 90813

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. ¹⁰³ Priority creditor's name and mailing address

As of the petition filing date, the claim is: \$ 2,544.83

\$ 2,544.83

PHU VAN
2177 W CRESTWOOD LN

ANAHEIM, CA, 92804

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. ¹⁰⁴ Priority creditor's name and mailing address

\$ Unknown

\$

QUINTANILLA ANGEL
14121 SHOEMAKER AVE
APT #65
NORWALK, CA, 90650

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. ¹⁰⁵ Priority creditor's name and mailing address

\$ 2,218.44

\$ 2,218.44

RAMIREZ JAVIER GARCIA
8041 MONACO NO 61

STATON, CA, 90680

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. ¹⁰⁶ Priority creditor's name and mailing address

\$ 685.13

\$ 685.13

RANGEL GILBERTO
221 W VERNON AVE

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. ¹⁰⁷ Priority creditor's name and mailing address

\$ Unknown

\$

REYES DIEGO
7831 DAYMOR AVE

STANTON, CA, 90680

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. ¹⁰⁸ Priority creditor's name and mailing address

\$ 2,797.79

\$ 2,797.79

REYES MAXIMINO ESQUIVEL
11201 EUCLID ST
APT 24
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. ¹⁰⁹ Priority creditor's name and mailing address

\$ Unknown

\$

RIOS AARON
1266 57 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. ¹¹⁰ Priority creditor's name and mailing address

\$ 3,014.74

\$ 3,014.74

RIVERA BERTO AGUILAR
1606 S MINTER ST

SANTA ANA, CA, 92707

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. ¹¹¹ Priority creditor's name and mailing address

\$ Unknown

\$

RIVERA FREDDY ULISSE SALDIVAR
1114 N BEWLEY ST 11

STANTON, CA, 92703

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. ¹¹² Priority creditor's name and mailing address

\$ 2,019.45

\$ 2,019.45

RIVERA JUAN
3127 E 57TH ST

HUNTINGTON, CA, 90205

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. ¹¹³ Priority creditor's name and mailing address

\$ 2,886.84

\$ 2,886.84

RIVERA MARCO ANTONIO CATALAN
1606 S MINTER ST

SANTA ANA, CA, 92707

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. ¹¹⁴ Priority creditor's name and mailing address

\$ Unknown

\$

RIVERA MARTIN
9105 CERRITOS AVE 5

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:

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. ¹¹⁵ Priority creditor's name and mailing address

\$ 1,423.75

\$ 1,423.75

ROBLERO DELVER PEREZ
1818 W SUMAC LN

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:

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. ¹¹⁶ Priority creditor's name and mailing address

\$ 1,391.88

\$ 1,391.88

RODRIGUEZ CARLOS
8114 FILLMORE DR

STANTON, CA, 90680

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. ¹¹⁷ Priority creditor's name and mailing address

\$ 2,230.57

\$ 2,230.57

ROMERO JAIME GOMEZ
7642 PACIFIC BLVD

HUNGTINGTON PARK, CA, 90255

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. ¹¹⁸ Priority creditor's name and mailing address

\$ Unknown

\$

RUIZ FRANCISCO GARCIA
2308 E 17TH ST

LONG BEACH, CA, 90804

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. ¹¹⁹ Priority creditor's name and mailing address

\$ Unknown

\$

SALDANA JERMAN RAMIREZ
12654 BUARO ST
APT#C
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:

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. ¹²⁰ Priority creditor's name and mailing address

\$ Unknown

\$

SALGADO FRANCISCO
15261 VAN BUREN ST
APT 6
MIDWAY CITY, CA, 92655-1667

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. ¹²¹ Priority creditor's name and mailing address

\$ Unknown

\$

SALINAS ISMAEL LOPEZ
1137 GARDENIA
APT #12
LONG BEACH, CA, 90813

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. ¹²² Priority creditor's name and mailing address

\$ 930.80

\$

SANCHEZ JUAN VELEZ
9519 TRUBA AVE
APT D
SOUTH GATE, CA, 90280

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. ¹²³ Priority creditor's name and mailing address

\$ 2,465.42

\$ 2,465.42

SANCHEZ MARIO
1013 E 12TH ST
APT#7
LONG BEACH, CA, 90813

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. ¹²⁴ Priority creditor's name and mailing address

