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<p>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - SANTA ANA DIVISION</p>	
<p>In re: FREEDOM COMMUNICATIONS HOLDINGS, INC.</p> <p>Debtor(s)</p>	<p>CASE NO.: 8:15-bk-15312-MW CHAPTER: 11</p> <p>SUMMARY OF AMENDED SCHEDULES, MASTER MAILING LIST, AND/OR STATEMENTS [LBR 1007-1(c)]</p>

A filing fee is required to amend Schedules D or E/F (see Abbreviated Fee Schedule on the Court's website www.cacb.uscourts.gov). A supplemental master mailing list (do not repeat any creditors on the original) is required as an attachment if creditors are being added to the Schedule D or E/F.

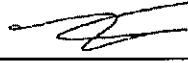
Are one or more creditors being added? Yes No

The following schedules, master mailing list or statements (check all that apply) are being amended:

Schedule A/B Schedule C Schedule D Schedule E/F Schedule G
 Schedule H Schedule I Schedule J Schedule J-2 Statement of Financial Affairs
 Statement About Your Social Security Numbers Statement of Intention Master Mailing List
 Other (specify) _____

I/we declare under penalty of perjury under the laws of the United States that the amended schedules, master mailing list, and or statements are true and correct.

Date: 8/24/2016


Debtor 1 Signature


Debtor 2 (Joint Debtor) Signature (if applicable)

NOTE: It is the responsibility of the Debtor, or the Debtor's attorney, to serve copies of all amendments on all creditors listed in this Summary of Amended Schedules, Master Mailing List, and/or Statements, and to complete and file the attached Proof of Service of Document.

Fill in this information to identify the case:

Debtor name: FREEDOM COMMUNICATIONS HOLDINGS, INC.

United States Bankruptcy Court for the: Central District of California

Case number (if known): 8:15-bk-15312-MW

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

AARON CLAVERIE
Address Intentionally Omitted

As of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$1,744.62	\$838.45
	Nonpriority amount \$906.18

Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Last 4 digits of account number: 9413

Is the claim subject to offset?

No
 Yes

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

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.2.	Priority creditor's name and mailing address ADRIAN VELOZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$49.33	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$49.33	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.3.	Priority creditor's name and mailing address AL AIONO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9418	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.4.	Priority creditor's name and mailing address ALEJANDRA MOLINA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$3,924.40	Priority amount \$2,182.14
		<input type="checkbox"/> Contingent	Nonpriority amount \$1,742.26	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 2875	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.5. Priority creditor's name and mailing address

ALEJANDRINA REYES
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$859.47	\$859.47
	Nonpriority amount
	\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Is the claim subject to offset?

No
 Yes

2.6. Priority creditor's name and mailing address

ALEX R GARCIA
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$441.29	\$441.29
	Nonpriority amount
	\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Is the claim subject to offset?

No
 Yes

2.7. Priority creditor's name and mailing address

ALEXANDER D GROVES
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$0.00	\$0.00
	Nonpriority amount
	\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Is the claim subject to offset?

No
 Yes

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.8.	Priority creditor's name and mailing address ALI J TADAYON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$121.62	Priority amount \$0.00
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$121.62
	Last 4 digits of account number: 9749	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		
2.9.	Priority creditor's name and mailing address ALICIA ROBINSON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$0.00
	Last 4 digits of account number: 9527	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		
2.10.	Priority creditor's name and mailing address ALLAN STEELE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$2,345.25	Priority amount \$1,464.41
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$880.84
	Last 4 digits of account number: 9341	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.11.	Priority creditor's name and mailing address AMADEO REYES Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$103.36	\$0.00
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$103.36
Date or dates debt was incurred				
VARIOUS				
Last 4 digits of account number: 9601				
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)				
2.12.	Priority creditor's name and mailing address ANDREA PASSOW Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$0.00
Date or dates debt was incurred				
VARIOUS				
Last 4 digits of account number: 9546				
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)				
2.13.	Priority creditor's name and mailing address ANGELA NASO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$877.86	\$0.00
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$877.86
Date or dates debt was incurred				
VARIOUS				
Last 4 digits of account number: 9431				
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)				

