

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF DELAWARE**

In re

KLAUSNER LUMBER TWO LLC,

Debtor.¹

Chapter 11

Case No. 20-11518 (KBO)

**GLOBAL NOTES AND STATEMENT OF LIMITATIONS, METHODOLOGY, AND
DISCLAIMER REGARDING DEBTOR'S SCHEDULES AND STATEMENTS**

The Schedules of Assets and Liabilities (collectively with attachments, the “Schedules”) and the Statement of Financial Affairs (collectively with attachments, the “Statements,” and together with the Schedules, the “Schedules and Statements”) filed by the above-captioned debtor and debtor in possession (the “Debtor”) in the above-captioned chapter 11 case (the “Chapter 11 Case”) were prepared by the Debtor, with the assistance of its professional advisors, pursuant to section 521 of title 11 of the United States Code (the “Bankruptcy Code”) and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the “Bankruptcy Rules”).

These Global Notes and Statement of Limitations, Methodologies, and Disclaimers Regarding the Debtor’s Schedules and Statements (the “Global Notes”) are incorporated by reference in, and comprise an integral part of, the Debtor’s Schedules and Statements, and should be referred to and considered in connection with any review of the Schedules and Statements. These Global Notes are in addition to any specific notes that may be contained in each of the Schedules or Statements. The fact that the Debtor has prepared a general note herein with respect to any of the Schedules and Statements and not to others should not be interpreted as a decision by the Debtor to exclude the applicability of such general note to the Debtor’s remaining Schedules and Statements, as appropriate.

The Schedules and Statements have been prepared based on information provided by the Debtor’s Chief Restructuring Officer (the “CRO”) and his additional personnel, its independent contractors, and its professional advisors, and are unaudited and subject to potential adjustment. However, to date, neither the CRO nor his personnel, contractors and advisors have had any material access to any financial statements that were audited or reviewed by any outside accountant or accounting firm, nor any tax returns. Moreover, despite having been able to receive limited assistance from a former outside accountant, the Debtor has to date been unsuccessful in its efforts to employ or retain any former senior financial officers of the Debtor. Thus, the CRO and his personnel, contractors and advisors have had little help in their review of the information found in the Debtor’s SAP software to date. Finally, based upon its review to date (which is still ongoing), the Debtor believes that there may be material misclassifications under GAAP of both assets and liabilities as recorded in its SAP records. In preparing the

¹ The last four digits of the Debtor’s EIN are 4897. The Debtor’s mailing address is P.O. Box C, Redding Ridge CT, 06876.

following Schedules and Statements, the Debtor relied on financial data derived from its books and records that was available at the time of preparation.

Reservation of Rights. The Debtor has used commercially reasonable efforts to ensure the accuracy and completeness of such information and data; however, subsequent information, data or discovery may result in material changes to the Schedules and Statements and inadvertent errors, omissions or inaccuracies may exist, as noted above. The Debtor and its estate reserve all rights to amend or supplement the Schedules and Statements as may be necessary and appropriate. Nothing contained in the Schedules and Statements or these Global Notes shall constitute a waiver of any rights of the Debtor and its estate or an admission with respect to the Debtor's chapter 11 case, including, but not limited to, any issues involving objections to claims, setoff or recoupment, equitable subordination or recharacterization of debt, defenses, characterization or re-characterization of contracts, leases and claims, assumption or rejection of contracts and leases and/or causes of action arising under the Bankruptcy Code or any other applicable laws.

Description of the Case and "As of" Information Date. On June 10, 2020 (the "Petition Date"), the Debtor filed a voluntary petition for relief with the Court under chapter 11 of the Bankruptcy Code to continue the process of winding down its business affairs and to conduct a sale process for substantially all of its assets pursuant to section 363 of the Bankruptcy Code. Pursuant to sections 1107(a) and 1108 of the Bankruptcy Code, the Debtor is continuing to manage its financial affairs as a debtor in possession. Unless otherwise specifically indicated herein or in the Schedules and Statements, all financial information for the Debtor in the Schedules and Statements and these Global Notes is provided as of the Petition Date or as close thereto as reasonably practicable under the circumstances.

Basis of Presentation. The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles ("GAAP"), nor are they intended to fully reconcile to any financial statements prepared by the Debtor.

Recharacterization. Notwithstanding the Debtor's attempts to properly characterize, classify, categorize, or designate certain claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statements, the Debtor may nevertheless seek to recharacterize, reclassify, recategorize, redesignate, add, or delete items included in the Schedules and Statements, and the Debtor and its estate reserve all rights in this regard.

Insiders. For purposes of the Schedules and Statements, the Debtor defines "insiders" pursuant to section 101(31) of the Bankruptcy Code as: (a) current or former directors, officers or persons in control of the Debtor as of the Petition Date; (b) relatives of current or former directors, officers, or persons in control of the Debtor as of the Petition Date; (c) any partnership in which the Debtor is a general partner as of the Petition Date; or (d) any affiliate of the Debtor as of the Petition Date. Except as otherwise disclosed herein or in the Statements, payments to insiders listed in (a) through (d) above are set forth on Statement 4. Persons listed as "insiders" have been included for informational purposes only, and such listing is not intended to be, nor should it be construed as, a legal characterization of such person as an insider, nor does it serve as an admission of any fact, claim, right or defense, and all such claims, rights, and defenses with

respect thereto are hereby expressly reserved. Further, the Debtor and its estate do not take any position with respect to: (a) any such person's influence over the control of the Debtor; (b) the management responsibilities or functions of any such person; (c) the decision-making or corporate authority of any such person; or (d) whether any such person could successfully argue that he is not an "insider" under applicable law, including, without limitation, the federal securities laws, or with respect to any theories of liability or for any other purpose.

Summary of Significant Reporting Policies. The following is a summary of certain significant reporting policies:

a. Current Market Value – Net Book Value. It would be prohibitively expensive, unduly burdensome, and an inefficient use of estate resources for the Debtor to obtain current market valuations for each individual estate asset. Accordingly, unless otherwise indicated herein or in the Schedules and Statements, the Schedules and Statements reflect the net book values (which may include a fully-depreciated book value of \$0.00) or cost, rather than current market values, of the Debtor's assets as of the Petition Date (unless another date is indicated herein or in the Schedules and Statements), and may not reflect the net realizable value. Additionally, in many instances, the current market value is simply "unknown" or "undetermined" and is reflected as such in the Schedules and Statements. Finally, while the Debtor did receive a draft appraisal report from an affiliate of Hilco prior to the Petition Date, the values reflected by Hilco's appraisal were not based upon a forced liquidation value on a reasonable timescale but instead were based upon a theoretical orderly liquidation value with sales being assumed to take place over years in some cases. Further, the appraisal was never finalized and formerly issued prior to the Petition Date because of, among other things, certain missing information concerning some of the appraised equipment. For these and other reasons, the current market value reflected as such in the Schedules and Statements does not include the values from this appraisal.

b. Setoffs. To the extent the Debtor has incurred or effectuated any ordinary course setoffs with third parties (including, without limitation, customers and vendors) prior to the Petition Date, or are subject to the occurrence of, or maintain the right to effectuate, ordinary course setoffs on account of activities that occurred prior to the Petition Date, such setoffs may be excluded from the Schedules and Statements. The Debtor and its estate reserve all rights with respect to any such setoffs.

c. Credits and Adjustments. Claims of creditors are listed in the amounts found on the Debtor's books and records, and may not reflect certain payments made by or on behalf of the Debtor to such creditors or certain credits, allowances or other adjustments due from such creditors to the Debtor. The Debtor and its estate reserve all rights with regard to any such credits, allowances and other adjustments, including, without limitation, the right to assert claims, objections, setoffs and recoupments with respect to the same.

d. Nature of Leases. In the ordinary course of business, the Debtor leases certain real property, fixtures, and equipment from certain third-party lessors for use in the operation and maintenance of its business, and may lease certain products to third-party lessees. Nothing in the Schedules and Statements is, or shall be construed as, an admission as to the determination of the legal status of any lease (including, without limitation, whether any lease is a true lease or a financing arrangement, and whether such

lease is unexpired), and the Debtor and its estate reserve all rights with respect to such issues.

e. Value of Executory Contracts and Unexpired Leases. The Debtor has not set forth executory contracts and unexpired leases as assets in the Schedules and Statements, even though these contracts and leases may have some value to the Debtor's estate. Rather, executory contracts and unexpired leases have been set forth solely on Schedule G. The Debtor's rejection of executory contracts and unexpired leases may result in the assertion of rejection damages claims against the Debtor and its estate; however, the Schedules and Statements do not reflect any claims for rejection damages. The Debtor and its estate reserve all rights with respect to the assertion of any such claims.

Causes of Action. Despite having undertaken commercially reasonable efforts to identify all assets, the Debtor may not have listed all of the estate's causes of action or potential causes of action against third parties as assets in the Schedules and Statements. The Debtor reserves all of its and the estate's rights with respect to any Claims or causes of action (including avoidance actions), controversy, right of setoff, crossclaim, counterclaim, or recoupment and any claim on contracts or for breaches of duties imposed by law or in equity, demand, right, action, lien, indemnity, guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege, license, and franchise of any kind or character whatsoever, known, unknown, fixed or contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated, disputed or undisputed, secured or unsecured, assertible directly or derivatively, whether arising before, on, or after the Petition Date, in contract or in tort, in law or in equity, or pursuant to any other theory of law (collectively, "Causes of Action") the estate may have, and neither the Global Notes nor the Schedules and Statements shall be deemed a waiver of any Claims or Causes of Action or in any way prejudice or impair the assertion of such Claims or Causes of Action.

Unknown or Undetermined Amounts. Where a description of an amount is left blank or listed as "unknown" or "undetermined," such response is not intended to reflect upon the materiality of such amount.

Liabilities. The Debtor has sought to allocate liabilities between the prepetition and postpetition periods based on the information available at the time of filing the Schedules and Statements. If additional information becomes available including through further research, the allocation of liabilities between the prepetition and post-petition periods may change. Accordingly, the Debtor and its estate reserve all rights to amend, supplement, or otherwise modify the Schedules and Statements as is necessary or appropriate.

Estimates. The Debtor was required to make certain estimates and assumptions that affect the reported amounts of assets and liabilities and reported revenue and expenses. The Debtor and its estate reserve all rights to amend the reported amounts of assets, liabilities, revenue, and expenses to reflect changes in those estimates and assumptions.

Classifications. Listing a claim (a) on Schedule D as "secured," (b) on Schedule E/F as "unsecured priority," or "unsecured non-priority," or (c) listing a contract or lease on Schedule G as "executory" or "unexpired," does not constitute an admission by the Debtor and its estate of

the legal rights of any claimant, or a waiver of the rights of the Debtor and its estate to recharacterize or reclassify any claim or contract.

Claims Description. The Debtor and its estate reserve all rights to dispute, and to assert any offsets or defenses to, any claim reflected on the applicable Schedule on any grounds, including, without limitation, amount, liability, validity, priority or classification, and to subsequently designate any claim as “disputed,” “contingent” or “unliquidated.”

Specific Notes for the Schedules. The following are notes for specific Schedules:

a. Schedule A/B – Assets – Real and Personal Property. Funds and accounts are listed as of the Petition Date, and the Debtor has not accounted for any post-petition funding, account opening or closing, or other post-petition relief on Schedule A/B.

As set forth above, the current market value of inventory identified in Schedule A/B, Part 5 is at net book value or, in many instances, simply “unknown” or “undetermined.” The Debtor does not believe that a recent prepetition inventory was conducted, and the value of the Debtor’s interest in such inventory as of the Petition Date is therefore not ascertainable.

Schedule A/B, Part 9 identifies the Debtor’s real property interests as of the Petition Date, regardless of whether such interests are pursuant to a written lease agreement. The Debtor does not appear to have always carried real property improvements (owned or leased) on its balance sheet. The Debtor and its estate reserve all rights it may have under applicable law in connection with its asserted real property interests. Furthermore, Schedule A/B, Part 9 Question 55 lists real property that is subject to an ongoing dispute with Halifax, County as more fully described in the Debtor’s first day declaration. The Debtor anticipates that this dispute will be consensually resolved pursuant to a settlement agreement which will be filed with the Court shortly.

The Debtor’s failure to list any rights or interests in real property on Schedule A/B should not be construed as a waiver of any such rights that may exist, whether known or unknown at this time. The Debtor may have listed certain assets as real property when such assets are in fact personal property, or the Debtor may have listed certain assets as personal property when such assets are in fact real property. The Debtor reserves all of its rights to re-categorize or re-characterize such asset holdings to the extent the Debtor determines that such holdings were listed incorrectly.

Schedule A/B, Part 10 identifies the Debtor’s interests in intangibles or intellectual property. Exclusion or inclusion of any intangibles or intellectual property shall not be construed as an admission that such intellectual property rights have or have not been abandoned, terminated, assigned, expired by their terms, or otherwise transferred pursuant to a sale, acquisition, or other transaction.

Schedule A/B, Part 11, Item 73 may include policies that have since expired or were cancelled for non-payment prior to the Petition Date.

As set forth above, despite its commercially reasonable efforts to identify all known assets, the Debtor may not have listed all of its respective Causes of Action in Schedule A/B, Part 11, Item 74, including, but not limited to, Causes of Action arising under the Bankruptcy Code, Causes of Action against insiders or affiliates, or any other applicable laws (including, but not limited to, intellectual property laws). The Debtor

reserves all of its and its estate's rights with respect to any Causes of Action that the estate may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such claims, causes of action, or avoidance actions or in any way prejudice or impair the assertion of such claims.

The Debtor has made commercially reasonable efforts to reflect known claims against affiliates in Schedule A/B, Part 11, Item 77; however, individual intercompany accounts receivable are not listed and known claims against affiliates may be listed in an aggregated fashion.

b. Schedule D – Creditors Who Have Claims Secured by Property. The Debtor has not included on Schedule D all parties that may believe their claims are secured through setoff rights, deposits posted by, or on behalf of, the Debtor, inchoate statutory lien rights, or real property lessors, utility companies or other parties that may hold security interests. The amounts listed on Schedule D may not reflect any accrued interest, fees, costs, and other charges that such creditor may be entitled to receive.

c. Schedule E/F – Creditors Who Have Unsecured Claims.

Part 1. The listing of any claim on Schedule E/F does not constitute an admission by the Debtor that such claim is entitled to priority treatment under section 507 of the Bankruptcy Code. The Debtor reserves all of its rights to dispute the amount and the priority status of any claim on any basis at any time. All claims listed on the Debtor's Schedule E/F, Part 1 are claims arising from tax, wage, or wage-related obligations to which the Debtor may potentially be liable. Certain such claims, however, may be subject to ongoing audits and the Debtor is otherwise unable to determine with certainty the amount of many, if not all, of the remaining claims listed on Schedule E/F.

Part 2. Certain creditors listed on Part 2 of Schedule E/F may owe amounts to the Debtor; accordingly, the Debtor and its estate may have valid setoff and recoupment rights with respect to such amounts. Also, the amounts listed on Part 2 of Schedule E/F reflect known prepetition claims as of the Petition Date. Such amounts do not reflect any rights of setoff or recoupment that may be asserted by any creditors listed on Part 2 of Schedule E/F, and the Debtor and its estate reserve all rights to challenge any setoff and recoupment rights that may be asserted against them. The Debtor and its estate reserve all rights to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be perfected by a creditor listed on Part 2 of Schedule E/F. Notwithstanding the incompleteness of its records as described above, the Debtor has used commercially reasonable efforts to include all known creditors on Part 2 of Schedule E/F. The amounts listed for liabilities on Schedule E/F may be exclusive of certain contingent and unliquidated amounts. Third parties should not anticipate that the relationship of aggregate asset values and aggregate liabilities set forth in the Schedules will reflect their ultimate recoveries in this chapter 11 case. Actual assets and liabilities may deviate from the amounts shown in the Schedules due to various events that occur throughout the duration of the chapter 11 case.

d. Schedule G – Executory Contracts and Unexpired Leases. Although commercially reasonable efforts have been made to ensure the accuracy of Schedule G regarding executory contracts and unexpired leases, inadvertent errors, omissions, or over-inclusion may have occurred in preparing Schedule G. Omission of a contract, lease or other agreement from Schedule G does not constitute an admission that such omitted contract, lease or agreement is not an executory contract or unexpired lease. Schedule G

may be amended at any time to add any omitted executory contracts, unexpired leases and other agreements to which the Debtor is a party, including, without limitation, to add any executory contracts, unexpired leases and other agreements that the Debtor did not list on Schedule G at this time. Likewise, the listing of an agreement on Schedule G does not constitute an admission that such agreement is an executory contract or unexpired lease, or that such agreement was in effect or unexpired on the Petition Date or is valid or enforceable. The agreements listed on Schedule G may have expired, or may have been modified, amended, or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters and other documents, instruments and agreements that may not be listed on Schedule G.