\$ Unknown

\$

SANTOS JOSE ANGEL
8719 3/4 ALONDRA BLVD

PARAMOUNT, CA, 90723

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. ¹²⁵ Priority creditor's name and mailing address

\$ 1,875.87

\$ 1,875.87

SANTOS URIEL VENCES
1262 E 27ST

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. ¹²⁶ Priority creditor's name and mailing address

\$ Unknown

\$

SAUCEDO JOSE
1342 PETERSON AVE 4

LONG BEACH, CA, 90813

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. ¹²⁷ Priority creditor's name and mailing address

\$ Unknown

\$

SOCH RAUL BALDEMAR MUTZ
10321 ANZAC AVE

LOS ANGELES, CA, 90002

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. ¹²⁸ Priority creditor's name and mailing address

\$ 4,907.56

\$ 4,907.56

SOLIS RAFAEL
7281 PLZ ST

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

WESTMINSTER, CA, 92683

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. ¹²⁹ Priority creditor's name and mailing address

\$ 2,879.86

\$ 2,879.86

SORIANO ROBERTO DE LA
1771 GAVIOTA AVE 2

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

LONG BEACH, CA, 90813

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. ¹³⁰ Priority creditor's name and mailing address

\$ Unknown

\$

TERRONES MANUEL
10321 ANZAC AVE

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

LOS ANGELES, CA, 90002

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. ¹³¹ Priority creditor's name and mailing address

\$ 5,536.51

\$ 5,536.51

TOMAS HUGO OTONIEL
10251 FERN AVE

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

STANTON, CA, 90680

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. ¹³²	Priority creditor's name and mailing address TORRES CRUZ RIVERA 2217 WEST 7 ST SANTA ANA, CA, 92703 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: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages, Salaries, Commissions</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,479.50 \$ 2,479.50
2. ¹³³	Priority creditor's name and mailing address TORRES SALDIVAR LINO 2217 W ST 7 SANTA ANA, CA, 92703 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: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages, Salaries, Commissions</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 793.43 \$ 793.43
2. ¹³⁴	Priority creditor's name and mailing address TREJO NICASIO PERALES 8971 HEWITT PL APT #4 GARDEN GROVE, CA, 92844 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: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Wages, Salaries, Commissions</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,231.05 \$ 2,231.05
2. ¹³⁵	Priority creditor's name and mailing address URQUIZA VALENTIN 7751 LAURELTON AVE GARDEN GROVE, CA, 92841 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: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Wages, Salaries, Commissions</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown \$

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. ¹³⁶ Priority creditor's name and mailing address

\$ 1,604.72

\$ 1,604.72

VALENCIA JOSE LUIS ESTRADA ROSA
2331 W CUBBON

SANTA ANA, 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. ¹³⁷ Priority creditor's name and mailing address

\$ Unknown

\$

VARELA FRANCISCO
1040 HOFFMAT
APT # 206
LONG BEACH, CA, 90813

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. ¹³⁸ Priority creditor's name and mailing address

\$ Unknown

\$

VARELA VALENTIN LOPEZ
1336 WALNUT AVE
APT 1
LONG BEACH, CA, 90813

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. ¹³⁹ Priority creditor's name and mailing address

\$ Unknown

\$

VARGAS JOVANI
1485 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:

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. ¹⁴⁰ Priority creditor's name and mailing address

\$ Unknown

\$

VEGA ELIAS LOPEZ
418 W ORANGEWOOD
APT B
ANAHEIM, CA, 92802

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. ¹⁴¹ Priority creditor's name and mailing address

\$ Unknown

\$

VELASCO ABELARDO
1046 E 7TH ST APT 2

LONG BEACH, CA, 90813

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. ¹⁴² Priority creditor's name and mailing address

\$ 2,077.96

\$ 2,077.96

VELASCO ELOY
1335 WALNUT AVE

LONG BEACH, CA, 90813

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. ¹⁴³ Priority creditor's name and mailing address