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.14.	Priority creditor's name and mailing address ANNIE YU Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$234.39	\$0.00
Nonpriority amount \$234.39				
Date or dates debt was incurred VARIOUS				
Last 4 digits of account number: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
2.15.	Priority creditor's name and mailing address APRIL M FUSILIER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$344.87	\$344.87
Nonpriority amount \$0.00				
Date or dates debt was incurred VARIOUS				
Last 4 digits of account number: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
2.16.	Priority creditor's name and mailing address BENJAMIN J LOPEZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$269.28	\$134.64
Nonpriority amount \$134.64				
Date or dates debt was incurred VARIOUS				
Last 4 digits of account number: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB				
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.17.	Priority creditor's name and mailing address BOB PRATTE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$2,282.73	Priority amount \$2,282.73
		<input type="checkbox"/> Contingent		Nonpriority amount \$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9243	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		
2.18.	Priority creditor's name and mailing address BRENDA ACUNA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		Nonpriority amount \$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9409	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		
2.19.	Priority creditor's name and mailing address BRIAN L JOHNSON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,470.79	Priority amount \$1,234.04
		<input type="checkbox"/> Contingent		Nonpriority amount \$236.76
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9369	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.20.	Priority creditor's name and mailing address BRYAN J SHULTS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$744.85	Priority amount \$744.85
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9293	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.21.	Priority creditor's name and mailing address BYRON E WELLS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9458	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.22.	Priority creditor's name and mailing address CAMARA L. FRAZIER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$15.13	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$15.13	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number:	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.23.	Priority creditor's name and mailing address CATHERINE A CELENTANO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$124.02	Priority amount \$124.02
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9264	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.24.	Priority creditor's name and mailing address CHARLES D WILLIAMSON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9373	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.25.	Priority creditor's name and mailing address CHRIS A RAMOS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$3,549.23	Priority amount \$1,973.53
		<input type="checkbox"/> Contingent	Nonpriority amount \$1,575.70	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9312	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.26. Priority creditor's name and mailing address CHRISTINA SALDANA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$198.58	Priority amount \$198.58
	<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9335	Is the claim subject to offset?		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.27. Priority creditor's name and mailing address CHRISTOPHER D GREGORY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
	<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9362	Is the claim subject to offset?		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.28. Priority creditor's name and mailing address CHRISTOPHER MURPHY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
	<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9249	Is the claim subject to offset?		
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.29.	Priority creditor's name and mailing address CINDY ZAUSS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
			\$12.60	\$12.60
		Nonpriority amount	\$0.00	
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9545		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		
2.30.	Priority creditor's name and mailing address CRAIG SHULTZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
			\$1,772.62	\$991.07
		Nonpriority amount	\$781.55	
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9337		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		
2.31.	Priority creditor's name and mailing address CRAIG WEBBER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
			\$2,806.72	\$2,255.95
		Nonpriority amount	\$550.78	
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9476		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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.32.	Priority creditor's name and mailing address DAVID L DOWNEY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$300.86	Priority amount \$300.86
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9260		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.33.	Priority creditor's name and mailing address DAVID L MURRAY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9252		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.34.	Priority creditor's name and mailing address DAVID M DANIELSKI Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9228		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.35.	Priority creditor's name and mailing address DAVID W BAUMAN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$3,125.21	Priority amount \$2,453.89
		<input type="checkbox"/> Contingent	Nonpriority amount \$671.32	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9251	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.36.	Priority creditor's name and mailing address DAVID ZINK Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$3,013.67	Priority amount \$2,515.80
		<input type="checkbox"/> Contingent	Nonpriority amount \$497.87	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9353	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.37.	Priority creditor's name and mailing address DEBORAH A CORONA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$346.76	Priority amount \$346.76
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9250	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.38.	Priority creditor's name and mailing address DEBRA GRUSZECKI Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$0.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9597	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		
2.39.	Priority creditor's name and mailing address DELORES FERNANDEZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$114.43	\$0.00
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$114.43
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	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		
2.40.	Priority creditor's name and mailing address DENNIS SATHER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$4,477.58	\$2,630.15
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$1,847.43
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9261	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.41.	Priority creditor's name and mailing address DESIREE M GARCIA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$2,691.52	Priority amount \$1,641.16
		<input type="checkbox"/> Contingent		Nonpriority amount \$1,050.36
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9357	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.42.	Priority creditor's name and mailing address DULCE VASQUEZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		Nonpriority amount \$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9499	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.43.	Priority creditor's name and mailing address EMIDIO E MONTERO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		Nonpriority amount \$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9529	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.44.	Priority creditor's name and mailing address ENZO PIZARRO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB	Nonpriority amount \$0.00	
Date or dates debt was incurred VARIOUS		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Last 4 digits of account number: 9555 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)				
2.45.	Priority creditor's name and mailing address ERIC D VILCHIS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,874.26	\$3,043.56
		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB	Nonpriority amount \$1,830.70	
Date or dates debt was incurred VARIOUS		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Last 4 digits of account number: 9320 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)				
2.46.	Priority creditor's name and mailing address ERIC-PAUL B JOHNSON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,495.02	\$1,473.38
		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB	Nonpriority amount \$1,021.64	
Date or dates debt was incurred VARIOUS		Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Last 4 digits of account number: 9325 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)				