Additionally, the Debtor was covered by certain insurance programs. Although the related insurance policies may not be listed in Schedule G, the Debtor and its estate reserve all rights in connection therewith.

All rights, claims, and causes of action of the Debtor and its estate with respect to the agreements listed on Schedule G are hereby reserved and preserved. The Debtor and its estate hereby reserve all rights to: (a) dispute the validity, status, or enforceability of any agreements set forth on Schedule G; (b) dispute or challenge the characterization of the structure of any transaction, document or instrument related to a creditor's claim, including, but not limited to, the agreements listed on Schedule G; and (c) amend or supplement Schedule G, as necessary.

Schedule G does not include rejection damage claims of the counterparties to the executory contracts and unexpired leases, to the extent such damage claims exist, that have been or may be rejected.

Specific Notes for the Statements. The following are notes for specific items in the Statements:

a. Statements 1 and 2. For financial reporting purposes, the Debtor was consolidated with other related entities for its financial statements and its gross revenue was determined on a consolidated basis in the ordinary course of business. Unlike the consolidated financial statements, the Statements reflect the business and non-business revenue of the Debtor on an unconsolidated basis except where otherwise indicated. Accordingly, the totals listed in the Statements may differ, at times materially, from the consolidated financial reports prepared by the Debtor for financial reporting purposes or otherwise.

b. Statement 3. Statement 3 includes any disbursement or other transfer made by the Debtor within 90 days prior to filing, except for those made to insiders, which are reflected on Statements 4 and 30 and those made to professionals, which are reflected on Statement 11. The amounts listed in Statement 3 may reflect disbursements at check level detail; thus, to the extent a disbursement was made to pay for multiple invoices, only one entry may be listed on Statement 3.

c. Statement 4. Statement 4 includes Debtor's transactions with affiliates, as well as other transfers to insiders as applicable. The Debtor's review of available records concerning insider transfers is ongoing. With respect to any individuals, the amounts listed reflect the universe of payments and transfers to such individuals including for compensation, bonus (if any), expense reimbursement, relocation reimbursement, and/or severance. However, upon information and belief, employees who were insiders were paid

by an affiliate of the Debtor, which is the reason why no payments to such insiders are reflected here.

d. Statement 6. The Debtor may have routinely incurred setoffs and net payments in the ordinary course of business. Such setoffs and nettings may have occurred due to a variety of transactions or disputes including, but not limited to, intercompany transactions, counterparty settlements, pricing discrepancies, rebates, returns, warranties, refunds, negotiations, or disputes between Debtor and its customers regarding regulatory or governmental imposition costs incurred by Debtor, and other disputes between the Debtor and its customers or suppliers. Therefore, these ordinary course setoffs may not have been independently accounted for, and as such, would be excluded from Statement 6. In addition, some amounts listed on the Schedules and Statements may have been affected by setoffs or nettings by third parties of which the Debtor is not yet aware. The Debtor reserves all of its and its estate's rights to challenge any setoff and/or recoupment rights that may be asserted.

e. Statement 7. The Debtor and its estate reserve all rights, claims, and defenses with respect to all listed lawsuits and administrative proceedings (or potential lawsuits and administrative proceedings). The listing of any such lawsuits and proceedings shall not constitute an admission by the Debtor and its estate of any liabilities. Information provided in Statement 7 includes only those legal disputes and administrative proceedings that are formally recognized by an administrative, judicial, or other adjudicative forum. In the Debtor's attempt to provide full disclosure, to the extent a legal dispute or administrative proceeding is not formally recognized by an administrative, judicial, or other adjudicative forum due to certain procedural conditions that counterparties have yet to satisfy, the Debtor has identified such matters on Schedule F. While the Debtor believes that it was diligent in its efforts, it is possible that certain suits and proceedings may have been inadvertently left off of the Debtor's response to Statement Question 7. Accordingly, the Debtor reserves all of its rights to amend or supplement its response to Statement Question 7.

f. Statement 21. In the ordinary course of business, the Debtor's property may contain various equipment and items owned by others. Additionally, the Debtor utilized leased property in the ordinary course of business. Therefore, the Debtor may hold property subject to leases listed on the Debtor's Schedule G.

g. Statement 26 and 26d. As all of Debtors' employees were terminated pre-petition, and many have returned to their home countries in Europe, individuals who once possessed responsive information are no longer employed by the Debtor. Nonetheless, the Debtor has made reasonable commercially efforts to identify and provide the requested information as completely as possible.

The Debtor has provided financial statements in the ordinary course of its businesses to numerous financial institutions, creditors, and other parties within two years immediately before the Petition Date. In addition, the Debtor has provided financial reports to the Debtor's professionals. Considering the number of such recipients and the possibility that such information may have been shared with parties without the Debtor's knowledge or consent or subject to confidentiality agreements, the Debtor has not disclosed any parties that may have received such financial statements for the purposes of Statement 26d. To assemble the extensive list of recipients would be unduly burdensome.

Global Notes Control. In the event that the Schedules and Statements differ from the Global Notes, the Global Notes shall control.

Fill in this information to identify the case:**Debtor name:** Klausner Lumber Two LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 20-11518☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

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

1a. Real property: Copy line 88 from Schedule A/B	\$80,632,764.99
1b. Total personal property: Copy line 91A from Schedule A/B	\$110,649,093.62
1c. Total of all property: Copy line 92 from Schedule A/B	\$191,281,858.61

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$102,698,538.60
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F	\$81,364.76
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	+ \$80,680,421.46
4. Total liabilities Lines 2 + 3a + 3b	\$183,460,324.82

Fill in this information to identify the case:**Debtor name:** Klausner Lumber Two LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 20-11518☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

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

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

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

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes. Fill in the information below**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

2.1.	PETTY CASH	\$1,672.63
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3. Checking, savings, money market, or financial brokerage accounts (Identify all)

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1.	WELLS FARGO	CHECKING	1075	\$422.42
3.2.	EAST WEST BANK	CHECKING	6177	\$216,997.13

4. Other cash equivalents (Identify all)

	Description	Name of institution	Type of account	Last 4 digits of account number	Current value of debtor's interest
4.1.					\$

5. Total of part 1

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

\$219,092.18

Part 2: Deposits and prepayments**6. Does the debtor have any deposits or prepayments?**☐ No. Go to Part 3.☒ Yes. Fill in the information below

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****7. Deposits, including security deposits and utility deposits**

	Description, including name of holder of deposit	Current value of debtor's interest
7.1.	SECURITY-APT 106 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.2.	SECURITY-APT 404 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.3.	SECURITY-APT 407 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.4.	SECURITY-APT 505 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.5.	SECURITY-APT 515 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.6.	SECURITY-APT 517 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.7.	SECURITY-APT 712 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.8.	SECURITY-APT 705 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.9.	SECURITY-APT 902 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00
7.10.	SECURITY-APT 904 COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804	\$400.00

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

	Description, including name of holder of prepayment	Current value of debtor's interest
8.1.	REMAINING RETAINER DONLIN, RECANO & COMPANY, INC.	\$9,853.00

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****9. Total of part 2**

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

\$13,853.00

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

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

Current value of debtor's interest**11. Accounts receivable**

	Face amount	Doubtful or uncollectible accounts		
11a. ¹ 90 days old or less:	\$0.00	- \$0.00	= →	\$0.00

	Face amount	Doubtful or uncollectible accounts		
11b. ¹ Over 90 days old:	\$101,277.60	- \$0.00	= →	\$101,277.60

12. Total of part 3

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

\$101,277.60

¹MAHILD DRYING TECHNOLOGIES GMBH**Part 4: Investments****13. Does the debtor own any investments?**

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

Valuation method used for current value**Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock

14.1. _____ \$ _____

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

Name of entity

% of ownership

15.1. _____ % _____ \$ _____

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

Describe

16.1. _____ \$ _____

17. Total of part 4

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

\$0.00

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

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

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials					
19.1.			\$		\$
20. Work in progress					
	General description	Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
20.1.	LOG WOOD IN BARK		\$23,033.58	NET BOOK VALUE	\$23,033.58
20.2.	LOG WOOD (MANUAL)		\$231,547.33	NET BOOK VALUE	\$231,547.33
20.3.	LOGS DEBARKED		\$13,098.01	NET BOOK VALUE	\$13,098.01
20.4.	GREEN LUMBER		\$5,641.85	NET BOOK VALUE	\$5,641.85
21. Finished goods, including goods held for resale					
21.1.			\$		\$
22. Other inventory or supplies					
	General description	Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
22.1.	MANUFACTURING SUPPLIES-WOVEN-WRAP	UNKNOWN	\$159,593.56	NET BOOK VALUE	\$159,593.56

23. Total of part 5

Add lines 19 through 22. Copy the total to line 84.

\$432,914.33**24. Is any of the property listed in Part 5 perishable?**

- ☒ No
- ☐ Yes

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

- ☒ No
- ☐ Yes Book value: \$ Valuation method: Current value: \$

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

- ☒ No
- ☐ Yes

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

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

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested				
28.1.		\$		\$

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****29. Farm animals.** Examples: Livestock, poultry, farm-raised fish

29.1. _____ \$ _____ \$ _____

30. Farm machinery and equipment (Other than titled motor vehicles)

30.1. _____ \$ _____ \$ _____

31. Farm and fishing supplies, chemicals, and feed

31.1. _____ \$ _____ \$ _____

32. Other farming and fishing-related property not already listed in Part 6

32.1. _____ \$ _____ \$ _____

33. Total of part 6

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

\$0.00

34. Is the debtor a member of an agricultural cooperative?☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes Book value: \$ _____ Valuation method: _____ Current value: \$ _____**36. Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

General description		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture				
39.1.	_____	\$ _____	_____	\$ _____
40. Office fixtures				
40.1.	_____	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software				
		Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
41.1.	SWITCH HP 2920-48G-POE - SERIENNR. SG46FLZV3K	\$2,471.12	Net Book Value	\$2,471.12
41.2.	APC SMART-UPS 1000 LCD - SAS1426236482	\$842.72	Net Book Value	\$842.72

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****41. Office equipment, including all computer equipment and communication systems equipment and software**

		Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
41.3.	FORTINET FORTIGATE 100D - FG100D3G14812352	\$3,330.55	Net Book Value	\$3,330.55
41.4.	FORTINET FORTIGATE 100D - FG100D3G14812393	\$3,330.55	Net Book Value	\$3,330.55
41.5.	RIVERBED WAN ACCELERATION	\$12,529.36	Net Book Value	\$12,529.36
41.6.	RITTAL IT SHELVES	\$5,606.63	Cost	\$5,606.63
41.7.	GENERAL OFFICE EQUIPMENT	\$7,806.76	Cost	\$7,806.76
41.8.	HP X132 10G SFP + LC SR TRANSCEIVER	\$1,060.80	Cost	\$1,060.80
41.9.	323400- NETAPP FAS2552-SYS POS 1.1 BIS 1.22	\$41,280.00	Cost	\$41,280.00
41.10.	HP PROLIANT DL380P GEN8 8 SERVERS	\$26,251.44	Cost	\$26,251.44
41.11.	KTI / CHARGE WIN RDS DEV CAL, VMWARE SPERE ENT.ED.	\$25,327.18	Cost	\$25,327.18
41.12.	HP 5820-24XG-SFP+ SWITCH	\$13,167.20	Cost	\$13,167.20
41.13.	NETAPP FAS2520 POS 4.7	\$12,959.00	Cost	\$12,959.00
41.14.	HP 2530-24G-POE+ SWITCH	\$9,625.00	Cost	\$9,625.00
41.15.	HP X130 10G SFP+ LC SR TRANSCEIVER	\$4,921.20	Cost	\$4,921.20
41.16.	CAB A8+/300 (WITH NETWORK INTERFACE AND	\$4,435.20	Cost	\$4,435.20
41.17.	HP 582X SWITCH	\$4,152.50	Cost	\$4,152.50
41.18.	HP X132 10G SFP+ LC LR TRANSCEIVER	\$3,371.24	Cost	\$3,371.24
41.19.	HP PROLIANT DL380P GEN8 8 SERVERS,	\$3,013.62	Cost	\$3,013.62
41.20.	HP 2920-48G-POE+ SWITCH	\$2,439.00	Cost	\$2,439.00
41.21.	HP 24X7 HP 5406 ZL SWITCH WITH P	\$2,202.75	Cost	\$2,202.75
41.22.	HP 8-PORT 10GBE SFP+ V2 ZL MODULE	\$2,199.54	Cost	\$2,199.54
41.23.	APC BASIC RACKMOUNT PDU	\$2,188.50	Cost	\$2,188.50
41.24.	HP 8-PORT 10GBE SFP+ V2 ZL MODULE	\$1,919.60	Cost	\$1,919.60
41.25.	CAB A4+/200 (WITH NETWORK INTERFACE AND	\$1,827.76	Cost	\$1,827.76
41.26.	CAB A4+/200 (WITH NETWORK INTERFACE AND	\$1,827.76	Cost	\$1,827.76
41.27.	HP 24-PORT SFP V2 ZL MODULE	\$1,787.04	Cost	\$1,787.04
41.28.	HP 5406 ZL SWITCH WITH PREMIUM SOFTWARE	\$1,572.35	Cost	\$1,572.35
41.29.	HP 24-PORT SFP V2 ZL MODULE	\$1,559.60	Cost	\$1,559.60
41.30.	HP TFT7600G2 KVM CONSOLE RACKMOUNT KEYBOARD	\$1,438.00	Cost	\$1,438.00
41.31.	PRINthead 8/300	\$1,189.76	Cost	\$1,189.76
41.32.	HP 5406 ZL SWITCH WITH PREMIUM SOFTWARE	\$1,108.71	Cost	\$1,108.71
41.33.	HP 5800 300W AC POWER SUPPLY	\$1,077.60	Cost	\$1,077.60
41.34.	HP LASERJET ENTERPRISE M506DN BLUE ALLY	\$1,065.00	Cost	\$1,065.00
41.35.	HP LASERJET ENTERPRISE M506DN BLUE ALLY	\$1,065.00	Cost	\$1,065.00
41.36.	THERMOMARK CARD PRINTER - AA ELECTRIC	\$2,190.59	Cost	\$2,190.59
41.37.	TELEPHONE SYSTEM	\$20,173.33	Cost	\$20,173.33

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- 42. Collectibles.** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1. _____ \$ _____ \$ _____

43. Total of part 7

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

\$234,313.96**44. Is a depreciation schedule available for any of the property listed in Part 7?**

- ☐ No
☒ Yes

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

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

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

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available) (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1. 2013 VW ROUTAN VIN # 2C4RVAAG5DR725521 UNDETERMINED _____ UNDETERMINED

48. Watercraft, trailers, motors, and related accessories. Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1. _____ \$ _____ \$ _____

49. Aircraft and accessories

49.1. _____ \$ _____ \$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

50.1.	TRANSPORTATION CONTAINERS	\$1,190,000.00	Cost	\$1,190,000.00
50.2.	KALMAR DCE 150-12 INCL. FORKS - OWNED	\$42,171.48	Cost	\$42,171.48
50.3.	STATIONARY ELECTRIC REMOTE CRANE	\$306,157.50	Cost	\$306,157.50
50.4.	USED WHEEL EXCAVATOR LIEBHERR A924L	\$46,080.17	Net Book Value	\$46,080.17
50.5.	VOLVO L180E	\$51,000.00	Cost	\$51,000.00
50.6.	COMPRESSOR CSD 75 175 PSI 460/60 US	\$37,511.66	Cost	\$37,511.66
50.7.	ROTARY SCREW COMPRESSOR GA 15-125	\$22,315.00	Cost	\$22,315.00
50.8.	COMPRESSOR ASD40S	\$32,719.75	Cost	\$32,719.75
50.9.	25KV SWITCH GEAR SWGR-HV1	\$83,000.00	Cost	\$83,000.00
50.10.	REFRIG. DRYER TF 2580 4560/60	\$13,272.63	Cost	\$13,272.63
50.11.	GRUNDFOS PUMP CR20#06	\$7,170.00	Cost	\$7,170.00
50.12.	TUBE AXIAL FAN MODEL 42B3 TCTSSH	\$13,568.00	Cost	\$13,568.00
50.13.	25KV - 480Y/277V TRANSFORMER; 2,500KVA	\$276,591.00	Cost	\$276,591.00
50.14.	25KV - 480Y/277V TRANSFORMER; 2,000 KVA	\$52,000.00	Cost	\$52,000.00
50.15.	GOCKEL PRECISION GRINDING MACHINE	\$63,000.04	Cost	\$63,000.04