\$ Unknown

\$

VELASCO RAUL EDEN
226 W 110 ST

LOS ANGELES, CA, 90061

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. ¹⁴⁴	Priority creditor's name and mailing address	\$ 1,921.67	\$ 1,921.67
	VELAZQUEZ FRANCISCO F 18612 CASABA RD B ADELANTO, CA, 92301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> 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)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2. ¹⁴⁵	Priority creditor's name and mailing address	\$ 2,608.71	\$ 2,608.71
	VELAZQUEZ MARTIN V 11201 EUCLID ST APT24 GARDEN GROVE, CA, 92840-1422	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> 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)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2. ¹⁴⁶	Priority creditor's name and mailing address	\$ 2,266.49	\$ 2,266.49
	VENCES ADRIAN 1262 E 27TH ST LOS ANGELES, CA, 90011	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> 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)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2. ¹⁴⁷	Priority creditor's name and mailing address	\$ Unknown	\$
	VIERA SERGIO STENGLY 1818 W SUMAC LN APT #2B ANAHEIM, CA, 92804	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	
	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)	<input checked="" type="checkbox"/> No <input type="checkbox"/> 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. ¹⁴⁸ Priority creditor's name and mailing address

\$ Unknown

\$

VILLA EDGAR
1212 N TAMARIND

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:

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. ¹⁴⁹ Priority creditor's name and mailing address

\$ 4,178.16

\$ 4,178.16

VILLALPANDO FRANCISCO
11078 KIBBING CIR

STANTON, CA, 90680

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. ¹⁵⁰ Priority creditor's name and mailing address

\$ Unknown

\$

WOODWARD PATTON
628 LANCELOT DR

FLORENCE, SC, 29505

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. ¹⁵¹ Priority creditor's name and mailing address

\$ Unknown

\$

XOCUA ISSAC AQUINO
3514 W MUNGALL DR
APT #4
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:

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. ¹⁵² Priority creditor's name and mailing address

\$ Unknown

\$

ZARATE JAIME MARTINEZ
8041 MONACO

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

STANTON, CA, 90680

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. 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
3.1	Nonpriority creditor's name and mailing address A 1 OIL RECYCLING LLC 8391 BEVERLY BLVD #579 LOS ANGELES, CA, 90048 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown
3.2	Nonpriority creditor's name and mailing address A PLUS GRAPHICS 9210 ALONDRA BLVD UNIT C BELLFLOWER, CA, 90706 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 240.90
3.3	Nonpriority creditor's name and mailing address A-TECH HEATING AND COOLING 7799 VALLEY VIEW ST #E 204 LA PALMA, CA, 90623 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 700.00
3.4	Nonpriority creditor's name and mailing address A2 AMERICA INC 14946 SHOEMAKER AVE G SANTA FE SPRINGS, CA, 90670 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 5,000.00
3.5	Nonpriority creditor's name and mailing address ADVANCED COMPRESSOR SVC 10711 RUOFF AVE WHITTIER, CA, 90604 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown
3.6	Nonpriority creditor's name and mailing address AIR CLEAR 2440 OLDFIELD PT RD ELKTON, MD, 21921 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 71,500.00

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

AIR QUALITY CONSULTANTS
5881 ENGINEER DR

HUNTINGTON, CA, 92649

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 _____

3.8 Nonpriority creditor's name and mailing address

AM COPIER
3418 W OLYMPIC BLVD

LOS ANGELES, CA, 90019

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 438.00

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 _____

3.9 Nonpriority creditor's name and mailing address

AMERICOLOR
10101 SHOEMAKER AVE

SANTA FE SPRINGS, CA, 90670

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 84,985.36

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

AMERITEX
13610 IMPERIAL HWY
STE #2
SANTA FE SPRINGS, CA, 90670

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 46,899.75

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 _____

3.11 Nonpriority creditor's name and mailing address

AMG TIMEMASTERSCOM
3235 N SAN FERNANDO RD #1D

LOS ANGELES, CA, 90065

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

3. ¹² Nonpriority creditor's name and mailing address

ANYTIME LEYVA TOWING LLC
229 E REDONDO BEACH BLVD

GARDENA, CA, 90248

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 225.00

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. ¹³ Nonpriority creditor's name and mailing address

APOLLO TECHNOLOGIES INC
31441 SANTA MARGARITA PKWY A219

RANCHO SANTA MARGARITA, CA, 92688

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,460.00

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. ¹⁴ Nonpriority creditor's name and mailing address