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.47. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
ERIN R WALDNER Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,083.97	\$1,262.95
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9528	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		
2.48. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
EVERETT KANE Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4.07	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
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		
2.49. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
EZRA R GREENHOUSE Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,510.81	\$1,510.81
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9295	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.50.	Priority creditor's name and mailing address FIELDING E BUCK Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount															
			\$2,129.64	\$2,010.69															
Date or dates debt was incurred VARIOUS																			
Last 4 digits of account number: 9372																			
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)																			
<table border="1"> <tr> <td><input type="checkbox"/> Contingent</td> <td><input type="checkbox"/> Unliquidated</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td colspan="3">Basis for the claim:</td> </tr> <tr> <td colspan="3">WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB</td> </tr> <tr> <td colspan="3">Is the claim subject to offset?</td> </tr> <tr> <td colspan="3"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </td> </tr> </table>					<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	Basis for the claim:			WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB			Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																			
<table border="1"> <tr> <td><input type="checkbox"/> Contingent</td> <td><input type="checkbox"/> Unliquidated</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td colspan="3">Basis for the claim:</td> </tr> <tr> <td colspan="3">WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB</td> </tr> <tr> <td colspan="3">Is the claim subject to offset?</td> </tr> <tr> <td colspan="3"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </td> </tr> </table>					<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	Basis for the claim:			WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB			Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
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<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																			
2.51.	Priority creditor's name and mailing address FOSTER SNELL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount															
			\$569.28	\$0.00															
Date or dates debt was incurred VARIOUS																			
Last 4 digits of account number:																			
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)																			
<table border="1"> <tr> <td><input type="checkbox"/> Contingent</td> <td><input type="checkbox"/> Unliquidated</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td colspan="3">Basis for the claim:</td> </tr> <tr> <td colspan="3">WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB</td> </tr> <tr> <td colspan="3">Is the claim subject to offset?</td> </tr> <tr> <td colspan="3"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </td> </tr> </table>					<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	Basis for the claim:			WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB			Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																			
<table border="1"> <tr> <td><input type="checkbox"/> Contingent</td> <td><input type="checkbox"/> Unliquidated</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td colspan="3">Basis for the claim:</td> </tr> <tr> <td colspan="3">WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB</td> </tr> <tr> <td colspan="3">Is the claim subject to offset?</td> </tr> <tr> <td colspan="3"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </td> </tr> </table>					<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	Basis for the claim:			WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB			Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
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<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																			
2.52.	Priority creditor's name and mailing address FRANK D BELLINO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount															
			\$2,301.96	\$1,783.93															
Date or dates debt was incurred VARIOUS																			
Last 4 digits of account number: 9450																			
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)																			
<table border="1"> <tr> <td><input type="checkbox"/> Contingent</td> <td><input type="checkbox"/> Unliquidated</td> <td><input type="checkbox"/> Disputed</td> </tr> <tr> <td colspan="3">Basis for the claim:</td> </tr> <tr> <td colspan="3">WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB</td> </tr> <tr> <td colspan="3">Is the claim subject to offset?</td> </tr> <tr> <td colspan="3"> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </td> </tr> </table>					<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	Basis for the claim:			WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB			Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																			
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<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
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Is the claim subject to offset?																			
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<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed																	
Basis for the claim:																			
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB																			
Is the claim subject to offset?																			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes																			