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50.16.	JOYSTICK/FREIGHT	\$1,504.03	Cost	\$1,504.03
50.17.	25KV - 480Y/277V TRANSFORMER; 1,500 KVA	\$46,500.00	Cost	\$46,500.00
50.18.	STATIONARY ELECTRIC REMOTE CRANE	\$34,017.50	Cost	\$34,017.50
50.19.	25KV - CABLE	\$405,909.00	Cost	\$405,909.00
50.20.	CXTS SINGLE GRINDER CRANE	\$46,516.18	Cost	\$46,516.18
50.21.	STEEL STACK SYSTEM	\$75,000.00	Cost	\$75,000.00
50.22.	EQUIPMENT PADS & GROUNDING	\$43,980.00	Cost	\$43,980.00
50.23.	HIGH DEFINITION TUBULAR HEAT EXCHANGER	\$77,470.50	Cost	\$77,470.50
50.24.	TRUCK SCALE	\$278,133.45	Cost	\$278,133.45
50.25.	ZELA-15000 EXPANSION TANK T004A, T004B	\$66,000.00	Cost	\$66,000.00
50.26.	ZELA-15000 EXPANSION TANK T004A, T004B	\$44,000.00	Cost	\$44,000.00
50.27.	BLOW DOWN TANK T003 BDT - 156	\$6,600.00	Cost	\$6,600.00
50.28.	IN-LINE AIR PURGER	\$4,500.00	Cost	\$4,500.00
50.29.	SAW MILL CENTRAL LUBRICATION SYSTEM	\$270,234.32	Cost	\$270,234.32
50.30.	HOLTEC HFE (ELECTRIC POWERED)	\$11,638.00	Cost	\$11,638.00
50.31.	REA JET HR PRO (4 HEAD) INK JET SYSTEM	\$69,979.13	Cost	\$69,979.13
50.32.	DISPOSAL SAW LINE	\$82,065.12	Cost	\$82,065.12
50.33.	DISPOSAL SORTING LINE	\$82,065.12	Cost	\$82,065.12
50.34.	DISPOSAL PLANER LINE	\$82,065.11	Cost	\$82,065.11
50.35.	DISPOSAL MACHINES - GENERAL	\$2,448,920.60	Cost	\$2,448,920.60
50.36.	DISPOSAL	\$173,357.44	Cost	\$173,357.44
50.37.	DISPOSAL CAPITAL CONTRIBUTION	\$2,784,278.28	Cost	\$2,784,278.28
50.38.	DISPOSAL	\$709,164.02	Cost	\$709,164.02
50.39.	GENERAL SAW LINE EQUIPMENT	\$11,895,541.34	Cost	\$11,895,541.34
50.40.	TRANSPORTATION FOR SAWLINE MACHINE PARTS	\$150,466.65	Cost	\$150,466.65
50.41.	KRESTA REMONTAGE OF SAWMILL USA	\$66,045.00	Cost	\$66,045.00
50.42.	CONSULTING ADVICES	\$7,420.27	Cost	\$7,420.27
50.43.	SAWLINE CAPITAL CONTRIBUTION	\$6,961,774.90	Cost	\$6,961,774.90
50.44.	SAWLINE	\$9,263,669.77	Cost	\$9,263,669.77
50.45.	LOG YARD - SORTING LINE	\$185,300.00	Cost	\$185,300.00
50.46.	SEPARATOR BOX 47.25"	\$21,480.00	Cost	\$21,480.00
50.47.	SEPARATOR BOX 59.05"	\$22,120.00	Cost	\$22,120.00
50.48.	LOG YARD ELECTRICAL	\$21,409.00	Cost	\$21,409.00
50.49.	TRUCK UNBINDING SAFETY RACK SYSTEM	\$25,870.20	Cost	\$25,870.20
50.50.	LOG YARD MACHINES - GENERAL	\$6,076,869.87	Cost	\$6,076,869.87
50.51.	LOG YARD CAPITAL CONTRIBUTION	\$4,573,864.55	Cost	\$4,573,864.55
50.52.	LOG YARD	\$3,751,014.65	Cost	\$3,751,014.65
50.53.	DEBARKER	\$16,081.87	Cost	\$16,081.87
50.54.	KHN-SPRINGER FOR NC DOWN PYMNT	\$18,426.68	Cost	\$18,426.68
50.55.	KHN-SPRINGER FOR NC DOWN PYMNT INV#01/11/2014	\$872,500.00	Cost	\$872,500.00
50.56.	DRYING KILN BLOCK 1	\$236,105.54	Cost	\$236,105.54

Debtor	Klausner Lumber Two LLC	Case number (if known) 20-11518		
50.57.	DRYING KILN 1	\$236,105.54	Cost	\$236,105.54
50.58.	DRYING KILN 2	\$236,105.54	Cost	\$236,105.54
50.59.	DRYING KILN 3	\$236,105.54	Cost	\$236,105.54
50.60.	DRYING KILN 4	\$236,105.54	Cost	\$236,105.54
50.61.	DRYING KILN 5	\$236,105.54	Cost	\$236,105.54
50.62.	DRYING KILN BLOCK 2	\$256,547.19	Cost	\$256,547.19
50.63.	DRYING KILN 1	\$256,547.25	Cost	\$256,547.25
50.64.	DRYING KILN 2	\$256,547.25	Cost	\$256,547.25
50.65.	DRYING KILN 3	\$256,547.27	Cost	\$256,547.27
50.66.	DRYING KILN 4	\$256,547.27	Cost	\$256,547.27
50.67.	DRYING KILN 5	\$256,547.27	Cost	\$256,547.27
50.68.	DRYING KILN BLOCK 3	\$254,491.67	Cost	\$254,491.67
50.69.	DRYING KILN 1	\$254,491.66	Cost	\$254,491.66
50.70.	DRYING KILN 2	\$254,491.66	Cost	\$254,491.66
50.71.	DRYING KILN 3	\$254,491.66	Cost	\$254,491.66
50.72.	DRYING KILN 4	\$254,491.66	Cost	\$254,491.66
50.73.	DRYING KILN 5	\$254,491.66	Cost	\$254,491.66
50.74.	DRYING KILN 6	\$254,491.66	Cost	\$254,491.66
50.75.	DRYING KILN 7	\$254,491.70	Cost	\$254,491.70
50.76.	DRYING KILN BLOCK 4	\$232,245.71	Cost	\$232,245.71
50.77.	DRY KILN 1	\$232,245.71	Cost	\$232,245.71
50.78.	DRY KILN 2	\$232,245.71	Cost	\$232,245.71
50.79.	DRY KILN 3	\$232,245.71	Cost	\$232,245.71
50.80.	DRY KILN 4	\$232,245.71	Cost	\$232,245.71
50.81.	DRY KILN 5	\$232,245.71	Cost	\$232,245.71
50.82.	DRY KILN 6	\$232,245.71	Cost	\$232,245.71
50.83.	DRY KILN 7	\$234,138.49	Cost	\$234,138.49
50.84.	DRYING KILNS MACHINERY - GENERAL	\$5,242,996.94	Cost	\$5,242,996.94
50.85.	PLANER LINE MACHINES	\$2,981,384.82	Cost	\$2,981,384.82
50.86.	PLANING MACHINES	\$3,194,662.48	Cost	\$3,194,662.48
50.87.	KHT-PACKAGING MACHINE IN#01/02/2015	\$1,191,029.08	Cost	\$1,191,029.08
50.88.	SORTING MACHINES	\$7,683,829.31	Cost	\$7,683,829.31
50.89.	SORTING LINE CAPITAL CONTRIBUTION	\$6,464,783.60	Cost	\$6,464,783.60
50.90.	SORTING LINE	\$4,596,249.23	Cost	\$4,596,249.23
50.91.	START UP COSTS ALLOCATED TO EQUIPMENT	\$2,911,956.89	Cost	\$2,911,956.89
50.92.	START UP COSTS ALLOCATED TO EQUIPMENT	\$1,138,043.11	Cost	\$1,138,043.11
50.93.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400168- LEASED	\$0.00		\$0.00
50.94.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400169- LEASED	\$0.00		\$0.00
50.95.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400170- LEASED	\$0.00		\$0.00

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50.96.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400171- LEASED	\$0.00	_____	\$0.00
50.97.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400190- LEASED	\$0.00	_____	\$0.00
50.98.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400191- LEASED	\$0.00	_____	\$0.00
50.99.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400192- LEASED	\$0.00	_____	\$0.00
50.100.	KALMAR INDUSTRIES AB-FORKLIFT -DCG 160-12 MODEL - VIN NO. S40400193- LEASED	\$0.00	_____	\$0.00
50.101.	LIEBHERR L580 WHEEL LOADER - VIN NO. VATZ1464EZB052007 LEASED	\$0.00	_____	\$0.00
50.102.	CATERPILLAR GS4548 GRAPPLE S/N GR24022 -KNUCKLE BOOM LOADER 569	UNKNOWN	_____	UNKNOWN
50.103.	CATERPILLAR C742W GRAPPLE S/N GR23957- KNUCKLE BOOM LOADER 519	UNKNOWN	_____	UNKNOWN

51. Total of part 8

Add lines 47 through 50. Copy the total to line 87.

\$96,266,953.77

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

- ☐ No
- ☒ Yes

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

- ☐ No
- ☒ Yes

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

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

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

55.1.	LAND ACREAGE 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$129,276.00	Cost	\$129,276.00
55.2.	LAND ACREAGE 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$1,600,000.00	Cost	\$1,600,000.00

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	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.	Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
55.3.	STORM DRAINAGE INFRASTRUCTURE REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$80,544.42	Cost	\$80,544.42
55.4.	SEEGARS FENCE CO. GATE INSTALLATION REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$20,353.00	Cost	\$20,353.00
55.5.	OUTDOOR FACILITIES REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$1,685,219.79	Cost	\$1,685,219.79
55.6.	WATER AND SEWER REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$1,000,000.00	Cost	\$1,000,000.00
55.7.	GRADING AND SITE PREP REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$4,350,664.00	Cost	\$4,350,664.00
55.8.	ROADS REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$950,000.00	Cost	\$950,000.00
55.9.	RIGHTMYER-ASPHALT WORK-PHASE 1 REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$720,255.77	Cost	\$720,255.77
55.10.	GAS BOILER 1 REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$46,579.86	Cost	\$46,579.86

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.		Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest					
55.11. BOILERS 1 & 2 REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$2,950,752.97	Cost	\$2,950,752.97
260 PIPER LANE ENFIELD NC 27823					
55.12. BOILERS REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$1,848.50	Cost	\$1,848.50
260 PIPER LANE ENFIELD NC 27823					
55.13. BOILERS REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$2,357,651.98	Cost	\$2,357,651.98
260 PIPER LANE ENFIELD NC 27823					
55.14. RAIL ROAD TRACK REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$19,110.00	Cost	\$19,110.00
260 PIPER LANE ENFIELD NC 27823					
55.15. SORTING- BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$10,968,980.99	Cost	\$10,968,980.99
260 PIPER LANE ENFIELD NC 27823					
55.16. SAWLINE- BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$7,656,885.63	Cost	\$7,656,885.63
260 PIPER LANE ENFIELD NC 27823					
55.17. PLANING- BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$8,279,129.88	Cost	\$8,279,129.88
260 PIPER LANE ENFIELD NC 27823					
55.18. DISPOSAL-BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$4,934,031.93	Cost	\$4,934,031.93
260 PIPER LANE ENFIELD NC 27823					

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.		Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest					
55.19. LOGYARD-BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$9,481,701.07	Cost	\$9,481,701.07
260 PIPER LANE ENFIELD NC 27823					
55.20. BOILER BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$2,306,015.32	Cost	\$2,306,015.32
260 PIPER LANE ENFIELD NC 27823					
55.21. DRYING KILN-BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$4,107,483.75	Cost	\$4,107,483.75
260 PIPER LANE ENFIELD NC 27823					
55.22. BUILDING GENERAL REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$462,519.49	Cost	\$462,519.49
260 PIPER LANE ENFIELD NC 27823					
55.23. ADMINISTRATION - BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$33,950.00	Cost	\$33,950.00
260 PIPER LANE ENFIELD NC 27823					
55.24. START UP COST ALLOCATED TO BUILDINGS REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$323,550.77	Cost	\$323,550.77
260 PIPER LANE ENFIELD NC 27823					
55.25. START UP COST ALLOCATED TO BUILDING REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$126,449.23	Cost	\$126,449.23
260 PIPER LANE ENFIELD NC 27823					
55.26. FIREFLY FIRE SUPPRESSANT SYSTEM REAL PROPERTY IMPROVEMENTS		FEE SIMPLE OWNER	\$89,500.00	Cost	\$89,500.00
260 PIPER LANE ENFIELD NC 27823					

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
55.27. AUTOMATIC FIRE SPRINKLERS - KL2 SPRINKLERS REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$811,072.40	Cost	\$811,072.40
55.28. MILL - MACHINE CABLING REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$1,522,620.49	Cost	\$1,522,620.49
55.29. GROUND EXPLORATION REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$5,898,701.08	Cost	\$5,898,701.08
55.30. OUTDOOR FACILITIES - WATER PIPES REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$3,428,668.66	Cost	\$3,428,668.66
55.31. OUTDOOR FACILITIES - FENCES REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$53,145.63	Cost	\$53,145.63
55.32. OUTDOOR FACILITIES - ELECTRIC POWER SUPPLY REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$481,302.83	Cost	\$481,302.83
55.33. OUTDOOR FACILITIES - GAS PIPES REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$79,296.96	Cost	\$79,296.96
55.34. OUTDOOR FACILITIES UNDER CONSTRUCTION REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$3,483,592.75	Cost	\$3,483,592.75

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest				
55.35. CAT 6, FIBER, MOBILIZATION, CABLE REAL PROPERTY IMPROVEMENTS 260 PIPER LANE ENFIELD NC 27823	FEE SIMPLE OWNER	\$191,909.84	Cost	\$191,909.84
55.36. COLONY SQUARE APARTMENT # 404 APARTMENT 106 COLONY SQUARE ROCKY MOUNT NC 27804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.37. COLONY SQUARE APARTMENT # 407 APARTMENT 106 COLONY SQUARE ROCKY MOUNT NC 27804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.38. COLONY SQUARE APARTMENT # 505 APARTMENT 106 COLONY SQUARE ROCKY MOUNT NC 27804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.39. COLONY SQUARE APARTMENT # 515 APARTMENT 106 COLONY SQUARE ROCKY MOUNT NC 27804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.40. COLONY SQUARE APARTMENT # 517 APARTMENT 106 COLONY SQUARE ROCKY MOUNT NC 27804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.41. COLONY SQUARE APARTMENT # 702 APARTMENT 106 COLONY SQUARE ROCKY MOUNT NC 27804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED
55.42. COLONY SQUARE APARTMENT # 705 APARTMENT 106 COLONY SQUARE ROCKY MOUNT NC 27804	LEASEHOLD INTEREST	UNDETERMINED		UNDETERMINED

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

55.43. COLONY SQUARE APARTMENT # 902 LEASEHOLD INTEREST UNDETERMINED UNDETERMINED
APARTMENT

106 COLONY SQUARE
ROCKY MOUNT NC 27804

55.44. COLONY SQUARE APARTMENT # 904 LEASEHOLD INTEREST UNDETERMINED UNDETERMINED
APARTMENT

106 COLONY SQUARE
ROCKY MOUNT NC 27804

56. Total of part 9

Add the current value on lines 55. Copy the total to line 88.