ARCHROMA US INC
32290 COLLECTION CTR DR

CHICAGO, IL, 90693

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,357.42

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. ¹⁵ Nonpriority creditor's name and mailing address

AVCOGAS
253 N BERRY ST

BREA, CA, 92821

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,451.46

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. ¹⁶ 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

\$ 242.20

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. ¹⁷ Nonpriority creditor's name and mailing address

BALCACERES BROS TOWING INC
12824 ROSECRANS AVE

NORWALK, CA, 90650

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. ¹⁸ 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

\$ 0.00

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. ¹⁹ Nonpriority creditor's name and mailing address

BELL PIPE AND SUPPLY CO
215 E BALL RD

ANAHEIM, CA, 92805

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. ²⁰ Nonpriority creditor's name and mailing address

BELLFLOWER ELECTRIC
10030 ARTESIA PL

BELLFLOWER, CA, 90706

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 6,036.80

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. ²¹ Nonpriority creditor's name and mailing address

BENCHMARK DEVICES
1263 BENT TREE LN

WATKINSVILLE, GA, 30677

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

3. ²² Nonpriority creditor's name and mailing address

BETA SECURITY SYSTEM
9537 GIDLEY ST

TEMPLE CITY, CA, 91780-4214

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 5,312.25

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. ²³ Nonpriority creditor's name and mailing address

BPS SUPPLY GROUP
215 E BALL RD

ANAHEIM, CA, 92805-6394

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 12.82

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. ²⁴ Nonpriority creditor's name and mailing address

BRENTAG PACIFIC INC
10747 PATTERSON PLACE

SANTA FE SPRINGS, CA, 90670

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 189,054.84

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. ²⁵ Nonpriority creditor's name and mailing address

C AND V MACHINE SHOP
10204 ATLANTIC AVE

SOUTH GATE, CA, 90280

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 720.00

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. ²⁶ Nonpriority creditor's name and mailing address

CAL STEAM CO
1142 S DIAMOND BAR BLVD 169

DIAMOND BAR, CA, 91765

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

3. ²⁷	Nonpriority creditor's name and mailing address CALIFORNIA BOILER 5331 BUSINESS DR HUNTINGTON BEACH, CA, 92649	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 Basis for the claim: Suppliers or Vendors	\$ 920.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²⁸	Nonpriority creditor's name and mailing address CAMERON WELDING PO BOX 266 STANTON, CA, 90680	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 Basis for the claim: Suppliers or Vendors	\$ 3,638.47
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ²⁹	Nonpriority creditor's name and mailing address CARGILL INC 15407 MCGINTY RD WEST WAYZATA, MN, 55391	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 Basis for the claim: Suppliers or Vendors	\$ 80,590.81
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³⁰	Nonpriority creditor's name and mailing address CDTA K9 CA PROTECTION SVC 2650 S MYRTLE AVE B3 MONROVIA, CA, 91016	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 Basis for the claim: Suppliers or Vendors	\$ 6,957.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3. ³¹	Nonpriority creditor's name and mailing address CHUN JOEL P 12691 PALA DR GARDEN GROVE, CA, 92841	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 Basis for the claim:	\$ 301,334.61
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <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. ³² Nonpriority creditor's name and mailing address

CNC ELECTRIC SUPPLY
7690 LAMPSON AVE

GARDEN GROVE, CA, 92841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,402.05

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. ³³ Nonpriority creditor's name and mailing address

CODI SHERIDAN, INC.
12691 PALA DR

GARDEN GROVE, CA, 92841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 141,612.38

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. ³⁴ Nonpriority creditor's name and mailing address

COLORWAY INDUSTRY LLC
15352 TEXACO AVE

PARAMOUNT, CA, 90723

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 4,553.01

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. ³⁵ Nonpriority creditor's name and mailing address

CORE-ROSION
3300 E 19TH ST

SIGNAL HILL, CA, 90755

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,340.25

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. ³⁶ Nonpriority creditor's name and mailing address