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.53.	Priority creditor's name and mailing address GABRIEL T RIZK Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$2,355.03	\$1,053.64
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$1,301.39
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 8808		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"/>		<input type="checkbox"/> Yes		
2.54.	Priority creditor's name and mailing address GABRIELA RANGEL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$0.00
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9500		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"/>		<input type="checkbox"/> Yes		
2.55.	Priority creditor's name and mailing address GAIL L WESSON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		Nonpriority amount
		<input type="checkbox"/> Disputed		\$0.00
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9239		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"/>		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.56.	Priority creditor's name and mailing address GERALD NASH Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$750.22	Priority amount \$750.22
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9266	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.57.	Priority creditor's name and mailing address HOLLY HALVATGIS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$153.85	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$153.85	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9724	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.58.	Priority creditor's name and mailing address IMRAN GHORI Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,647.94	Priority amount \$1,647.94
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9339	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.59.	Priority creditor's name and mailing address ISIDORE A GREGORIO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,931.94	Priority amount \$1,660.86
		<input type="checkbox"/> Contingent	Nonpriority amount \$271.08	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: number: 9544		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		
2.60.	Priority creditor's name and mailing address J M ACOSTA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$3,521.36	Priority amount \$2,515.80
		<input type="checkbox"/> Contingent	Nonpriority amount \$1,005.56	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: number: 9275		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		
2.61.	Priority creditor's name and mailing address JACKIE ZAMORA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$350.57	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$350.57	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.62.	Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
			\$1,227.49	\$1,227.49
JAMES ALEXANDER Address Intentionally Omitted				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nonpriority amount \$0.00				
Date or dates debt was incurred				
VARIOUS				
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB				
Last 4 digits of account number: 9240				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)				
2.63.	Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
			\$1,132.21	\$0.00
JAMES R. VELASQUEZ Address Intentionally Omitted				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nonpriority amount \$1,132.21				
Date or dates debt was incurred				
VARIOUS				
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB				
Last 4 digits of account number:				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)				
2.64.	Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
			\$1,282.92	\$1,282.92
JANET L ZIMMERMAN Address Intentionally Omitted				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Nonpriority amount \$0.00				
Date or dates debt was incurred				
VARIOUS				
WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB				
Last 4 digits of account number: 9358				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)				