\$80,632,764.99**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☐ No
☒ Yes

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

- ☐ No
☒ Yes

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

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

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

60. Patents, copyrights, trademarks, and trade secrets

60.1. _____ \$ _____ _____ \$ _____

61. Internet domain names and websites

	Net book value of debtor's interest	Valuation method	Current value of debtor's interest
61.1. _____	\$ _____	_____	\$ _____

62. Licenses, franchises, and royalties

62.1. LH - OPTIMIERUNG (INTERPORT)	\$26,645.23	_____	UNDETERMINED
62.2. 321221 - SAP-SCHNITTSTELLE	\$8,848.97	_____	UNDETERMINED

63. Customer lists, mailing lists, or other compilations

63.1. _____ \$ _____ _____ \$ _____

64. Other intangibles, or intellectual property

64.1. CAPITALIZED FINANCE COST \$134,458.07 _____ UNDETERMINED

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****65. Goodwill**

65.1. _____ \$ _____ \$ _____

66. Total of part 10

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

UNDETERMINED**67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?**☒ No☐ Yes**68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☐ No☒ Yes**69. Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

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

☐ No. Go to Part 12.☒ Yes. Fill in the information below.**Current value of debtor's interest****71. Notes receivable**

Description (include name of obligor)	Total face amount	Doubtful or uncollectible amount		Current value of debtor's interest
71.1. _____	\$ _____	- \$ _____	= →	\$ _____

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

Description (for example, federal, state, local)	Tax refund amount	NOL amount	Tax year	Current value of debtor's interest
72.1. ¹ FEDERAL	\$ _____	\$102,272,086.00	2018	UNDETERMINED
72.2. ¹ NORTH CAROLINA	\$ _____	\$56,943.00	2018	UNDETERMINED

¹NOL IN NAME OF KLAUSNER HOLDING USA, INC. AND SUBSIDIARIES FEIN 20-8581722. LOCATION 17152 46 TRACE, LIVE OAK, FL 32060**73. Interests in insurance policies or annuities**

Insurance company	Insurance policy No.	Annuity issuer name	Annuity account type	Annuity account No.	Current value of debtor's interest
73.1. LIBERTY MUTUAL INSURANCE	INLAND MARINE POLICY - BM058950725	_____	_____	_____	UNKNOWN
73.2. MASSACHUSETTS BAY INSURANCE COMPANY	UNKNOWN	_____	_____	_____	UNKNOWN
73.3. UNDERWRITERS AT LLOYD'S, LONDON	STOCKTHROUGH PUT POLICY - STP201900150	_____	_____	_____	UNKNOWN

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

73.4.	THE HANOVER INSURANCE GROUP	GENERAL INSURANCE - POLICY LZR D626863	_____	_____	_____	UNKNOWN
73.5.	THE HANOVER INSURANCE GROUP	EXCESS AND UMBRELLA INSURANCE POLICY UHR D626854 01	_____	_____	_____	UNKNOWN
73.6.	THE OHIO CASUALTY INSURANCE COMPANY	COMMERCIAL INLAND MARINE POLICY BMO(20) 60 07 70 50	_____	_____	_____	UNKNOWN
73.7.	HISCOX INSURANCE COMPANY INC	COMMERCIAL CRIME INSURANCE POLICY UC22290229.19	_____	_____	_____	UNKNOWN
73.8.	THE HANOVER INSURANCE GROUP	BUSINESS AUTO POLICY ADR- D626777-01	_____	_____	_____	UNKNOWN

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

	Nature of claim	Amount requested	Current value of debtor's interest
74.1.	_____	\$ _____	\$ _____

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

	Nature of claim	Amount requested	Current value of debtor's interest
75.1.	_____	\$ _____	\$ _____

76. Trusts, equitable or future interests in property

76.1.	_____	\$ _____
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77. Other property of any kind not already listed

Examples: Season tickets, country club membership

77.1. ¹	LOAN TO EMPLOYEE-CHRISTIAN RINDLER	\$25,705.00
77.2. ²	DUE FROM KLAUSNER LUMBER ONE LLC	\$143,990.66
77.3.	LOAN DUE FROM KLAUSNER NMTC LLC	\$12,140,054.66
77.4.	INTERCOMPANY RECEIVABLE DUE FROM KLAUSNER TRADING USA INC. (KTU INC.)	\$1,070,917.33
77.5.	INTERCOMPANY RECEIVABLE DUE FROM KLASUNER NORDAMERIKA BET GMBH	\$21.13

¹DEBTOR PAID 2018 US INDIVIDUAL TAX FOR CHRISTIAN RINDLER. AMOUNT WAS TO BE REPAID UPON REIMBURSEMENT BY "EUROPEAN SIDE"²LEASE OF LOADER DUE FROM KLAUSNER LUMBER ONE LLC (DEUTSCHE LEASING FOR KLAUSNER LUMBER ONE, LLC EQUIPMENT)**78. Total of part 11**

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

\$13,380,688.78

Debtor **Klausner Lumber Two LLC**

Case number (if known) **20-11518**

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

☒ No

☐ Yes

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****Part 12: Summary**

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

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$219,092.18	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$13,853.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$101,277.60	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$432,914.33	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$234,313.96	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$96,266,953.77	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$80,632,764.99
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> UNDETERMINED		
90. All other assets. <i>Copy line 78, Part 11.</i> +	\$13,380,688.78	
91. Total. Add lines 80 through 90 for each column.91a.	\$110,649,093.62	+ 91b. \$80,632,764.99
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$191,281,858.61

Fill in this information to identify the case:**Debtor name:** Klausner Lumber Two LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 20-11518☐ Check if this is an amended filingOfficial Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.**Column A
Amount of
Claim**Do not deduct
the value of
collateral.**Column B
Value of
collateral that
supports this
claim****2.1. Creditor's name and address**CAROLINA SAWMILLS L.P.
1297 PROFESSIONAL DR
SUITE 202
MYRTLE BEACH SC 29577**Creditor's email address, if known**
_____**Date debt was incurred:** 2014**Last 4 digits of account number:** _____**Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☒ No. Specify each creditor, including this creditor, and its relative priority. THE PRIORITY AMONG CAROLINA SAWMILLS L.P. AND THE VARIOUS JUDGMENT LIEN CLAIMANTS IS UNKNOWN.☐ Yes. The relative priority of creditors is specified on lines: _____**Describe debtor's property that is subject to a lien**

SUBSTANTIALLY ALL OF THE ASSETS

\$100,071,503.00 UNDETERMINED

Describe the lien

DEED OF TRUST FILED ON OR ABOUT MARCH 26, 2015

Is the creditor an insider or related party?☐ No☒ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****2.2. Creditor's name and address**D & T PROCESS OPTIMIZATION LLC
2987 STALLINGS RD
VALDOSTA GA 31605**Creditor's email address, if known**
_____**Date debt was incurred:** _____**Last 4 digits of account number:** _____**Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.

_____☒ Yes. The relative priority of creditors is specified on lines: 2.1**Describe debtor's property that is subject to a lien**

CLAIM OF LIEN AND OPEN JUDGMENT

\$70,958.52

UNDERTERMINED

Describe the lien

HALIFAX COUNTY #19 M 202

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**
Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed**2.3. Creditor's name and address**GREGORY POOLE EQUIPMENT
KATHY MORRIS CFO
4807 BERYL RD
CHARLOTTE NC 27606**Creditor's email address, if known**
_____**Date debt was incurred:** _____**Last 4 digits of account number:** _____**Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.

_____☒ Yes. The relative priority of creditors is specified on lines: 2.1**Describe debtor's property that is subject to a lien**

JUDGMENT

\$65,168.18

UNDERTERMINED

Describe the lien

WAKE COUNTY # 20 T 15 (ORIGINALLY 19 CVS 017079)

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**
Check all that apply.☐ Contingent☐ Unliquidated☒ Disputed

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****2.4. Creditor's name and address**JACOBS ENGINEERING GROUP
1999 BRYAN STREET
DALLAS TX 75201**Creditor's email address, if known**
_____**Date debt was incurred:** _____**Last 4 digits of account number:** _____**Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.

_____☒ Yes. The relative priority of creditors is specified on lines: 2.1**Describe debtor's property that is subject to a lien**

CLAIM OF LIEN AND OPEN JUDGMENT

\$55,317.47

UNDERTERMINED

Describe the lien

HALIFAX COUNTY # 15 M 223

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed**2.5. Creditor's name and address**SHERWIN WILLIAMS
1010 E 10TH ST
ROANOKE RAPIDS NC 27870**Creditor's email address, if known**
_____**Date debt was incurred:** _____**Last 4 digits of account number:** _____**Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.

_____☒ Yes. The relative priority of creditors is specified on lines: 2.1**Describe debtor's property that is subject to a lien**

CLAIM OF LIEN AND OPEN JUDGMENT

\$19,983.36

UNDERTERMINED

Describe the lien

HALIFAX COUNTY #19 M 421

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

<p>2.6. Creditor's name and address</p> <p>TAYLOR INDUSTRIAL CONSTRUCTION INC 1321 SHADY OAK LN JASPER FL 32052</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: October 2015</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines: 2.1</p>	<p>Describe debtor's property that is subject to a lien</p> <p>JUDGMENT LIEN</p> <p>\$2,415,608.07 UNDETERMINED</p> <p>Describe the lien</p> <p>JUDGMENT RECORDED APRIL 23, 2020 CURCUIT COURT, SUWANNEE FLORIDA, CASE NO. 61-2016-CA-000171; CAPTIONED TAYLOR INDUSTRIAL CONSTRUCTION, INC V KLAUSNER LUMBER ONE LLC ET AL. LIS PENDENS UNDER FLORIDA LAW RECORDED ON OR ABOUT AUGUST 29, 2016. CLAIM OF LIEN RECORDED ON OR ABOUT OCTOBER 14, 2015.</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
<p>2.7. Creditor's name and address</p> <p>WELLS FARGO EQUIPMENT FINANCE INC JIM HERON SVP NAT SALES MANAGER 733 MARQUETTE AVE STE 700 MINNEAPOLIS MN 55402</p> <p>Creditor's email address, if known</p> <hr/> <p>Date debt was incurred: November 2015</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <hr/> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines: _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>TRUE LEASE RE THREE 2015 KALMAR DCG16012 LIFT TRUCKS WITH SERIAL NUMBERS S40400162, S40400161 AND S40400160, INCLUDES ALL ATTACHMENTS, OPTIONS AND ACCESSORIES UNDER CONTRACT 0475396-100</p> <p>UNDETERMINED UNDETERMINED</p> <p>Describe the lien</p> <p>UCC FINANCING STATEMENT FILED NOVEMBER 19, 2015; SECRETARY OF STATE OF DELAWARE; FILING NO. 2015-5477921</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**2.8. **Creditor's name and address**

WELLS FARGO EQUIPMENT FINANCE INC
JIM HERON SVP NAT SALES MANAGER
733 MARQUETTE AVE
STE 700
MINNEAPOLIS MN 55402

Creditor's email address, if known**Date debt was incurred:** November 2015**Last 4 digits of account number:****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.☐ Yes. The relative priority of creditors is specified on lines: _____**Describe debtor's property that is subject to a lien**

TRUE LEASE RE FOUR 2015 KALMAR
DCG16012 FORK LIFTS WITH SERIAL
NUMBERS S40400171, S40400168 AND
S40400170 AND S40400169, INCLUDES ALL
ATTACHMENTS, OPTIONS AND
ACCESSORIES

UNDETERMINED UNDETERMINED

Describe the lien

UCC FINANCING STATEMENT FILED
NOVEMBER 19, 2015; SECRETARY OF
STATE OF DELAWARE; FILING NO. 2015-
5477939

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**
Check all that apply.☐ Contingent☒ Unliquidated☐ Disputed

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**2.9. **Creditor's name and address**

WELLS FARGO EQUIPMENT FINANCE INC
JIM HERON SVP NAT SALES MANAGER
733 MARQUETTE AVE
STE 700
MINNEAPOLIS MN 55402

Creditor's email address, if known**Date debt was incurred:** December 2015**Last 4 digits of account number:****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.☐ Yes. The relative priority of creditors is specified on lines: _____**Describe debtor's property that is subject to a lien**

THREE 2015 KALMAR DCG220-12 LB WITH SERIAL NUMBERS A20700020, A20700022 AND A20700023, INCLUDES ALL ATTACHMENTS, OPTIONS AND ACCESSORIES UNDER CONTRACT 0475396-102

UNDETERMINED UNDETERMINED

Describe the lien

UCC FINANCING STATEMENT FILED DECEMBER 15, 2015; SECRETARY OF STATE OF DELAWARE; FILING NO. 2015-6049885; AS AMENDED BY FILING NO. 2016-0226801 FILED ON JANUARY 12, 2016

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**
Check all that apply.☐ Contingent☒ Unliquidated☐ Disputed

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****2.10. Creditor's name and address**

WELLS FARGO EQUIPMENT FINANCE INC
JIM HERON SVP NAT SALES MANAGER
733 MARQUETTE AVE
STE 700
MINNEAPOLIS MN 55402

Creditor's email address, if known**Date debt was incurred:** April 2016**Last 4 digits of account number:****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.☐ Yes. The relative priority of creditors is specified on lines: _____**Describe debtor's property that is subject to a lien**

TRUE LEASE FOR FOUR KALMAR
PNEUMATIC FORKLIFTS WITH SERIAL
NUMBERS S40400190, S40400191,
S40400192 AND S40400193, INCLUDES ALL
ATTACHMENTS, OPTIONS AND
ACCESSORIES UNDER CONTRACT
0475396-103

UNDETERMINED UNDETERMINED

Describe the lien

UCC FINANCING STATEMENT FILED APRIL
4, 2016; SECRETARY OF STATE OF
DELAWARE; FILING NO. 2016-2020442

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☐ No☒ Yes. Fill out Schedule H: Codebtors (Official Form 206H).**As of the petition filing date, the claim is:**
Check all that apply.☐ Contingent☒ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$102,698,538.60**

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

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

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

	Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
3.1.	AKERMAN LLP CHRISTIAN P GEORGE 50 NORTH LAURA ST STE 3100 JACKSONVILLE FL 32202	Line 2.6	_____
3.2.	EVANS STARRETT PLC K STEWART EVANS JR.,ESQ 10201 FAIRFAX BLVD STE 525 FAIRFAX VA 22030	Line 2.1	_____
3.3.	JAMES B MOLONEY,ESQ 118 AMBER ST BEACH HAVEN NJ 08008	Line 2.1	_____

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

3.4.	KALMAR USA INC. 1230 N. MULBERRY ST OTTAWA KS 66067	Line 2.7	_____
3.5.	KALMAR USA INC. 1230 N. MULBERRY ST OTTAWA KS 66067	Line 2.8	_____
3.6.	KALMAR USA INC. 1230 N. MULBERRY ST OTTAWA KS 66067	Line 2.9	_____
3.7.	KALMAR USA INC. 1230 N. MULBERRY ST OTTAWA KS 66067	Line 2.10	_____
3.8.	KALMAR USA INC. 415 E DUNDEE ST OTTAWA KS 66067	Line 2.7	_____
3.9.	KALMAR USA INC. 415 E DUNDEE ST OTTAWA KS 66067	Line 2.8	_____
3.10.	KALMAR USA INC. 415 E DUNDEE ST OTTAWA KS 66067	Line 2.9	_____
3.11.	KALMAR USA INC. 415 E DUNDEE ST OTTAWA KS 66067	Line 2.10	_____
3.12.	LAW OFFICE OF CURTIS A HEHN CURTIS A HEHN 1007 N ORANGE ST.,4TH FLOOR WILMINGTON DE 19801	Line 2.1	_____
3.13.	THE BIFFERATO FIRM PA IAN CONNOR BIFFERATO,ESQ 1007 N ORANGE ST.,4TH FLR WILMINGTON DE 19801	Line 2.6	_____

Fill in this information to identify the case:**Debtor name:** Klausner Lumber Two LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 20-11518☐ 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	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Total claim	Priority amount
ALSTON, LEROY Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$778.84	\$778.84
Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
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		Nonpriority amount \$0.00

2.2. 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
ANDERSON, KEVIN Address Intentionally Omitted	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$744.44	\$744.44
Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
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		Nonpriority amount \$0.00