COUNTY OF ORANGE
PO BOX 4515

SANTA ANA, CA, 92702-4515

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

3. ³⁷ Nonpriority creditor's name and mailing address

COURT ORDERED DEBT COLLECTIONS
PO BOX 1328

RANCHO CORDOVA, CA, 95741-328

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. ³⁸ Nonpriority creditor's name and mailing address

COURTESY FIRE EXTINGUISHER SVC
12781 WESTERN AVE
STE#B
GARDEN GROVE, CA, 92841

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. ³⁹ Nonpriority creditor's name and mailing address

CPM CORP
1104 S SANTA FE AVE
COMPTON, CA, 90221

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,182.95

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. ⁴⁰ Nonpriority creditor's name and mailing address

CROSS MAX DESIGN AND PRINT CO
22610 MAPLE AVE 1
TORRANCE, CA, 90505

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,394.20

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. ⁴¹ Nonpriority creditor's name and mailing address

D AND A CUSTOMS SVC INC
152 W WALNUT ST
STE 260
GARDENA, CA, 90248

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,049.94

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. ⁴² Nonpriority creditor's name and mailing address DATA COLOR INC 5 PRINCESS RD LAWRENCEVILLE, NJ, 08648 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 20,558.29
3. ⁴³ Nonpriority creditor's name and mailing address DIVERSITY LAW GROUP 515 S FIGUEROA ST STE 1250 LOS ANGELES, CA, 90071 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 16,589.87
3. ⁴⁴ Nonpriority creditor's name and mailing address DYECHEM INDUSTRY INC 14733 1/2 GARFIELD AVE PARAMOUNT, CA, 90723 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 137,208.07
3. ⁴⁵ Nonpriority creditor's name and mailing address DYSTAR LP 9844-A SOUTHERN PINE BLVD CHARLOTTE, NC, 28273 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
3. ⁴⁶ Nonpriority creditor's name and mailing address EHWWA GLOTECH 17605 FABRICA WAY STE G CERRITOS, CA, 90703 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 226.41

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. ⁴⁷ Nonpriority creditor's name and mailing addressEQUIPMENT DIRECT INC
PO BOX 670

YORBA LINDA, CA, 92885

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. ⁴⁸ Nonpriority creditor's name and mailing addressESCOBAR AURELIO
ATTN 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. ⁴⁹ Nonpriority creditor's name and mailing addressESCOBAR AURELIO
ATTN 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 #30-2018-009791111

Is the claim subject to offset?

- ☒ No
☐ Yes

Date or dates debt was incurred _____

Last 4 digits of account number _____

3. ⁵⁰ Nonpriority creditor's name and mailing addressFASTENAL CO
7052 ORANGEWOOD
UNIT A-10
GARDEN GROVE, CA, 92841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 972.12

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. ⁵¹ Nonpriority creditor's name and mailing addressFITECH INC
2400 PARI WAY

MIDLOTHIAN, VA, 23112

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 87,811.50

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. ⁵² Nonpriority creditor's name and mailing address

G AND M GENERAL MAINTENANCE
6665 LONG BEACH BLVD #G26

LONG BEACH, CA, 90805

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. ⁵³ Nonpriority creditor's name and mailing address

GOLD COAST ENVIRONMENTAL
1868 PALMA DR 1

VENTURA, CA, 92841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,389.00

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. ⁵⁴ Nonpriority creditor's name and mailing address

GOOD PLUMBING SUPPLY
12802 KNOTT ST

GARDEN GROVE, CA, 92841

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 195.68

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. ⁵⁵ Nonpriority creditor's name and mailing address

GOYO'S CHECK CASHING
3598 E IMPERIAL HWY

LYNWOOD, CA, 90262

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. ⁵⁶ Nonpriority creditor's name and mailing address

HACH COMPANY
PO Box 389

Loveland, CO, 80539

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 118.99

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. ⁵⁷ Nonpriority creditor's name and mailing address

HIGH TECH TEXTILES INC
3517 E 15TH ST

LOS ANGELES, CA, 90023

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 600.00

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. ⁵⁸ Nonpriority creditor's name and mailing address

HILLCO FASTNER WAREHOUSE
7522 PARK AVE

GARDEN GROVE, CA, 92841

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. ⁵⁹ Nonpriority creditor's name and mailing address

HWASEUNG
3660 WILSHIRE BLVD
STE #325
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. ⁶⁰ Nonpriority creditor's name and mailing address