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.65. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JAVIER CABRERA Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$0.00	\$0.00
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9388	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		
2.66. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JEANNIE N COSTON-AVILA Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$565.04	\$565.04
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9303	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		
2.67. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JEFF MUESSE Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$525.37	\$525.37
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9542	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.68.	Priority creditor's name and mailing address JEFFREY D PARENTI Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,885.96	Priority amount \$1,351.41
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$534.55
	Last 4 digits of account number: 9360	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.69.	Priority creditor's name and mailing address JEFFREY T HORSEMAN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$20.30	Priority amount \$20.30
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$0.00
	Last 4 digits of account number: 9521	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.70.	Priority creditor's name and mailing address JEFFREY W RASBERRY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$0.00
	Last 4 digits of account number: 9300	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.71.	Priority creditor's name and mailing address JENNIFER S IYER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,052.86	\$1,334.38
Date or dates debt was incurred VARIOUS		Nonpriority amount	\$718.48	
Last 4 digits of account number: 9350		Basis for the claim:	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB	
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)		Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.72.	Priority creditor's name and mailing address JESSICA L. GARCIA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$182.70	\$0.00
Date or dates debt was incurred VARIOUS		Nonpriority amount	\$182.70	
Last 4 digits of account number:		Basis for the claim:	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB	
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)		Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.73.	Priority creditor's name and mailing address JOE ALVA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred VARIOUS		Nonpriority amount	\$0.00	
Last 4 digits of account number: 9302		Basis for the claim:	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB	
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)		Is the claim subject to offset?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.74.	Priority creditor's name and mailing address JOHN BENDER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,982.31	Priority amount \$1,982.31
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9351	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.75.	Priority creditor's name and mailing address JOHN P CAMPBELL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,163.97	Priority amount \$1,163.97
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9321	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.76.	Priority creditor's name and mailing address JONATHAN MORALES Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9421	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.77. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JORGE RAMIREZ Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$155.32	\$155.32
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9463	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.78. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JOSE A SERRATO Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,758.49	\$1,447.13
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9519	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.79. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JOSEPH N ARDENT Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,701.11	\$2,120.89
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9299	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.80. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JUAN J GARCIA Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,062.86	\$1,254.28
		Nonpriority amount	
		\$808.58	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9483	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		
2.81. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
JULIANNA CRISALLI Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
		Nonpriority amount	
		\$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 8738	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		
2.82. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
KATHERINE MACDUFF Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
		Nonpriority amount	
		\$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9333	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.83.	Priority creditor's name and mailing address KATHLEEN LUCAS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$938.06	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$938.06	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.84.	Priority creditor's name and mailing address KELLY HALE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9509	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.85.	Priority creditor's name and mailing address KEVIN LINDSEY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$2,510.27	Priority amount \$1,971.04
		<input type="checkbox"/> Contingent	Nonpriority amount \$539.23	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9352	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.86.	Priority creditor's name and mailing address KRISTIN GRIBBIN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$236.90	Priority amount \$236.90
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9557	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.87.	Priority creditor's name and mailing address KRISTOPHER S HERNANDEZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9672	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.88.	Priority creditor's name and mailing address KURT MILLER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$2,038.44	Priority amount \$2,038.44
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9235	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.89.	Priority creditor's name and mailing address KYLE GLASER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$0.00
	Last 4 digits of account number: 9405	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		
2.90.	Priority creditor's name and mailing address LAKE TROUT Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$5,555.81	Priority amount \$4,351.99
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$1,203.81
	Last 4 digits of account number: 9002	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		
2.91.	Priority creditor's name and mailing address LANDON NEGRI Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,593.10	Priority amount \$952.86
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		Nonpriority amount \$640.24
	Last 4 digits of account number: 9416	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.92.	Priority creditor's name and mailing address LAURIE LUCAS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$3,325.28	Priority amount \$2,252.05
		<input type="checkbox"/> Contingent		Nonpriority amount \$1,073.23
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9229	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.93.	Priority creditor's name and mailing address LEEVAN L ROBERTS III Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		Nonpriority amount \$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9280	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
2.94.	Priority creditor's name and mailing address LIAM M TRUCHARD Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$1,998.28	Priority amount \$1,998.28
		<input type="checkbox"/> Contingent		Nonpriority amount \$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9460	Is the claim subject to offset?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.95.	Priority creditor's name and mailing address LORENZO GARCIA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9591	Is the claim subject to offset? <input checked="" type="checkbox"/> No		
	Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)	<input type="checkbox"/> Yes		
2.96.	Priority creditor's name and mailing address LUHUT PURBA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9356	Is the claim subject to offset? <input checked="" type="checkbox"/> No		
	Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)	<input type="checkbox"/> Yes		
2.97.	Priority creditor's name and mailing address MANDIE JOHNSON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$853.76	Priority amount \$801.68
		<input type="checkbox"/> Contingent	Nonpriority amount \$52.08	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9725	Is the claim subject to offset? <input checked="" type="checkbox"/> No		
	Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)	<input type="checkbox"/> Yes		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.98.	Priority creditor's name and mailing address MARIA TINAJERO Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$585.70	Priority amount \$419.03
		<input type="checkbox"/> Contingent		Nonpriority amount \$166.67
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9496	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		
2.99.	Priority creditor's name and mailing address MARK MUCKENFUSS Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent		Nonpriority amount \$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	Last 4 digits of account number: 9334	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		
2.100.	Priority creditor's name and mailing address MARTHA CARMEN RAMIREZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$3,068.73	Priority amount \$0.00
		<input type="checkbox"/> Contingent		Nonpriority amount \$3,068.73
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.101. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MARY KEETEN Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$279.29	\$279.29
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9633	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		
2.102. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MELINDA D FERGUSON Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$150.57	\$150.57
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 8846	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		
2.103. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MICAH G KOZLOFF Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9803	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.104. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MICHAEL A CORONADO Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$7,794.36	\$4,383.59
		Nonpriority amount	\$3,410.77
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9999	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		
2.105. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MICHAEL D WATANABE Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,177.28	\$1,786.92
		Nonpriority amount	\$1,390.36
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9378	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		
2.106. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MICHAEL J HIMMELBERG Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
		Nonpriority amount	\$0.00
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9291	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.107. Priority creditor's name and mailing address

MICHAEL J TOLEDO
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$2,326.40	\$2,218.48
	Nonpriority amount
	\$107.93

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Is the claim subject to offset?

No
 Yes

2.108. Priority creditor's name and mailing address

MICHAEL WILLIAMS
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$224.70	\$224.70
	Nonpriority amount
	\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Is the claim subject to offset?