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2.3.	Priority creditor's name and mailing address ARRINGTON, KIRBY L Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$853.88</td> </tr> </table>	Total claim	\$853.88	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$853.88</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$853.88	Nonpriority amount	\$0.00
Total claim										
\$853.88										
Priority amount										
\$853.88										
Nonpriority amount										
\$0.00										
2.4.	Priority creditor's name and mailing address BAILEY, GARY Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$492.44</td> </tr> </table>	Total claim	\$492.44	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$492.44</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$492.44	Nonpriority amount	\$0.00
Total claim										
\$492.44										
Priority amount										
\$492.44										
Nonpriority amount										
\$0.00										
2.5.	Priority creditor's name and mailing address BERNAZZANI, CHARLES Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$860.91</td> </tr> </table>	Total claim	\$860.91	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$860.91</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$860.91	Nonpriority amount	\$0.00
Total claim										
\$860.91										
Priority amount										
\$860.91										
Nonpriority amount										
\$0.00										

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2.6.	Priority creditor's name and mailing address BINDER, KENNETH Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$1,438.88	Priority amount \$1,438.88
				Nonpriority amount \$0.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
	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		

2.7.	Priority creditor's name and mailing address BRADLEY, KENDRA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$790.70	Priority amount \$790.70
				Nonpriority amount \$0.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
	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		

2.8.	Priority creditor's name and mailing address CHERRY, LEVON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$661.11	Priority amount \$661.11
				Nonpriority amount \$0.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
	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		

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2.9.	Priority creditor's name and mailing address CLARK JR, MICHAEL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$713.10	Priority amount \$713.10
				Nonpriority amount \$0.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
	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		

2.10.	Priority creditor's name and mailing address CLAY, CHRISTOPHER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$448.48	Priority amount \$448.48
				Nonpriority amount \$0.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
	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		

2.11.	Priority creditor's name and mailing address COBB, BRUCE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$1,355.38	Priority amount \$1,355.38
				Nonpriority amount \$0.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		
	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		

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2.12. Priority creditor's name and mailing address CRADDOCK, DAVID MARTIN Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,423.85</td> <td style="text-align: center;">\$1,423.85</td> </tr> </table>	Total claim	Priority amount	\$1,423.85	\$1,423.85	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$1,423.85	\$1,423.85								
Nonpriority amount									
\$0.00									
2.13. Priority creditor's name and mailing address CROWELL, MICHAEL Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> <td style="text-align: center;">\$0.00</td> </tr> </table>	Total claim	Priority amount	\$0.00	\$0.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$0.00	\$0.00								
Nonpriority amount									
\$0.00									
2.14. Priority creditor's name and mailing address DANIEL, ROGDRELL Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,077.05</td> <td style="text-align: center;">\$1,077.05</td> </tr> </table>	Total claim	Priority amount	\$1,077.05	\$1,077.05	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$1,077.05	\$1,077.05								
Nonpriority amount									
\$0.00									

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.15.	Priority creditor's name and mailing address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE PO BOX 806532 CINCINNATI OH 45280-6532	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$6,670.51	Priority amount \$6,670.51
	Date or dates debt was incurred VARIOUS	Basis for the claim: FEDERAL WITHHOLDING TAXES		Nonpriority amount \$0.00
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16.	Priority creditor's name and mailing address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE PO BOX 806532 CINCINNATI OH 45280-6532	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$11,990.98	Priority amount \$11,990.98
	Date or dates debt was incurred VARIOUS	Basis for the claim: SOCIAL SECURITY TAX		Nonpriority amount \$0.00
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17.	Priority creditor's name and mailing address DICKENS, LEROY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Total claim \$981.69	Priority amount \$981.69
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES		Nonpriority amount \$0.00
	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		

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.18.	Priority creditor's name and mailing address ELIAS, JOSEPH SCOTT Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$1,023.71</td> </tr> </table>	Total claim	\$1,023.71	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,023.71</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$1,023.71	Nonpriority amount	\$0.00
Total claim										
\$1,023.71										
Priority amount										
\$1,023.71										
Nonpriority amount										
\$0.00										
2.19.	Priority creditor's name and mailing address FLEMING, DASHAWN Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$1,089.73</td> </tr> </table>	Total claim	\$1,089.73	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,089.73</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$1,089.73	Nonpriority amount	\$0.00
Total claim										
\$1,089.73										
Priority amount										
\$1,089.73										
Nonpriority amount										
\$0.00										
2.20.	Priority creditor's name and mailing address GARDNER, TIMOTHY N Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$859.08</td> </tr> </table>	Total claim	\$859.08	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$859.08</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$859.08	Nonpriority amount	\$0.00
Total claim										
\$859.08										
Priority amount										
\$859.08										
Nonpriority amount										
\$0.00										

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2.21. Priority creditor's name and mailing address GODDARD, FRANKLIN Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$723.05</td> <td style="text-align: center;">\$723.05</td> </tr> </table>	Total claim	Priority amount	\$723.05	\$723.05	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$723.05	\$723.05								
Nonpriority amount									
\$0.00									
2.22. Priority creditor's name and mailing address GRAHAM, SERGIO Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,051.28</td> <td style="text-align: center;">\$1,051.28</td> </tr> </table>	Total claim	Priority amount	\$1,051.28	\$1,051.28	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$1,051.28	\$1,051.28								
Nonpriority amount									
\$0.00									
2.23. Priority creditor's name and mailing address GRANT, MARCUS Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$843.68</td> <td style="text-align: center;">\$843.68</td> </tr> </table>	Total claim	Priority amount	\$843.68	\$843.68	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$843.68	\$843.68								
Nonpriority amount									
\$0.00									

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.24. Priority creditor's name and mailing address GREENE, TERRY Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$699.87</td> <td style="text-align: center;">\$699.87</td> </tr> </table>	Total claim	Priority amount	\$699.87	\$699.87	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$699.87	\$699.87								
Nonpriority amount									
\$0.00									
2.25. Priority creditor's name and mailing address GREIER, KENNETH Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,308.98</td> <td style="text-align: center;">\$1,308.98</td> </tr> </table>	Total claim	Priority amount	\$1,308.98	\$1,308.98	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$1,308.98	\$1,308.98								
Nonpriority amount									
\$0.00									
2.26. Priority creditor's name and mailing address HALIFAX COUNTY PROPERTY TAX COLLECTOR DORIS HAWKINS 357 FERRELL LN HALIFAX NC 27839 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) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TAXES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Total claim	Priority amount	UNDETERMINED	UNDETERMINED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">UNDETERMINED</td> </tr> </table>	Nonpriority amount	UNDETERMINED
Total claim	Priority amount								
UNDETERMINED	UNDETERMINED								
Nonpriority amount									
UNDETERMINED									

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.27.	Priority creditor's name and mailing address HAMMACK, PATRICK Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Total claim</th> </tr> <tr> <td>\$820.28</td> </tr> </table>	Total claim	\$820.28	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Priority amount</th> </tr> <tr> <td>\$820.28</td> </tr> </table>	Priority amount	\$820.28
Total claim								
\$820.28								
Priority amount								
\$820.28								
				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00		
Nonpriority amount								
\$0.00								
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES						
	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						

2.28.	Priority creditor's name and mailing address HARRIS, COREY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Total claim</th> </tr> <tr> <td>\$1,018.79</td> </tr> </table>	Total claim	\$1,018.79	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Priority amount</th> </tr> <tr> <td>\$1,018.79</td> </tr> </table>	Priority amount	\$1,018.79
Total claim								
\$1,018.79								
Priority amount								
\$1,018.79								
				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00		
Nonpriority amount								
\$0.00								
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES						
	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						

2.29.	Priority creditor's name and mailing address HARRISON, ABRIONEE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Total claim</th> </tr> <tr> <td>\$739.85</td> </tr> </table>	Total claim	\$739.85	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Priority amount</th> </tr> <tr> <td>\$739.85</td> </tr> </table>	Priority amount	\$739.85
Total claim								
\$739.85								
Priority amount								
\$739.85								
				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00		
Nonpriority amount								
\$0.00								
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES						
	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						

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2.30.	Priority creditor's name and mailing address HARRISON, SHANEKA Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$1,092.86</td> </tr> </table>	Total claim	\$1,092.86	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,092.86</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$1,092.86	Nonpriority amount	\$0.00
Total claim										
\$1,092.86										
Priority amount										
\$1,092.86										
Nonpriority amount										
\$0.00										
2.31.	Priority creditor's name and mailing address HUNTER, ANTOINE Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$661.22</td> </tr> </table>	Total claim	\$661.22	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$661.22</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$661.22	Nonpriority amount	\$0.00
Total claim										
\$661.22										
Priority amount										
\$661.22										
Nonpriority amount										
\$0.00										
2.32.	Priority creditor's name and mailing address HUNTER, JASPER L Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$703.65</td> </tr> </table>	Total claim	\$703.65	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$703.65</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$703.65	Nonpriority amount	\$0.00
Total claim										
\$703.65										
Priority amount										
\$703.65										
Nonpriority amount										
\$0.00										

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.33.	Priority creditor's name and mailing address JOHNSON, GLENN Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$681.06</td> </tr> </table>	Total claim	\$681.06	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$681.06</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$681.06	Nonpriority amount	\$0.00
Total claim										
\$681.06										
Priority amount										
\$681.06										
Nonpriority amount										
\$0.00										
2.34.	Priority creditor's name and mailing address JOHNSON, PHILLIP Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$906.74</td> </tr> </table>	Total claim	\$906.74	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$906.74</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$906.74	Nonpriority amount	\$0.00
Total claim										
\$906.74										
Priority amount										
\$906.74										
Nonpriority amount										
\$0.00										
2.35.	Priority creditor's name and mailing address JONES, ANGIE Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$791.52</td> </tr> </table>	Total claim	\$791.52	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$791.52</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$791.52	Nonpriority amount	\$0.00
Total claim										
\$791.52										
Priority amount										
\$791.52										
Nonpriority amount										
\$0.00										

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2.36.	Priority creditor's name and mailing address JONES, JOSEPH BRANDON Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Total claim</th> </tr> <tr> <td>\$1,905.00</td> </tr> </table>	Total claim	\$1,905.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Priority amount</th> </tr> <tr> <td>\$1,905.00</td> </tr> </table>	Priority amount	\$1,905.00
Total claim								
\$1,905.00								
Priority amount								
\$1,905.00								
				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00		
Nonpriority amount								
\$0.00								
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES						
	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						

2.37.	Priority creditor's name and mailing address KEISLING, DONALD R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Total claim</th> </tr> <tr> <td>\$2,051.37</td> </tr> </table>	Total claim	\$2,051.37	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Priority amount</th> </tr> <tr> <td>\$2,051.37</td> </tr> </table>	Priority amount	\$2,051.37
Total claim								
\$2,051.37								
Priority amount								
\$2,051.37								
				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00		
Nonpriority amount								
\$0.00								
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES						
	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						

2.38.	Priority creditor's name and mailing address KILLIAN, JEREMY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Total claim</th> </tr> <tr> <td>\$814.06</td> </tr> </table>	Total claim	\$814.06	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Priority amount</th> </tr> <tr> <td>\$814.06</td> </tr> </table>	Priority amount	\$814.06
Total claim								
\$814.06								
Priority amount								
\$814.06								
				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00		
Nonpriority amount								
\$0.00								
	Date or dates debt was incurred VARIOUS	Basis for the claim: WAGES						
	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						

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2.39.	Priority creditor's name and mailing address LASKEY, DAVID Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$260.64</td> </tr> </table>	Total claim	\$260.64	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$260.64</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$260.64	Nonpriority amount	\$0.00
Total claim										
\$260.64										
Priority amount										
\$260.64										
Nonpriority amount										
\$0.00										
2.40.	Priority creditor's name and mailing address LAWRENCE, JERRY L Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$657.97</td> </tr> </table>	Total claim	\$657.97	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$657.97</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$657.97	Nonpriority amount	\$0.00
Total claim										
\$657.97										
Priority amount										
\$657.97										
Nonpriority amount										
\$0.00										
2.41.	Priority creditor's name and mailing address LEWIS, JACQUELINE Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$1,425.34</td> </tr> </table>	Total claim	\$1,425.34	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,425.34</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$1,425.34	Nonpriority amount	\$0.00
Total claim										
\$1,425.34										
Priority amount										
\$1,425.34										
Nonpriority amount										
\$0.00										

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.42. Priority creditor's name and mailing address LEWIS, MICHAEL Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$523.15</td> <td style="text-align: center;">\$523.15</td> </tr> </table>	Total claim	Priority amount	\$523.15	\$523.15	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$523.15	\$523.15								
Nonpriority amount									
\$0.00									
2.43. Priority creditor's name and mailing address MARSHALL, DAVID Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,239.44</td> <td style="text-align: center;">\$1,239.44</td> </tr> </table>	Total claim	Priority amount	\$1,239.44	\$1,239.44	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$1,239.44	\$1,239.44								
Nonpriority amount									
\$0.00									
2.44. Priority creditor's name and mailing address MCGEE, RONDELL Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$932.10</td> <td style="text-align: center;">\$932.10</td> </tr> </table>	Total claim	Priority amount	\$932.10	\$932.10	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$932.10	\$932.10								
Nonpriority amount									
\$0.00									

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2.45.	Priority creditor's name and mailing address MILES, WALTER Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$1,047.82</td> </tr> </table>	Total claim	\$1,047.82	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,047.82</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$1,047.82	Nonpriority amount	\$0.00
Total claim										
\$1,047.82										
Priority amount										
\$1,047.82										
Nonpriority amount										
\$0.00										
2.46.	Priority creditor's name and mailing address MYRICK, SHONTE Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$541.40</td> </tr> </table>	Total claim	\$541.40	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$541.40</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$541.40	Nonpriority amount	\$0.00
Total claim										
\$541.40										
Priority amount										
\$541.40										
Nonpriority amount										
\$0.00										
2.47.	Priority creditor's name and mailing address PHELPS, JOSEPH Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$1,673.01</td> </tr> </table>	Total claim	\$1,673.01	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,673.01</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$1,673.01	Nonpriority amount	\$0.00
Total claim										
\$1,673.01										
Priority amount										
\$1,673.01										
Nonpriority amount										
\$0.00										

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.48.	Priority creditor's name and mailing address PRICE, NORMAN WILLIAM Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$873.52</td> </tr> </table>	Total claim	\$873.52	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$873.52</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$873.52	Nonpriority amount	\$0.00
Total claim										
\$873.52										
Priority amount										
\$873.52										
Nonpriority amount										
\$0.00										
2.49.	Priority creditor's name and mailing address RANSOM, ROBERT Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$860.26</td> </tr> </table>	Total claim	\$860.26	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$860.26</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$860.26	Nonpriority amount	\$0.00
Total claim										
\$860.26										
Priority amount										
\$860.26										
Nonpriority amount										
\$0.00										
2.50.	Priority creditor's name and mailing address RIVERS, WILLIAM Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$163.55</td> </tr> </table>	Total claim	\$163.55	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$163.55</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$163.55	Nonpriority amount	\$0.00
Total claim										
\$163.55										
Priority amount										
\$163.55										
Nonpriority amount										
\$0.00										

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2.51. Priority creditor's name and mailing address ROBINSON, WILBUR STANLEY Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$629.55</td> <td style="text-align: center;">\$629.55</td> </tr> </table>	Total claim	Priority amount	\$629.55	\$629.55	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$629.55	\$629.55								
Nonpriority amount									
\$0.00									
2.52. Priority creditor's name and mailing address SAPP, CAROLYN Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,618.81</td> <td style="text-align: center;">\$1,618.81</td> </tr> </table>	Total claim	Priority amount	\$1,618.81	\$1,618.81	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$1,618.81	\$1,618.81								
Nonpriority amount									
\$0.00									
2.53. Priority creditor's name and mailing address SCHAETZ, CHRISTOPH Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$5,839.39</td> <td style="text-align: center;">\$5,839.39</td> </tr> </table>	Total claim	Priority amount	\$5,839.39	\$5,839.39	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount								
\$5,839.39	\$5,839.39								
Nonpriority amount									
\$0.00									