IMPERIAL STATIONS
8221 GARDEN GROVE BLVD

GARDEN GROVE, CA, 92844

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. ⁶¹ 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:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 21,000.00

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. ⁶²	Nonpriority creditor's name and mailing address ITM LTD SOUTH PO BOX 270 HIGH POINT, NC, 27261-0270	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,000.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁶³	Nonpriority creditor's name and mailing address JAKING 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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁶⁴	Nonpriority creditor's name and mailing address JK BIOSCIENCE INC 1926 E GLADWICK ST RANCHO DOMINGUEZ, CA, 90220	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,125.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁶⁵	Nonpriority creditor's name and mailing address JOHN LISEE PUPS INC PO BOX 2190 BELL GARDENS, CA, 90202	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 369.46
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁶⁶	Nonpriority creditor's name and mailing address KOMAR ALLIANCE 6900 WASHINGTON BLVD MONTEBELLO, CA, 90640	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,685.38
	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. ⁶⁷	Nonpriority creditor's name and mailing address LA SUPPLY CO LLC 13700 E ROSECRANS AVE SANTA FE SPRINGS, CA, 90670	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 385,147.40
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁶⁸	Nonpriority creditor's name and mailing address LUBCON TURMO LUBRICATION INC 5460 33RD ST SE GRAND RAPIDS, MI, 49512	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁶⁹	Nonpriority creditor's name and mailing address LUCERO TIMOTEO 1820 1/2 63RD ST LOS ANGELES, CA, 90001	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,008.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁷⁰	Nonpriority creditor's name and mailing address M AND K METAL CO 14400 S FIGUEROA ST GARDENA, CA, 90248	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 5,968.60
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ⁷¹	Nonpriority creditor's name and mailing address MAMMIS MARKET 1429 CHERRY AVE LONG BEACH, CA, 90813	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
	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. ⁷² Nonpriority creditor's name and mailing address

MCMaster-CARR
PO BOX 7690

CHICAGO, IL, 60680-7690

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁷³ Nonpriority creditor's name and mailing address

MEASUREMENT CONTROL SYSTEM
1331 S LYON ST

SANTA ANA, CA, 90007

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 18,109.23

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁷⁴ Nonpriority creditor's name and mailing address

MROSUPPLYCOM
2915 E WASHINGTON BLVD

LOS ANGELES, CA, 90023

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 412.41

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁷⁵ Nonpriority creditor's name and mailing address

NEMAN BROTHERS
1525 S BROADWAY

LOS ANGELES, CA, 90015

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁷⁶ Nonpriority creditor's name and mailing address

ONE STOP FORKLIFT PARTS INC
954 E GLADWICK ST

RANCHO DOMINGUEZ, CA, 90220

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ 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. ⁷⁷ Nonpriority creditor's name and mailing address

OTA AMERICA INC
16001 MANNING WAY

CERRITOS, CA, 90703

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. ⁷⁸ Nonpriority creditor's name and mailing address

OTI RIGGING
22815 MADRONA AVE

TORRANCE, CA, 90505

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. ⁷⁹ Nonpriority creditor's name and mailing address

PACIFIC COAST PROPANE LLC
PO BOX 0427

RIALTO, CA, 92377-0437

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,123.16

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. ⁸⁰ Nonpriority creditor's name and mailing address

PACIFIC SOURCING GROUP
5717 FERGUSON DR

COMMERCE, CA, 90022

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. ⁸¹ Nonpriority creditor's name and mailing address

PACIFICA CHEMICAL INC
935 E ARTESIA BLVD

CARSON, CA, 90746

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 83,084.48

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. ⁸² Nonpriority creditor's name and mailing address

PAN HOLIC
3012 W LINCOLN AVE

ANAHEIM, CA, 92801

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁸³ Nonpriority creditor's name and mailing address

PANTONE
590 COMMERCE BLVD

CARLSTADT, NJ, 07072

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁸⁴ Nonpriority creditor's name and mailing address

PAUL C H LEE MD
9894 GARDEN GROVE BLVD

GARDEN GROVE, CA, 92844

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁸⁵ Nonpriority creditor's name and mailing address