No
 Yes

2.109. Priority creditor's name and mailing address

MICHAEL WILLIS
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$427.07	\$0.00
	Nonpriority amount
	\$427.07

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Is the claim subject to offset?

No
 Yes

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.110. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MICHELLE NICOLOSI Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$2,168.26	\$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
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		
2.111. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
MICHELLE V WRIGHT Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9475		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		
2.112. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
NATASHA L BAILEY Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 8691		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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.113. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
NICK ELLER Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Nonpriority amount \$0.00			
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9560	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		
2.114. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
NICOLE JOHNSON Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Nonpriority amount \$0.00			
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9487	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		
2.115. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
NICOLE TATUM Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$545.80	\$545.80
Nonpriority amount \$0.00			
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9398	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.116.	Priority creditor's name and mailing address NONI TATE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$68.33	Priority amount \$68.33
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9705		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		
2.117.	Priority creditor's name and mailing address OLGA M ROJAS DE PRICE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$0.00	Priority amount \$0.00
		<input type="checkbox"/> Contingent	Nonpriority amount \$0.00	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9454		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		
2.118.	Priority creditor's name and mailing address ORLANDO M RAMIREZ Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim \$5,186.78	Priority amount \$2,884.08
		<input type="checkbox"/> Contingent	Nonpriority amount \$2,302.70	
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred VARIOUS		Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9306		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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.119. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		\$0.00	\$0.00
PAMELA S HARRIS Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nonpriority amount \$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9285	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		
2.120. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		\$407.97	\$407.97
PATRICK A O'NEILL Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nonpriority amount \$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9751	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		
2.121. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		\$414.46	\$414.46
PATRICK MALLOY Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nonpriority amount \$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9497	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.122. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
PAUL J BRUCHES Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,688.22	\$1,920.65
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9274	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		
2.123. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
PAUL MCAFEE Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,434.80	\$2,434.80
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9308	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		
2.124. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
PETER SUROWSKI Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9383	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.125. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
PHILLIP WEYAND Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9222	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.126. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
RAMINDER SEKHON Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9530	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.127. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
RANDOLPH E MCEOIN Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,330.47	\$3,330.47
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9281	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.128. Priority creditor's name and mailing address

RAYMOND K ROBERSON
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$904.35	\$904.35

Nonpriority amount
\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Last 4 digits of account number: 9230

Is the claim subject to offset?

No

Yes

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

2.129. Priority creditor's name and mailing address

RICHARD BROOKS
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$0.00	\$0.00

Nonpriority amount
\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Last 4 digits of account number: 9347

Is the claim subject to offset?

No

Yes

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

2.130. Priority creditor's name and mailing address

RICHARD K DE ATLEY
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$4,206.73	\$2,365.89

Nonpriority amount
\$1,840.84

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Last 4 digits of account number: 9283

Is the claim subject to offset?

No

Yes

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

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.131. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
RICHARD M BROWN Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9781	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.132. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
ROBERT D ROMERO Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,878.13	\$1,878.13
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9258	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.133. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
ROBERTO OCAMPO Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9579	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.134. Priority creditor's name and mailing address

ROGELIO ALVARADO
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$5,513.18	\$3,316.28
	Nonpriority amount
	\$2,196.91

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Last 4 digits of account number: 9498

Is the claim subject to offset?

No
 Yes

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

2.135. Priority creditor's name and mailing address

ROGER J RUVOLO
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$5,576.93	\$3,275.92
	Nonpriority amount
	\$2,301.01

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Last 4 digits of account number: 9247

Is the claim subject to offset?

No
 Yes

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

2.136. Priority creditor's name and mailing address

RON MONTERO
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$0.00	\$0.00
	Nonpriority amount
	\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMB

Last 4 digits of account number: 9753

Is the claim subject to offset?