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.54.	Priority creditor's name and mailing address SESSON, CORTEZ D Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$39.51</td> </tr> </table>	Total claim	\$39.51	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$39.51</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$39.51	Nonpriority amount	\$0.00
Total claim										
\$39.51										
Priority amount										
\$39.51										
Nonpriority amount										
\$0.00										
2.55.	Priority creditor's name and mailing address SESSON, TONY Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$408.39</td> </tr> </table>	Total claim	\$408.39	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$408.39</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$408.39	Nonpriority amount	\$0.00
Total claim										
\$408.39										
Priority amount										
\$408.39										
Nonpriority amount										
\$0.00										
2.56.	Priority creditor's name and mailing address SHORT, JOHN M Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$758.10</td> </tr> </table>	Total claim	\$758.10	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$758.10</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$758.10	Nonpriority amount	\$0.00
Total claim										
\$758.10										
Priority amount										
\$758.10										
Nonpriority amount										
\$0.00										

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2.57.	Priority creditor's name and mailing address STATE OF NORTH CAROLINA PO BOX 25000 RALEIGH NC 27640-0001 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) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WITHHOLDING TAXES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$4,257.11</td> <td style="text-align: center;">\$4,257.11</td> </tr> </table>	Total claim	Priority amount	\$4,257.11	\$4,257.11	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount									
\$4,257.11	\$4,257.11									
Nonpriority amount										
\$0.00										
2.58.	Priority creditor's name and mailing address TURNER, CORNELIUS Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,248.43</td> <td style="text-align: center;">\$1,248.43</td> </tr> </table>	Total claim	Priority amount	\$1,248.43	\$1,248.43	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount									
\$1,248.43	\$1,248.43									
Nonpriority amount										
\$0.00										
2.59.	Priority creditor's name and mailing address TURNER, GARY W Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$1,127.87</td> <td style="text-align: center;">\$1,127.87</td> </tr> </table>	Total claim	Priority amount	\$1,127.87	\$1,127.87	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Nonpriority amount	\$0.00
Total claim	Priority amount									
\$1,127.87	\$1,127.87									
Nonpriority amount										
\$0.00										

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.60.	Priority creditor's name and mailing address WARD, KUSHITE IDRIS Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$695.00</td> </tr> </table>	Total claim	\$695.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$695.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$695.00	Nonpriority amount	\$0.00
Total claim										
\$695.00										
Priority amount										
\$695.00										
Nonpriority amount										
\$0.00										
2.61.	Priority creditor's name and mailing address WASHINGTON, ANNETTE Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$751.55</td> </tr> </table>	Total claim	\$751.55	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$751.55</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$751.55	Nonpriority amount	\$0.00
Total claim										
\$751.55										
Priority amount										
\$751.55										
Nonpriority amount										
\$0.00										
2.62.	Priority creditor's name and mailing address WHITAKER, MICHAEL Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$886.82</td> </tr> </table>	Total claim	\$886.82	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$886.82</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$886.82	Nonpriority amount	\$0.00
Total claim										
\$886.82										
Priority amount										
\$886.82										
Nonpriority amount										
\$0.00										

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2.63.	Priority creditor's name and mailing address WHITFIELD, SHANEKILA Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$766.67</td> </tr> </table>	Total claim	\$766.67	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$766.67</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$766.67	Nonpriority amount	\$0.00
Total claim										
\$766.67										
Priority amount										
\$766.67										
Nonpriority amount										
\$0.00										
2.64.	Priority creditor's name and mailing address WILLIAMS, DOMINIQUE Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$685.90</td> </tr> </table>	Total claim	\$685.90	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$685.90</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$685.90	Nonpriority amount	\$0.00
Total claim										
\$685.90										
Priority amount										
\$685.90										
Nonpriority amount										
\$0.00										
2.65.	Priority creditor's name and mailing address WIMBUSH, BOBBY Address Intentionally Omitted 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)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: WAGES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$385.44</td> </tr> </table>	Total claim	\$385.44	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$385.44</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table>	Priority amount	\$385.44	Nonpriority amount	\$0.00
Total claim										
\$385.44										
Priority amount										
\$385.44										
Nonpriority amount										
\$0.00										

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

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

3.1. Nonpriority creditor's name and mailing address 028 WASTE INDUSTRIES 2211 HWY 301 N HALIFAX NC 27839 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$992.62
3.2. Nonpriority creditor's name and mailing address 360 FOREST PRODUCTS, INC. LARRY C BATCHELOR BUYER PO BOX 157 WALLACE NC 28466 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$68,618.12
3.3. Nonpriority creditor's name and mailing address AA ELECTRIC S.E., INC. GREG PETERSON VP OPERATIONS 2011 SOUTH COMBEE RD LAKELAND FL 33801 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$28,282.47

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

3.4.	Nonpriority creditor's name and mailing address ACCURATE BACKGROUND CHECK, INC. 519 SOUTH PINE AVE Ocala FL 34471	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$4,115.50
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5.	Nonpriority creditor's name and mailing address ADP, INC. 1851 N RESLER DRIVE EL PASO TX 79912	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim \$4,405.61
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6.	Nonpriority creditor's name and mailing address ADVANTECH CORPORATION PO BOX 45895 SAN FRANCISCO CA 94145	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Amount of claim UNDETERMINED
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

3.7.	Nonpriority creditor's name and mailing address AES INDUSTRIAL SUPPLIES OLYMPIC HOUSE COLLETT SOUTHMEAD PARL DIDCOT OX11 7WB UNITED KINGDOM Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.8.	Nonpriority creditor's name and mailing address AIR SYSTEMS CORP. 113 OAK WIND DRIVE, SUITE 202 ADVANCE NC 27006 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,085.23
3.9.	Nonpriority creditor's name and mailing address AIRGAS, USA LLC PO BOX 532609 ATLANTA GA 30353 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,792.25

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

3.10.	Nonpriority creditor's name and mailing address ALFHA GMBH & CO. KG GIEBELSCHEIDSTRASSE 23 57413 FINNENTROP - 05 GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.11.	Nonpriority creditor's name and mailing address ALLIED ELECTRONICS, INC. 7151 JACK NEWELL BLVD SOUTH FT. WORTH TX 76118 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,708.70
3.12.	Nonpriority creditor's name and mailing address AMERICAN STAINLESS & SUPPLY 815 STATE RD CHERAW SC 29520 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,210.62

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

3.13.	Nonpriority creditor's name and mailing address APPLIED INDUSTRIAL TECHNOLOGIES 1 APPLIED PLZ CLEVELAND OH 44115 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,453.50
3.14.	Nonpriority creditor's name and mailing address ARC3 GASES NORTH CAROLINA REGIONAL OFFICE 1660 HWY 301 SOUTH DUNN NC 28334 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,691.64
3.15.	Nonpriority creditor's name and mailing address ARROW EXTERMINATORS 11693 EAST NC97 ROCKY MOUNT NC 27802 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,200.00

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3.16.	Nonpriority creditor's name and mailing address ASC CONSTRUCTION EQUIPMENT USA INC. 4520 PINE ST SMYRNA GA 30080 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.17.	Nonpriority creditor's name and mailing address ASCENDUM MACHINERY, INC. 9115 HARRIS CORNERS PKWY STE 450 CHARLOTTE NC 28269 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,538.35
3.18.	Nonpriority creditor's name and mailing address ATLANTA BELTING COMPANY 560 EDGEWOOD AVE NE ATLANTA GA 30312 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,118.88

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

3.19.	Nonpriority creditor's name and mailing address BEKAWORLD LP 2775 NORTH HILLS DR NE ATLANTA GA 30305 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.20.	Nonpriority creditor's name and mailing address BEST RENTALS, INC. 1250 S. CHURCH STREET ROCKY MOUNT NC 27803 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$33.74
3.21.	Nonpriority creditor's name and mailing address BLUEALLY 1255 CRESCENT GREEN STE 300 CARY NC 27518 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,344.55

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3.22.	Nonpriority creditor's name and mailing address BRANDON JONES 295 ROSE RD. PIKEVILLE NC 27863 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,993.00
3.23.	Nonpriority creditor's name and mailing address BURKLE + SCHOCK TRANSFORMATOREN GMB GEWERBESTRABE 38 STUTTGART 70565 GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.24.	Nonpriority creditor's name and mailing address BURNS, DAY & PRESNELL, P.A. 2626 GLENWOOD AVE STE 560 RALEIGH NC 27608 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

3.25.	Nonpriority creditor's name and mailing address C.H.ROBINSON COMPANY BEN CAMPBELL PO BOX 9121 MINNEAPOLIS MN 55480 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$321.29
3.26.	Nonpriority creditor's name and mailing address CAROLINA OFFICE SYSTEMS 13245 REESE BLVD WEST STE 130 HUNTERSVILLE NC 28078 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,683.09
3.27.	Nonpriority creditor's name and mailing address CENTURY LINK 100 CENTURYLINK DR MONROE LA 71203 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.28.	Nonpriority creditor's name and mailing address CLAYTON INDUSTRIES 17477 HURLEY ST CITY OF INDUSTRY CA 91744 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,969.24
3.29.	Nonpriority creditor's name and mailing address D&T PROCESS OPTIMIZATION, LLC 2987 STALLINGS RD VALDOSTA GA 31605 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.30.	Nonpriority creditor's name and mailing address DAMAGE RECOVERY PO BOX 843369 KANSAS CITY MO 64184 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$760.00

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3.31.	Nonpriority creditor's name and mailing address DEUTSCHE LEASING USA INC MORITZ VON GEMMINGEN SENIOR VICE PRESIDENT 190 SOUTH LASALLE ST STE 2150 CHICAGO IL 60603 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LEASED EQUIPMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$418,946.61
3.32.	Nonpriority creditor's name and mailing address DILMAR OIL CO. PO BOX 5629 FLORENCE SC 29502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$71.26
3.33.	Nonpriority creditor's name and mailing address DON KEISLING 1103 EAST 7TH STREET ROANOKE RAPIDS NC 27870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.34.	Nonpriority creditor's name and mailing address EASTERN PETROLEUM CORP 347 RINGWOOD RD ENFIELD NC 27823 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.35.	Nonpriority creditor's name and mailing address ELEKTRO FISCHER USA, LP 1900 INTERNATIONAL PK DR BIRMINGHAM AL 35243 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$285,573.50
3.36.	Nonpriority creditor's name and mailing address ENTERPRISE STEPHANIE SHACK CHIEF LEGAL OFFICER 811 MAIN ST KANSAS CITY MO 64184 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,111.16

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3.37.	Nonpriority creditor's name and mailing address FASTENAL COMPANY JOHN MILEK VP GENERAL COUNSEL 2001 THEURER BLVD WINONA MN 55987 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,141.64
3.38.	Nonpriority creditor's name and mailing address FEDEX MARK ALLEN GENERAL COUNSEL 3680 HACKS CROSS RD MEMPHIS TN 38125 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$398.00
3.39.	Nonpriority creditor's name and mailing address GARNER LANDSCAPING AND LAWN 615 THREE BRIDGES RD GRAND RAPIDS NC 27870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,557.14

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3.40.	Nonpriority creditor's name and mailing address GIW INDUSTRIES 1351 SR 60 WEST MULBERRY FL 33860 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,933.61
3.41.	Nonpriority creditor's name and mailing address GREEN ENGINEERING 303 GOLDSBORO ST EAST WILSON NC 27893 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,749.76
3.42.	Nonpriority creditor's name and mailing address GREENLINE CDF SUBFUND XXIX LLC GREENLINE COMMUNITY VENTURES LLC RANDY KAHN/J NATHAN PERRY 1324 15TH STREET DENVER CO 80202 Date or dates debt was incurred JULY 2018 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LOAN Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,098,179.60

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3.43.	Nonpriority creditor's name and mailing address GREENLINE CDF SUBFUND XXXIV LLC GREENLINE COMMUNITY VENTURES LLC RANDY KAHN/J NATHAN PERRY 1324 15TH STREET DENVER CO 80202 Date or dates debt was incurred JULY 2018 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LOAN Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$16,392,718.34
3.44.	Nonpriority creditor's name and mailing address HALES & ASSOCIATES, INC. 327 SOUTH SWING RD GREENSBORO NC 27409 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,188.14
3.45.	Nonpriority creditor's name and mailing address HALIFAX CO. PUBLIC UTILITIES 26 N KING ST HALIFAX NC 27839 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$183.28

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3.46.	Nonpriority creditor's name and mailing address HALIFAX COUNTY, NC M GLYNN ROLLINS JR HALIFAX COUNTY ATTORNEY PO BOX 38 HALIFAX NC 27839 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.47.	Nonpriority creditor's name and mailing address HALIFAX ELECTRIC MEMBERSHIP CORPORATION P. O. BOX 667 ENFIELD NC 27823 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$154,438.96
3.48.	Nonpriority creditor's name and mailing address HALIFAX ELECTRIC MEMBERSHIP CORPORATION 208 WEST WHITEFILED STREET PO BOX 667 ENFIELD NC 27823 Date or dates debt was incurred <hr/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.49.	Nonpriority creditor's name and mailing address HALIFAX WORKS 210B SMITH CHURCH ROAD BUILDING 2 ROANOKE RAPIDS NC 27870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$156.00
3.50.	Nonpriority creditor's name and mailing address HARRY HOUSE SECURITY SERVICES HARRY ALLEN HOUSE III PO BOX 1269 ROANOKE RAPIDS NC 27870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$111,443.30
3.51.	Nonpriority creditor's name and mailing address HATEC INTERNATIONAL, INC. 10821 TRAIN CT HOUSTON TX 77041 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,633.69

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3.52.	Nonpriority creditor's name and mailing address HELUKABEL USA MARKUS DANNHEIM PRESIDENT 1201 WESEMANN DR WEST DUNDEE IL 60118 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,879.96
3.53.	Nonpriority creditor's name and mailing address HOFFMANN QUALITY TOOLS 9041 EXECUTIVE PK DR STE 25 KNOXVILLE TN 37923 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,596.68
3.54.	Nonpriority creditor's name and mailing address HOLLAND SUPPLY CO. PO BOX 987 HENDERSON NC 27536 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,032.68

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3.55.	Nonpriority creditor's name and mailing address HP INC KIM M RIVERA CHIEF LEGAL OFFICER AND GENERAL COUNSEL 1501 PAGE MILL RD PALO ALTO CA 94304 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,171.72
3.56.	Nonpriority creditor's name and mailing address HREADY 9871 SW 66TH ST MIAMI FL 33173 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$29,614.60
3.57.	Nonpriority creditor's name and mailing address INDUSTRIAL AND CONSTRUCTION ENTERPRISES PO BOX 127 WASHINGTON NC 27889 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,077.53

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3.58.	Nonpriority creditor's name and mailing address INP NORTH AMERICA, INC. 11390 OLD ROSWELL RD STE 126 ALPHARETTA GA 30009 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.59.	Nonpriority creditor's name and mailing address INSIGHT DIRECT USA, INC. SOUTH HARL AVENUE TEMPE AZ 85283 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,887.42
3.60.	Nonpriority creditor's name and mailing address JOHNNIE RAYMOND ET AL JAY P LECHNER PA JAY P LECHNER 201 E KENNEDY BLVD STE 412 TAMPA FL 33602 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.61.	Nonpriority creditor's name and mailing address JOSEPH PHELPS 260 PIPER LN ENFIELD NC 27823 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$806.76
3.62.	Nonpriority creditor's name and mailing address K&L GATES, LLP JAMES SEGERHAHL MANAGING PARTNER 200 SOUTH BISCAYNE BLVD STE 3900 MIAMI FL 33131 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$122,058.35
3.63.	Nonpriority creditor's name and mailing address KALMAR USA INC. 415 E DUNDEE ST OTTAWA KS 66067 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LEASED EQUIPMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$297,058.42

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3.64.	Nonpriority creditor's name and mailing address KALMAR/WELLS FARGO EQUIP 1230 N. MULBERRY STREET OTTAWA KS 66067-1543 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$160,531.34
3.65.	Nonpriority creditor's name and mailing address KLAUSNER HOLDING USA INC. 17152 46TH TRACE LIVE OAK FL 32060 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: RELATED PARTY DUE TO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,712,189.00
3.66.	Nonpriority creditor's name and mailing address KLAUSNER HOLZ SACHSEN GMBH INDUSTRIESTRASSE 1 KODERSDORF 02923 GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: RELATED PARTY DUE TO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$108,720.00

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3.67.	Nonpriority creditor's name and mailing address KLAUSNER HOLZ THÜRINGEN GMBH AM BAHNHOF 123 SAALBURG-EBERSDORF 16 07929 GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: RELATED PARTY DUE TO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,883,496.00
3.68.	Nonpriority creditor's name and mailing address KLAUSNER LUMBER ONE LLC 17152 46TH TRACE LIVE OAK FL 32060 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: RELATED PARTY DUE TO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,702,974.00
3.69.	Nonpriority creditor's name and mailing address KLAUSNER NORDAMERIKA BETEILIGUNGS GMBH PARZACHWEG 3 6380 ST. JOHANN IN TIROL AUSTRIA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: RELATED PARTY DUE TO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,409,288.38