PAYPAL
2211 NORTH FIRST

ST SAN JOSE, CA, 95131

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ Unknown

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3. ⁸⁶ Nonpriority creditor's name and mailing address

PERALTA'S TRANSPORT
1313 LOS CANTOS AVE

ARVIN, CA, 93203

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 18,283.00

Basis for the claim: Suppliers or Vendors

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ 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. ⁸⁷ Nonpriority creditor's name and mailing address

PERFECT MEASURING TAPE
1116 SUMMIT ST

TOLEDO, OH, 43604

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. ⁸⁸ Nonpriority creditor's name and mailing address

PHO HOUSE 99
8851 GARDEN GROVE BLVD

GARDEN GROVE, CA, 92844

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. ⁸⁹ Nonpriority creditor's name and mailing address

PJ INTERNATIONAL
PO BOX 10900

WESTMINSTER, CA, 92685-0900

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 487.03

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. ⁹⁰ Nonpriority creditor's name and mailing address

POWER TRANSMISSION SPECIALTIES
8803 SORENSEN AVE

SANTA FE SPRINGS, CA, 90670

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 5,084.46

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. ⁹¹ Nonpriority creditor's name and mailing address

PREMIER STEEL
1330 N KNOLLWOOD CIR

ANAHEIM, CA, 92801

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,817.66

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. ⁹²	Nonpriority creditor's name and mailing address PRO KANGSAITE CO 15825 S DENKER AVE E. GARDENA, CA, 90247	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	\$ 1,800.53
	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. ⁹³	Nonpriority creditor's name and mailing address QUIROZ EDWARD 32000 CORTE CANEL TEMECULA, CA, 92592	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. ⁹⁴	Nonpriority creditor's name and mailing address RANBOY SPORTWEAR SA CV Calle Dalias #92046 FRACC Jardines de Tijuana BC, MEXICO	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 18,550.85
	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. ⁹⁵	Nonpriority creditor's name and mailing address RIVER ROLL OFF SVC 8632 CALABASH AVE FONTANA, CA, 92335	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	\$ 1,890.00
	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. ⁹⁶	Nonpriority creditor's name and mailing address ROYAL PACKAGING 16742 BURKE LN HUNTINGTON BEACH, CA, 92647	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	\$ 19,024.68
	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

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. ⁹⁷	Nonpriority creditor's name and mailing address S & R LOGISTICA DEL PACIFICO Calle Esmeralda 2095-7 Y 8 Col Valle Dorado Ensenada, BC, MEXICO	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ 121,592.03
	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. ⁹⁸	Nonpriority creditor's name and mailing address SCALE FX INC PO BOX 2669 ANAHEIM, CA, 92803	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	\$ 281.52
	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. ⁹⁹	Nonpriority creditor's name and mailing address SEJONG SUPPLY INC 2426 WEST 237TH PL TORRANCE, CA, 90501	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	\$ 5,546.97
	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. ¹⁰⁰	Nonpriority creditor's name and mailing address SMARK COMPANY 8636 OTIS ST SOUTH GATE, CA, 90280-3220	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	\$ 4,704.00
	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. ¹⁰¹	Nonpriority creditor's name and mailing address SNOGEN 16336 DOWNEY AVE PARAMOUNT, CA, 90723	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	\$ 30,906.87
	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

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. ¹⁰²	Nonpriority creditor's name and mailing address STARNES EDWARD 2060 PLACENTIA B-4 COSTA MESA, CA, 92627	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unknown
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁰³	Nonpriority creditor's name and mailing address SUNSET INDUSTRIAL PARTS 1272 E 286TH ST EUCLID, OH, 44132	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 368.62
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁰⁴	Nonpriority creditor's name and mailing address TAILGATE PRINTING INC 2930 S Fairview St Santa Ana, CA, 92704	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 12,600.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁰⁵	Nonpriority creditor's name and mailing address TAMCO CHEMICAL INC 2919 OA ST SANTA ANA, CA, 92707	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 8,518.49
	Date or dates debt was incurred _____ Last 4 digits of account number _____		
3. ¹⁰⁶	Nonpriority creditor's name and mailing address TMT WORLD CORP 25594 OAK ST LOMITA, CA, 90717	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 Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 4,423.14
	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. ¹⁰⁷ Nonpriority creditor's name and mailing address TRICHROMATICWEST INC 6070 RICKENBACKER RD COMMERCE, CA, 90040 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 499.87
3. ¹⁰⁸ Nonpriority creditor's name and mailing address TUBE TAINER 8174 BYRON RD WHITTIER, CA, 90606 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 9,813.96
3. ¹⁰⁹ Nonpriority creditor's name and mailing address UNITED FABRICARE SUPPLY INC 1301 W WALNUT ST COMPTON, CA, 90220 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 457,498.30
3. ¹¹⁰ Nonpriority creditor's name and mailing address UNITED FIRE SOLUTION INC 41120 ELM ST STE G MURRIETA, CA, 92562 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 411.16
3. ¹¹¹ Nonpriority creditor's name and mailing address UPS PO BOX 894820 LOS ANGELES, CA, 90189-4820 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Suppliers or Vendors Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 29.13