No
 Yes

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

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.137. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
ROSANNE CARLOS Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$843.29	\$843.29
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9245		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		
2.138. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
ROXANNE M ALFARO (JARAMILLO) Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9355		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		
2.139. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
RYAN T GOODE Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9371		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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.140. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
SAMANTHA M SMITH Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9375	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			
2.141. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
SANDRA B MARTINEZ Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,815.79	\$1,259.79
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9367	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			
2.142. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
SANDRA STOKLEY Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,776.24	\$1,776.24
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9226	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.143. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
SARA SLAUGHTER Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
		Nonpriority amount	
		\$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9582	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		
2.144. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
SERGIO CRUZ Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
		Nonpriority amount	
		\$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9522	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	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
SONIA ROSALES Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
		Nonpriority amount	
		\$0.00	
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9572	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.146. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,257.05	\$2,061.43
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9363	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	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$829.76	\$792.86
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9425	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		
2.148. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$228.93	\$228.93
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9742	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.149. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		\$4,119.12	\$2,104.91
STEVE DEEBLE Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nonpriority amount \$2,014.21	
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9556	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		
2.150. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		\$342.01	\$342.01
STEVEN MARSHALL Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nonpriority amount \$0.00	
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9248	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		
2.151. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
		\$459.11	\$459.11
SUZANNE HURT Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Nonpriority amount \$0.00	
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9417	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.152. Priority creditor's name and mailing address

TERESA R LEES
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$1,273.43	\$1,273.43
	Nonpriority amount
	\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMBLast 4 digits of account
number: 9495

Is the claim subject to offset?

No
 Yes

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

2.153. Priority creditor's name and mailing address

TERRILL J HANNA
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$3,168.56	\$1,619.16
	Nonpriority amount
	\$1,549.40

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMBLast 4 digits of account
number: 9301

Is the claim subject to offset?

No
 Yes

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

2.154. Priority creditor's name and mailing address

TERRY B BELL
Address Intentionally OmittedAs of the petition filing date, the claim is:
Check all that apply.

Total claim	Priority amount
\$538.23	\$538.23
	Nonpriority amount
	\$0.00

Date or dates debt was incurred

VARIOUS

Basis for the claim:

WAGES, PTO, COMMISSIONS,
SEVERANCE, EXP REIMBLast 4 digits of account
number: 9714

Is the claim subject to offset?

No
 Yes

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

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.155. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
TERRY L PIERSON Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$2,960.82	\$2,218.80
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9365		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		
2.156. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
THOMAS BARNES Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$0.00	\$0.00
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9385		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		
2.157. Priority creditor's name and mailing address		As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
THOMAS F BRAY Address Intentionally Omitted		<input type="checkbox"/> Contingent	\$7,455.47	\$4,192.99
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Date or dates debt was incurred		Basis for the claim:		
VARIOUS		WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9364		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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.158. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
THOMAS SHERIDAN Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$989.76	\$952.86
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9415	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		
2.159. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
TIMOTHY GUY Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$890.58	\$890.58
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9563	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		
2.160. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
TONI L WILLHIDE Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$0.00	\$0.00
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 3835	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.161. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
TRINA L PRICE Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$271.04	\$271.04
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9741	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.162. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
TRINIDAD VERDUZCO Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$564.62	\$372.31
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9686	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			
2.163. Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
VANESSA FRANKO Address Intentionally Omitted	<input type="checkbox"/> Contingent	\$1,639.88	\$1,639.88
	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
Date or dates debt was incurred	Basis for the claim:		
VARIOUS	WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
Last 4 digits of account number: 9507	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim:11 U.S.C. § 507(a) (4)			

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.164. Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
	<i>Check all that apply.</i>	\$0.00	\$0.00
VENNESSA N GARCIA-COSTELL Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Nonpriority amount \$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9743	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		
2.165. Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
	<i>Check all that apply.</i>	\$346.16	\$173.08
WADE A. PEGRAM Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Nonpriority amount \$173.08
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
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		
2.166. Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
	<i>Check all that apply.</i>	\$0.00	\$0.00
WARREN K HARRIS Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Nonpriority amount \$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9290	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		

Debtor **FREEDOM COMMUNICATIONS HOLDINGS, INC.**Case number (if known) **8:15-bk-15312-MW**

2.167. Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
	<i>Check all that apply.</i>	\$0.70	\$0.00
WENDY A. TERNULLO Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Nonpriority amount \$0.70
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
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		
2.168. Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
	<i>Check all that apply.</i>	\$11.73	\$11.73
YOLANDA M BLASSINGAME Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Nonpriority amount \$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9593	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		
2.169. Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
	<i>Check all that apply.</i>	\$0.00	\$0.00
YVONNE MONTENEGRO Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Nonpriority amount \$0.00
Date or dates debt was incurred	Basis for the claim: WAGES, PTO, COMMISSIONS, SEVERANCE, EXP REIMB		
VARIOUS			
Last 4 digits of account number: 9566	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		