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3.70.	Nonpriority creditor's name and mailing address KLAUSNER TRADING INTERNATIONAL GMBH BAHNHOFSTRABE 13 OBERNDORF IN TIROL T 6372 AUSTRIA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: RELATED PARTY DUE TO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,131,545.00
3.71.	Nonpriority creditor's name and mailing address KLAUSNER TRADING USA INC. 17152 46TH TRACE LIVE OAK FL 32060 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: RELATED PARTY DUE TO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,584,497.12
3.72.	Nonpriority creditor's name and mailing address KLAUSNER TRADING USA INC. 401(K) PROFIT SHARING PLAN AND TRUST C/O INTERNAL REVENUE SERVICE 1111 CONSTITUTION AVE., NW WASHINGTON DC 20224 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: UNFUNDED PENSION OBLIGATIONS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,222.75

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3.73.	Nonpriority creditor's name and mailing address KONECRANES, INC. 310 PARKWAY VIEW DR PITTSBURGH PA 15205 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,559.53
3.74.	Nonpriority creditor's name and mailing address KUEHNE & NAGEL PO BOX 7247, LOCKBOX 7992 PHILADELPHIA PA 19170 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$113,736.09
3.75.	Nonpriority creditor's name and mailing address LE BLEU OF WILSON PO BOX 3062 WILSON NC 27895 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,051.23

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3.76.	Nonpriority creditor's name and mailing address LEDINEK MASCHINEN UND ANLAGEN GMBH VÖLKERMARKTER STRASSE 1 9150 BLEIBURG/PLIBERK AUSTRIA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.77.	Nonpriority creditor's name and mailing address LIEBHERR EQUIPMENT SOURCE 4100 CHESTNUT AVE NEWPORT NEWS VA 23607 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,326.38
3.78.	Nonpriority creditor's name and mailing address LINCK HOLZVERARBEITUNGSTECHNIK GMBH APPENWEIERER STRASSE 46 77704 OBERKIRCH GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,551.06

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3.79.	Nonpriority creditor's name and mailing address LINCOLN NATIONAL LIFE INSURANCE DENNIS R GLASS PRESIDENT RADNOR FINANCIAL CENTER 150 NORTH RADNOR CHESTER RD STRAFFORD PA 19087 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$20,566.60
3.80.	Nonpriority creditor's name and mailing address LSAB PRODUKTION AB REPSLAGAREGATAN 21 LAHOLM 312 32 SWEDEN Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$69,774.01
3.81.	Nonpriority creditor's name and mailing address MAHILD DRYING TECHNOLOGIES GMBH MEISENWEG 1 NÜRTINGEN 72622 GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$887,159.25

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3.82.	Nonpriority creditor's name and mailing address METTLER TOLEDO 806 TYVOLA RD STE 108 CHARLOTTE NC 28290 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,465.81
3.83.	Nonpriority creditor's name and mailing address MICHAEL WEINIG, INC. 124 CROSSLAKE PK DR MOORESVILLE NC 28117 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,230.79
3.84.	Nonpriority creditor's name and mailing address MOTION INDUSTRIES 1605 ALTON RD BIRMINGHAM AL 35210 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,751.10

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3.85.	Nonpriority creditor's name and mailing address MSC INDUSTRIAL SUPPLY PO BOX 953635 ST. LOUIS MO 63195-3635 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$21,216.65
3.86.	Nonpriority creditor's name and mailing address MSC INDUSTRIAL SUPPLY CO. 525 HARBOUR PLACE DRIVE DAVIDSON NC 28036-7444 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.87.	Nonpriority creditor's name and mailing address NEW DIXIE OIL CORPORATION 1501 MARSHALL ST ROANOKE RAPIDS NC 27870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.88.	Nonpriority creditor's name and mailing address NEXSEN PRUET LLC LAURIE A BECKER 1230 MAIN ST STE 700 COLUMBIA SC 29201 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,954.65
3.89.	Nonpriority creditor's name and mailing address NORFOLK BEARINGS & SUPPLY CO, INC. 3512 EAST PRINCESS ANNE RD NORFOLK VA 23502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.90.	Nonpriority creditor's name and mailing address OHANA TREE HOLDINGS, LLC 5702 PLANK ROAD DILLWYN VA 23936 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,049.10

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3.91.	Nonpriority creditor's name and mailing address PAC-VAN, INC 9155 HARRISON PK CT INDIANAPOLIS IN 46216 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,836.50
3.92.	Nonpriority creditor's name and mailing address PIEDMONT GAS PO BOX 660920 DALLAS TX 75266 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: UTILITIES PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$215,094.99
3.93.	Nonpriority creditor's name and mailing address PIEDMONT NATURAL GAS PO BOX 660920 DALLAS TX 75266 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,616,234.47

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3.94.	Nonpriority creditor's name and mailing address POWERTECH CONTROLS CO., INC. 101 CHRISTOPHER ST RONKONKOMA NY 11779 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,999.75
3.95.	Nonpriority creditor's name and mailing address PREFERRED UTILITIES MANUFACTURING 31-35 SOUTH STREET DANBURY CT 06810 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,447.17
3.96.	Nonpriority creditor's name and mailing address R&R BETH GMBH R AND R-TECHNIK GMBH GEWERBEGEBIET UNTERLEMNITZ 7 07356 BAD LOBENSTEIN GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$67,450.35

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3.97.	Nonpriority creditor's name and mailing address RADIO EXPRESS 5407 C PRT ROYAL RD SPRINGFIELD VA 22151 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,850.00
3.98.	Nonpriority creditor's name and mailing address RAYEN INTEC GMBH AM HOHEN UFER 4 07318 SAALFELD/SAALE GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$47,934.93
3.99.	Nonpriority creditor's name and mailing address REA ELEKTRONIK, INC. RAY TURCHI PRESIDENT 7307 YOUNG DR STE B BEDFORD OH 44146 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$22,044.20

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3.100.	Nonpriority creditor's name and mailing address RISI, INC. 4 ALFRED CIR BEDFORD MA 01730 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$150.00
3.101.	Nonpriority creditor's name and mailing address RIVERTOWN TIRE 40 SYCAMORE ST WELDON NC 27890 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,187.53
3.102.	Nonpriority creditor's name and mailing address ROANOKE PORTA-JOHNS PO BOX 1123 ROANOKE RAPIDS NC 27870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,680.00

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3.103.	Nonpriority creditor's name and mailing address ROBERT E. MASON & ASSOCIATES, INC. ROBERT E MASON IV CEO AND PRESIDENT 1726 NORTH GRAHAM ST CHARLOTTE NC 28206 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,267.80
3.104.	Nonpriority creditor's name and mailing address ROCKY MOUNT ELECTRICAL MOTOR PO BOX 1063 ROCKY MOUNT NC 27802 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,385.00
3.105.	Nonpriority creditor's name and mailing address ROSEBURG RESOURCES CO. 3660 GATEWAY ST SPRINGFIELD OR 37477 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$14,025.30

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3.106.	Nonpriority creditor's name and mailing address RV CHAMBER OF COMMERCE, INC. PO BOX 519 ROANOKE RAPIDS NC 27870 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.107.	Nonpriority creditor's name and mailing address S.D. MYERS, LLC EDWARD MUCKLEY 180 SOUTH AVE TALLMADGE OH 44278 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,482.00
3.108.	Nonpriority creditor's name and mailing address SAMPSON-BLADEN OIL CO., INC. 510 COMMERCE ST PO BOX 469 CLINTON NC 28328 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,829.61

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3.109.	Nonpriority creditor's name and mailing address SOUTHEAST INDUSTRIAL EQUIPMENT ROBERT DUNLAP CFO 12200 STEELE CREEK RD CHARLOTTE NC 28273 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$45,933.07
3.110.	Nonpriority creditor's name and mailing address SPRINGER MASCHINENFABRIK AG TIMO SPRINGER HANS-SPRINGER-STRASSE 2 9360 FRIESACH/KÄRNTEN AUSTRIA Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.111.	Nonpriority creditor's name and mailing address STATE ELECTRIC SUPPLY CO. 2010 2ND AVE HUNTINGTON WV 25703 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.112.	Nonpriority creditor's name and mailing address STRATEGIC VALUE MEDIA 8700 INDIAN CREEK PKWY STE 300 OVERLAND PARK KS 66210 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$595.00
3.113.	Nonpriority creditor's name and mailing address SUNBELT RENTALS, INC ROD SAMPLES CFO 2341 DEERFIELD DR FORT MILL SC 29715 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$37,613.55
3.114.	Nonpriority creditor's name and mailing address TECHNOGROUP IT-SERVICE-GMBH FELDBERGSTRASSE 6 65239 HOCHHEIM AM MAIN GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,336.94

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3.115.	Nonpriority creditor's name and mailing address THE MACOMB GROUP, INC. WILLIAM MCGIVERN CEO 6600 EAST 15 MILE RD STERLING HEIGHTS MI 48312 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$90.12
3.116.	Nonpriority creditor's name and mailing address TKM GMBH IN DER FLEUTE 18 42897 REMSCHEID GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$32,654.93
3.117.	Nonpriority creditor's name and mailing address TMC TRANSPORTATION - BYRON BYRON 6115 SW LELAND AVE DES MOINES IA 50321 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,050.00

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3.118.	Nonpriority creditor's name and mailing address TRINITY CONSULTANTS, INC. JAY HOFMANN CEO 12700 PARK CENTRAL DR STE 2100 DALLAS TX 75251 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,903.00
3.119.	Nonpriority creditor's name and mailing address TRUSTMARK VOLUNTARY BENEFIT Solutio STEVE AUBURN GENERAL COUNSEL 400 NORTH FIELD DR LAKE FOREST IL 60045 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,635.04
3.120.	Nonpriority creditor's name and mailing address TUV SUD PRODUCT SVC GMBH RIDLERSTRASSE 65 80339 MUNICH GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,376.72

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3.121. Nonpriority creditor's name and mailing address U.S. DEPARTMENT OF HOMELAND SECURITY 215 E STATE STREET ITHACA NY 14850 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,035.00
3.122. Nonpriority creditor's name and mailing address UHC PREMIUM BILLING TOM ROOS CHIEF ACCOUNTING OFFICER PO BOX 94017 PALATINE IL 60094-4017 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$133,597.67
3.123. Nonpriority creditor's name and mailing address UNION LEVEL LAND AND TIMBER, LLC 4863 UNION LEVEL RD SOUTH HILL VA 23970 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,453.01

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3.124.	Nonpriority creditor's name and mailing address UNITED RENTALS 1550 NORTHWEST DR NW ATLANTA GA 30318 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,417.28
3.125.	Nonpriority creditor's name and mailing address UPS SUPPLY CHAIN SOLUTIONS, INC. SETH BRUCKNER VP LEGAL 12380 MORRIS RD ALPHARETTA GA 30005 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17.40
3.126.	Nonpriority creditor's name and mailing address VOLLMER OF AMERICA CORP. 105 BROADWAY AVE CARNEGIE PA 15106 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,931.38

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3.127.	Nonpriority creditor's name and mailing address VSC FIRE & SECURITY, INC. 10343B KINGS ACRES ROAD ASHLAND VA 23005 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$313,038.86
3.128.	Nonpriority creditor's name and mailing address WOLSELEY INDUSTRIAL GROUP 12500 JEFFERSON AVE NEWPORT NEWS VA 23602 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$60.54

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****Part 3: List Others to Be Notified About Unsecured Claims**

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

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

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
ARMSTRONG LAW, PLLC H. LAWRENCE ARMSTRONG, JR. 119 WHITFIELD STREET PO BOX 187 ENFIELD NC 27823	Part 2 line 3.48	_____
ARMSTRONG LAW, PLLC H. LAWRENCE ARMSTRONG, JR. 119 WHITFIELD STREET PO BOX 187 ENFIELD NC 27823	Part 2 line 3.47	_____
BUTLER SNOW LLP 1801 CALIFORNIA STREET SUITE 5100 DENVER CO 80202	Part 2 line 3.42	_____
BUTLER SNOW LLP 1801 CALIFORNIA STREET SUITE 5100 DENVER CO 80202	Part 2 line 3.43	_____
KUTAK ROCK LLP SCOTT C. NEILL 1650 FARNAM STREET OMAHA NE 68102-2186	Part 2 line 3.42	_____
KUTAK ROCK LLP SCOTT C. NEILL 1650 FARNAM STREET OMAHA NE 68102-2186	Part 2 line 3.43	_____
M GLYNN ROLLINS JR HALIFAX COUNTY ATTORNEY PO BOX 38 HALIFAX NC 27839	Part 1 line 2.26	_____
MARYANN ELIZABETH BLAKE 404 HEDERSONVILLE HWY PO BOX 1906 WALTERBORO SC 29488-0020	Part 2 line 3.86	_____
PARKER POE ADAMS & BERNSTEIN LLP BRIAN D DARER,ESQ PNC PLAZA 301 FAYETTEVILLE ST.,STE 1400 RALEIGH NC 27601	Part 1 line 2.26	_____
PARKER POE ADAMS & BERNSTEIN LLP BRIAN D DARER,ESQ PNC PLAZA 301 FAYETTEVILLE ST.,STE 1400 RALEIGH NC 27601	Part 2 line 3.46	_____
PENSION BENEFIT GUARANTY CORPORATION OFFICE OF CHIEF COUNSEL 1200 K STREET NW WASHINGTON DC 20005	Part 2 line 3.72	_____

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

SOCIAL SECURITY ADMINISTRATION
OFFICE OF GENERAL COUNSEL
6401 SECURITY BOULEVARD
BALTIMORE MD 21235

Part 1 line 2.16

VANN ATTORNEYS, PLLC
LINDSEY FERNALD
1720 HILLSBOROUGH STREET
SUITE 200
RALEIGH NC 27605

Part 2 line 3.29

WELLS FARGO BANK N.A.
C/O WELLS FARGO COMMUNITY DEV.
ENTERPRISES, INC.
NMTC LOAN ADMINISTRATOR
401 B STREET SUITE 304A
MAC E2901 031
SAN DIEGO CA 92101

Part 2 line 3.42

WELLS FARGO BANK N.A.
C/O WELLS FARGO COMMUNITY DEV.
ENTERPRISES, INC.
NMTC LOAN ADMINISTRATOR
401 B STREET SUITE 304A
MAC E2901 031
SAN DIEGO CA 92101

Part 2 line 3.43

WELLS FARGO BANK N.A.
WELLS FARGO LAW DEPT.
BINA GALAH
45 FREMONT ST
26TH FLOOR
SAN FRANCISCO CA 94105-2204

Part 2 line 3.42

WELLS FARGO BANK N.A.
WELLS FARGO LAW DEPT.
BINA GALAH
45 FREMONT ST
26TH FLOOR
SAN FRANCISCO CA 94105-2204

Part 2 line 3.43

YOUNG CONAWAY STARGATT & TAYLOR LLP
JOSEPH M BARRY; SHANE M REIL
RODNEY SQUARE
1000 NORTH KING ST
WILMINGTON DE 19801

Part 1 line 2.26

YOUNG CONAWAY STARGATT & TAYLOR LLP
JOSEPH M BARRY; SHANE M REIL
RODNEY SQUARE
1000 NORTH KING ST
WILMINGTON DE 19801

Part 2 line 3.46

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518****Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.**Total of claim amounts**

5a. Total claims from Part 1	5a.		\$81,364.76
5b. Total claims from Part 2	5b.	+	\$80,680,421.46
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		\$80,761,786.22

Fill in this information to identify the case:**Debtor name:** Klausner Lumber Two LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 20-11518☐ Check if this is an amended filingOfficial Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

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

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

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

2. List all contracts and unexpired leases

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

- | | | | |
|------|---|---|--|
| 2.1. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | APARTMENT LEASE
REAL PROPERTY LEASE 404 COLONY SQUARE, ROCKY MOUNT NC 27804
LESSEE
10/31/2020
_____ | COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804 |
| 2.2. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | APARTMENT LEASE
REAL PROPERTY LEASE 407 COLONY SQUARE, ROCKY MOUNT NC 27804
LESSEE
7/31/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804 |
| 2.3. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | APARTMENT LEASE
REAL PROPERTY LEASE 505 COLONY SQUARE, ROCKY MOUNT NC 27804
LESSEE
10/31/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804 |