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. ¹¹² Nonpriority creditor's name and mailing address

VEGAS MACHINEC INC
8232 1 2 ATLANTIC AVE

CUDAHY, CA, 90201

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. ¹¹³ Nonpriority creditor's name and mailing address

WESTCO SPECTRA COLOR
12238 HAWKINS ST

SANTA FE SPRINGS, CA, 90670

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 9,965.93

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. ¹¹⁴ Nonpriority creditor's name and mailing address

WINTERSUN CHEMICAL
1250 E BELMONT ST

ONTARIO, CA, 91761

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. ¹¹⁵ Nonpriority creditor's name and mailing address

YOU AND US
160 W 33RD ST

LOS ANGELES, CA, 90007

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. 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 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. \$ 154,494.35

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

5b. + \$ 2,492,413.72

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

5c. \$ 2,646,908.07

Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name WesCoast Textiles, Inc.
United States Bankruptcy Court for the: Central District of California
Case number (if known): 8:19-bk-10492-CB Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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>Copier Lease Lessee</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AM COPIER 3418 W OLYMPIC BLVD LOS ANGELES, CA, 90019</p>
2.2	<p>Factor Agreement Purchaser</p> <p>State what the contract or lease is for and the nature of the debtor's interest</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 W 36TH ST, 12TH FL New York, NY, 10018</p>
2.3	<p>Security Agreement/Term Note Purchaser</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Capital Equipment Solutions LLC 5480 Corporate Dt Ste 350 Troy, MI, 48098</p>
2.4	<p>Loan Purchaser</p> <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Yellowstone Capital West LLC 116 Nassau St Ste 804 New York, NY, 10038</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	

Fill in this information to identify the case:

Debtor name WesCoast Textiles, Inc.United States Bankruptcy Court for the: Central District of CaliforniaCase number (If known): 8:19-bk-10492-CB☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

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>Codi Sheridan, Inc</u>	Codi Sheridan, 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
2.2 <u>Broncs, Inc.</u>	Broncs, 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
2.3 <u>Joel P Chun</u>	Joel P Chun 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
2.4 <u>Codi Sheridan, Inc</u>	Codi Sheridan, Inc. 12961 Pala Dr Garden Grove, CA, 92841	<u>YELLOWSTONE CAPITA</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5 <u>Broncs, Inc.</u>	Broncs, 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
2.6 <u>Joel P Chun</u>	Joel P Chun 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

Debtor

WesCoast Textiles, 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>Joel P Chun</u>	Joel P Chun 12691 Pala Dr Garden Grove, CA, 92841	<u>HAPPY ROCK MERCHAI</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8 <u>Broncs, Inc.</u>	Broncs, Inc. 12691 Pala Drive Garden Grove, CA, 92841	<u>HAPPY ROCK MERCHAI</u>	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. <u> </u>		<u> </u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. <u> </u>		<u> </u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. <u> </u>		<u> </u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. <u> </u>		<u> </u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. <u> </u>		<u> </u>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2. <u> </u>		<u> </u>	<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 WesCoast Textiles, Inc.

United States Bankruptcy Court for the: Central District of California

Case number (if known): 8:19-bk-10492-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

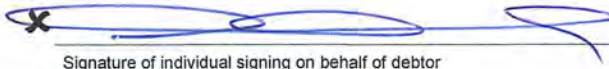
I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

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 _____