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- 2.4. **Title of contract** APARTMENT LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE 515 COLONY SQUARE, ROCKY MOUNT NC 27804
- Nature of debtor's interest** LESSEE COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804
- State the term remaining** 10/31/2020
- List the contract number of any government contract** _____
- 2.5. **Title of contract** APARTMENT LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE 517 COLONY SQUARE, ROCKY MOUNT NC 27804
- Nature of debtor's interest** LESSEE COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804
- State the term remaining** 9/30/2020
- List the contract number of any government contract** _____
- 2.6. **Title of contract** APARTMENT LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE 702 COLONY SQUARE, ROCKY MOUNT NC 27804
- Nature of debtor's interest** LESSEE COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804
- State the term remaining** 10/31/2020
- List the contract number of any government contract** _____
- 2.7. **Title of contract** APARTMENT LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE 705 COLONY SQUARE, ROCKY MOUNT NC 27804
- Nature of debtor's interest** LESSEE COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804
- State the term remaining** 10/31/2020
- List the contract number of any government contract** _____
- 2.8. **Title of contract** APARTMENT LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE 902 COLONY SQUARE, ROCKY MOUNT NC 27804
- Nature of debtor's interest** LESSEE COLONY SQUARE APARTMENTS
106 COLONY SQUARE
ROCKY MOUNT NC 27804
- State the term remaining** 7/31/2020
- List the contract number of any government contract** _____

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

2.9.	Title of contract	APARTMENT LEASE	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
	State what the contract or lease is for	REAL PROPERTY LEASE 904 COLONY SQUARE, ROCKY MOUNT NC 27804	
	Nature of debtor's interest	LESSEE	COLONY SQUARE APARTMENTS 106 COLONY SQUARE ROCKY MOUNT NC 27804
	State the term remaining	10/31/2020	
	List the contract number of any government contract	_____	
2.10.	Title of contract	LEASE AGREEMENT	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
	State what the contract or lease is for	(DEUTSCHE LEASING CONTRACT#100-0011073-005)	
	Nature of debtor's interest	LESSEE	DEUTSCHE LEASING MASUDA FUNAI EIFERT AND MITCHELL LTD REINHOLD F KRAMMER ESQ 203 N LASALLE ST SUITE 2500 CHICAGO IL 60601-1262
	State the term remaining	_____	
	List the contract number of any government contract	_____	
2.11.	Title of contract	COMMUNITY ECONOMIC DEVELOPMENT AGREEMENT	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
	State what the contract or lease is for	ECONOMIC DEVELOPMENT	
	Nature of debtor's interest	_____	EIC OF THE STATE OF NORTH CAROLINA 301 NORTH WILMINGTON STREET 4301 MAIL SERVICE CENTER RALEIGH NC 27699-4301
	State the term remaining	6/30/2029	
	List the contract number of any government contract	_____	
2.12.	Title of contract	GENERAL LIABILITY INSURANCE POLICY 8546281	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
	State what the contract or lease is for	COMMERCIAL GENERAL LIABILITY COVERAGE POLICY	
	Nature of debtor's interest	INSURED	EVANSTON INSURANCE COMPANY TEN PARKWAY NORTH DEERFIELD IL 60015
	State the term remaining	5/1/2021	
	List the contract number of any government contract	_____	
2.13.	Title of contract	COMPANY PERFORMANCE AGREEMENT	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
	State what the contract or lease is for	ECONOMIC DEVELOPMENT	
	Nature of debtor's interest	_____	HALIFAX COUNTY M GLYNN ROLLINS JR HALIFAX COUNTY ATTORNEY PO BOX 38 HALIFAX NC 27839
	State the term remaining	UNKNOWN	
	List the contract number of any government contract	_____	

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- 2.14. **Title of contract** RURAL ECONOMIC DEVELOPMENT GRANT AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
M GLYNN ROLLINS JR
HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- State the term remaining** 12/31/2016
- List the contract number of any government contract** _____
- 2.15. **Title of contract** ECONOMIC DEVELOPMENT INCENTIVES GRANT AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
M GLYNN ROLLINS JR
HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.16. **Title of contract** PERFORMANCE AGREEMENT EXHIBIT D **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
M GLYNN ROLLINS JR
HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.17. **Title of contract** PERFORMANCE AGREEMENT SEWER RAIL SPUR PROJECT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
M GLYNN ROLLINS JR
HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.18. **Title of contract** COMMUNITY DEVELOPMENT BLOCK GRANT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
M GLYNN ROLLINS JR
HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- 2.19. **Title of contract** LAND AND RAILROAD FACILITIES
State what the contract or lease is for ECONOMIC DEVELOPMENT
Nature of debtor's interest _____
State the term remaining 6/28/2037
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 HALIFAX COUNTY
 M GLYNN ROLLINS JR
 HALIFAX COUNTY ATTORNEY
 PO BOX 38
 HALIFAX NC 27839
- 2.20. **Title of contract** AGREEMENT REGARDING RECONVEYANCE, RAIL CORRIDOR
State what the contract or lease is for ECONOMIC DEVELOPMENT
Nature of debtor's interest _____
State the term remaining UNKNOWN
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 HALIFAX COUNTY
 M GLYNN ROLLINS JR
 HALIFAX COUNTY ATTORNEY
 PO BOX 38
 HALIFAX NC 27839
- 2.21. **Title of contract** AGREEMENT REGARDING RECONVEYANCE, JOINT WATER STORAGE FACILITY
State what the contract or lease is for ECONOMIC DEVELOPMENT
Nature of debtor's interest _____
State the term remaining UNKNOWN
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 HALIFAX COUNTY
 M GLYNN ROLLINS JR
 HALIFAX COUNTY ATTORNEY
 PO BOX 38
 HALIFAX NC 27839
- 2.22. **Title of contract** DEED RAIL CORRIDOR
State what the contract or lease is for ECONOMIC DEVELOPMENT
Nature of debtor's interest _____
State the term remaining UNKNOWN
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 HALIFAX COUNTY
 M GLYNN ROLLINS JR
 HALIFAX COUNTY ATTORNEY
 PO BOX 38
 HALIFAX NC 27839
- 2.23. **Title of contract** AGREEMENT REGARDING RECONVEYANCE, TRANSFER OF LAND
State what the contract or lease is for ECONOMIC DEVELOPMENT
Nature of debtor's interest _____
State the term remaining UNKNOWN
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 HALIFAX COUNTY
 M GLYNN ROLLINS JR
 HALIFAX COUNTY ATTORNEY
 PO BOX 38
 HALIFAX NC 27839

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- 2.24. **Title of contract** DEED UTILITY CORRIDOR **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
- State the term remaining** UNKNOWN M GLYNN ROLLINS JR
- List the contract number of any government contract** _____ HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- 2.25. **Title of contract** KL2 FAILURE TO COMMENCE OPERATIONS **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
- State the term remaining** UNKNOWN M GLYNN ROLLINS JR
- List the contract number of any government contract** _____ HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- 2.26. **Title of contract** ECONOMIC DEVELOPMENT AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
- State the term remaining** UNKNOWN M GLYNN ROLLINS JR
- List the contract number of any government contract** _____ HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- 2.27. **Title of contract** EASEMENT & COVENANT AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
- State the term remaining** UNKNOWN M GLYNN ROLLINS JR
- List the contract number of any government contract** _____ HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- 2.28. **Title of contract** EASEMENT & RIGHT OF WAY AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
- State the term remaining** UNKNOWN M GLYNN ROLLINS JR
- List the contract number of any government contract** _____ HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- 2.29. **Title of contract** TEMPORARY EASEMENT AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX COUNTY
M GLYNN ROLLINS JR
HALIFAX COUNTY ATTORNEY
PO BOX 38
HALIFAX NC 27839
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.30. **Title of contract** KLAUSNER LUMBER HALIFAX POWER CONTRACT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX ELECTRIC MEMBERSHIP CORPORATION
208 WEST WHITFIELD STREET
PO BOX 667
ENFIELD NC 27823
- State the term remaining** 12/31/2028
- List the contract number of any government contract** _____
- 2.31. **Title of contract** SPECIAL WARRANTY DEED TO HEMC **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** ECONOMIC DEVELOPMENT
- Nature of debtor's interest** _____ HALIFAX ELECTRIC MEMBERSHIP CORPORATION
208 WEST WHITFIELD STREET
PO BOX 667
ENFIELD NC 27823
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.32. **Title of contract** COMMERCIAL CRIME INSURANCE POLICY UC22290229.19 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** CRIME INSURANCE
- Nature of debtor's interest** INSURED
- State the term remaining** 7/1/2020
- List the contract number of any government contract** _____ HISCOX INSURANCE COMPANY INC
104 SOUTH MICHIGAN AVENUE
STE 600
CHICAGO IL 60603
- 2.33. **Title of contract** COMMERCIAL FIRE INSURANCE POLICY 795012435 **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** BUILDING & EQUIPMENT INSURANCE COVERAGE
- Nature of debtor's interest** INSURED
- State the term remaining** 11/1/2020
- List the contract number of any government contract** _____ HOMELAND INSURANCE COMPANY
OF NEW YORK
1 BEACON STREET SUITE 5
BOSTON MA 02108

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- 2.34. **Title of contract** OWNER'S POLICY OF TITLE INSURANCE
State what the contract or lease is for TITLE INSURANCE
Nature of debtor's interest _____
State the term remaining UNKNOWN
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 INVESTORS TITLE INSURANCE COMPANY
 120 NORTH FRANKLIN STREET
 UNIT 1
 ROCKY MOUNTAIN NC 27804
- 2.35. **Title of contract** WELLS FARGO - ASSIGNOR - ADDENDUM IS TO EQUIPMENT LEASE NO. 0475396-100
State what the contract or lease is for EQUIPMENT LEASE - THREE (3) NEW 2015 KALMAR DCG16012 LIFT TRUCK S/N:S40400162, S/N:S40400161 AND S/N:S40400160
Nature of debtor's interest LESSEE
State the term remaining 12/30/2019
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 KALMAR USA INC
 415 E DUNDEE ST
 OTTAWA KS 66067
- 2.36. **Title of contract** WELLS FARGO - ASSIGNOR - ADDENDUM IS TO EQUIPMENT LEASE NO. 0475396-101
State what the contract or lease is for EQUIPMENT LEASE - FOUR (4) NEW 2015 KALMAR DCG16012 FORK LIFT S/N:S40400171, S/N:S40400168, S/N:S40400170 AND S/N:S40400169
Nature of debtor's interest LESSEE
State the term remaining 12/30/2019
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 KALMAR USA INC
 415 E DUNDEE ST
 OTTAWA KS 66067
- 2.37. **Title of contract** WELLS FARGO - ASSIGNOR - ADDENDUM TO EQUIPMENT LEASE NO. 0475396-102
State what the contract or lease is for EQUIPMENT LEASE THREE (3) NEW 2015 KALMAR DCG220 1 12LB 5/N: A20700020 AND SIN: A20700022 AND S/N:A.20700023
Nature of debtor's interest LESSEE
State the term remaining 12/30/2019
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 KALMAR USA INC
 415 E DUNDEE ST
 OTTAWA KS 66067
- 2.38. **Title of contract** WELLS FARGO - ASSIGNOR - ADDENDUM TO EQUIPMENT LEASE NO. 0475396-103
State what the contract or lease is for EQUIPMENT LEASE 0 FOUR (4) NEW KALMAR PNEUMATIC FORKLIFTS S/N S40400190, S40400191, S40400192, S40400193
Nature of debtor's interest LESSEE
State the term remaining 3/30/2020
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 KALMAR USA INC
 415 E DUNDEE ST
 OTTAWA KS 66067

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- | | | | |
|-------|---|--|---|
| 2.39. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | EQUIPMENT CONSIGNMENT AND SUPPLY AGREEMENT

CONSIGNED EQUIPMENT RECEIVED IN RETURN FOR PURCHASE COMMITMENT

COSIGNEE

12/1/2021

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

KOP-COAT INC
3040 WILLIAM PITT WAY
PITTSBURGH PA 15238 |
| 2.40. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | COMMERCIAL FIRE INSURANCE POLICY LHD912994

BUILDING & EQUIPMENT INSURANCE COVERAGE

INSURED

11/1/2020

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

LANDMARK INSURANCE COMPANY
30386 MT VERNON RD
PRINCESS ANNE MD 21853 |
| 2.41. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | BUILDING AND EQUIPMENT INSURANCE POLICY ESP 2004728 00

BUILDING & EQUIPMENT INSURANCE COVERAGE

INSURED

11/1/2020

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

SWISS RE EXCESS & SPECIALTY PROPERTY-FIRST SPECIALTY INSURANCE CO
1200 MAIN ST STE 800
KANSAS CITY MO 64105-2478 |
| 2.42. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | GENERAL INSURANCE - POLICY LZR D626863

COMMERCIAL GENERAL LIABILITY COVERAGE POLICY

INSURED

7/1/2020

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THE HANOVER INSURANCE GROUP
440 LINCOLN STREET,
WORCESTER MA 01653-0002 |
| 2.43. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | EXCESS AND UMBRELLA INSURANCE POLICY UHR D626854 01

EXCESS AND UMBRELLA INSURANCE

INSURED

7/1/2020

<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

THE HANOVER INSURANCE GROUP
440 LINCOLN STREET,
WORCESTER MA 01653-0002 |

Debtor **Klausner Lumber Two LLC**Case number (if known) **20-11518**

- | | | | |
|-------|---|--|---|
| 2.44. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | BUSINESS AUTO POLICY ADR-D626777-01
VEHICLE INSURANCE
INSURED
7/1/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
THE HANOVER INSURANCE GROUP
440 LINCOLN STREET,
WORCESTER MA 01653-0002 |
| 2.45. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | COMMERCIAL INLAND MARINE POLICY BMO(20) 60 07 70 50
EQUIPMENT INSURANCE
INSURED
7/1/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
THE OHIO CASUALTY INSURANCE COMPANY
175 BERKELEY ST
BOSTON MA 02116 |
| 2.46. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | STOCKTHROUGH PUT POLICY - STP201900150
SURPLUS LINES INSURERS' POLICY - KLAUSNER HOLDING USA, INC
INSURED
7/1/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
UNDERWRITERS AT LLOYD'S,
LONDON
ONE LIME STREET
LONDON EC3M 7HA
UNITED KINGDOM |
| 2.47. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | BUILDING AND EQUIPMENT INSURANCE POLICY BRB0007281
BUILDING & EQUIPMENT INSURANCE COVERAGE
INSURED
11/1/2020
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
VALIDUS SPECIALITY
300 KIMBALL DRIVE
PARSIPPANY NJ 07054 |
| 2.48. | Title of contract
State what the contract or lease is for
Nature of debtor's interest
State the term remaining
List the contract number of any government contract | EQUIPMENT SATISFACTION MAINTENANCE PROGRAM
EQUIPMENT MAINTENANCE
CONTRACT PARTY
NOT STATED
_____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
ZENO OFFICE SOLUTIONS
8701 FLORIDA MINING BLVD
TAMPA FL 33634 |

Fill in this information to identify the case:**Debtor name:** Klausner Lumber Two LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 20-11518☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

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

1. Does the debtor have any codebtors?

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

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

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1. KLAUSNER LUMBER ONE LLC	17152 46TH TRACE LIVE OAK FL 32060	KALMAR USA INC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.2. KLAUSNER LUMBER ONE LLC	17152 46TH TRACE LIVE OAK FL 32060	TAYLOR INDUSTRIAL CONSTRUCTION INC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3. KLAUSNER LUMBER ONE LLC	17152 46TH TRACE LIVE OAK FL 32060	WELLS FARGO EQUIPMENT FINANCE INC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:**Debtor name:** Klausner Lumber Two LLC**United States Bankruptcy Court for the:** District of Delaware**Case number (if known):** 20-11518Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

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

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

Declaration and signature

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

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

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

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

Executed on 7/24/2020
MM/DD/YYYY

x

/s/ Robert Prusak

Signature of individual signing on behalf of debtor

Robert Prusak
Printed name

Chief Restructuring Officer
Position or relationship to debtor