

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF MASSACHUSETTS
(CENTRAL DIVISION)**

	X	
	:	
In re:	:	Chapter 11
	:	
THE PAPER STORE, LLC, <i>et al.</i> ,	:	Case No. 20-40743 (CJP)
	:	
Debtors. ¹	:	(Jointly Administered)
	:	
	X	

**GLOBAL NOTES, METHODOLOGY AND SPECIFIC
DISCLOSURES REGARDING THE DEBTORS' SCHEDULES OF
ASSETS AND LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS**

Introduction

The Paper Store, LLC (“**TPS**”)and TPS Holdings, LLC (“**TPS Holdings**”), debtors and debtors-in-possession in the above-captioned chapter 11 cases (collectively, the “**Debtors**”) with the assistance of their advisors, have filed their respective Schedules of Assets and Liabilities (the “**Schedules**”) and Statement of Financial Affairs (the “**Statements**,” and together with the Schedules, the “**Schedules and Statements**”) with the United States Bankruptcy Court for the District of Massachusetts (the “**Bankruptcy Court**”), 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, Methodology, and Specific Disclosures Regarding the Debtors’ Schedules of Assets and Liabilities and Statement of Financial Affairs (the “**Global Notes**”) pertain to, are incorporated by reference in, and comprise an integral part of each Debtor’s Schedules and Statements. The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and Statements.

The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States (“**GAAP**”), nor are they intended to be fully reconciled with the financial statements of each Debtor (whether publicly filed or otherwise). Additionally, the Schedules and Statements contain unaudited information that is subject to further review and potential adjustment, and reflect the Debtors’ reasonable efforts to report the assets and liabilities of each Debtor on an unconsolidated basis.

In preparing the Schedules and Statements, the Debtors relied upon information derived from their books and records that was available at the time of such preparation.

¹ The Debtors in these chapter 11 cases, along with the last four digits of each Debtor’s federal tax identification number, are The Paper Store, LLC (2442) and TPS Holdings, LLC (9193). The Debtors’ corporate headquarters and service address is 20 Main Street, Acton, MA 01720.

Although the Debtors have made reasonable efforts to ensure the accuracy and completeness of such financial information, inadvertent errors or omissions, as well as the discovery of conflicting, revised, or subsequent information, may cause a material change to the Schedules and Statements.

The Debtors and their officers, employees, agents, attorneys, and financial advisors do not guarantee or warrant the accuracy or completeness of the data that is provided in the Schedules and Statements and shall not be liable for any loss or injury arising out of or caused in whole or in part by the acts, omissions, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating or delivering the information contained in the Schedules and Statements. Except as expressly required by the Bankruptcy Code, the Debtors and their officers, employees, agents, attorneys and financial advisors expressly do not undertake any obligation to update, modify, revise, or re-categorize the information provided in the Schedules and Statements or to notify any third party should the information be updated, modified, revised, or re-categorized. The Debtors, on behalf of themselves, their officers, employees, agents and advisors disclaim any liability to any third party arising out of or related to the information contained in the Schedules and Statements and reserve all rights with respect thereto.

The Schedules and Statements have been signed by Don Van der Wiel, the Chief Restructuring Officer and an authorized signatory of each Debtor. In reviewing and signing the Schedules and Statements, Mr. Van der Wiel has necessarily relied upon the efforts, statements and representations of the Debtors' other personnel and professionals. Mr. Van der Wiel has not (and could not have) personally verified the accuracy of each such statement and representation, including, for example, statements and representations concerning amounts owed to creditors and their addresses.

Global Notes and Overview of Methodology

1. **Reservation of Rights.** Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statements; however, inadvertent errors or omissions may exist. The Debtors reserve all rights to amend or supplement the Schedules and Statements from time to time, in all respects, as may be necessary or appropriate, including, without limitation, the right to amend the Schedules and Statements with respect to any claim ("**Claim**") description, designation, or Debtor against which the Claim is asserted; dispute or otherwise assert offsets or defenses to any Claim reflected in the Schedules and Statements as to amount, liability, priority, status, or classification; subsequently designate any Claim as "disputed," "contingent," or "unliquidated;" or object to the extent, validity, enforceability, priority, or avoidability of any Claim. Any failure to designate a Claim in the Schedules and Statements as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtors that such Claim or amount is not "disputed," "contingent," or "unliquidated." Listing a Claim does not constitute an admission of liability by the Debtor against which the Claim is listed or against any of the Debtors. Furthermore, nothing contained in the Schedules and Statements shall constitute a waiver of rights with respect to the Debtors' chapter 11 cases, including, without limitation, issues involving Claims, substantive consolidation, defenses, equitable subordination, recharacterization, and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code, and any other relevant non-

bankruptcy laws to recover assets or avoid transfers. Any specific reservation of rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph. Notwithstanding the foregoing, the Debtors shall not be required to update the Schedules and Statements.

The listing in the Schedules or Statements (including, without limitation, Schedule A/B, Schedule E/F or Statement 4) by the Debtors of any obligation between a Debtor and another Debtor is a statement of what appears in the Debtors' books and records and does not reflect any admission or conclusion of the Debtors regarding whether such amount would be allowed as a Claim or how such obligations may be classified and/or characterized in a plan of reorganization or by the Bankruptcy Court.

2. **Description of Cases and "as of" Information Date.** On July 14, 2020 (the "**Petition Date**"), each Debtor filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code. The Debtors are operating their businesses and managing their properties as debtors in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code. On July 14, 2020, the Bankruptcy Court entered an order directing procedural consolidation and joint administration of the Debtors' chapter 11 cases under case number 20-40743 (CJP) [Docket No. 19].

The asset information provided in the Schedules and Statements, except as otherwise noted, represents the asset data of the Debtors as of the close of business on July 13, 2020, and the liability information provided herein, except as otherwise noted, represents the liability data of the Debtors as of the close of business on July 13, 2020.

3. **Net Book Value of Assets.** Except as otherwise noted, each asset and liability of each Debtor is shown on the basis of net book value of the asset or liability in accordance with such Debtor's accounting books and records. Therefore, unless otherwise noted, the Schedules and Statements are not based upon any estimate of the current market values of the Debtors' assets and liabilities, which may not correspond to book values. It would be cost prohibitive and unduly burdensome to obtain current market valuations of the Debtors' property interests. Additionally, because the book values of certain assets may materially differ from their fair market values, they may be listed as undetermined amounts as of the Petition Date. Furthermore, as applicable, assets that have fully depreciated or were expensed for accounting purposes may not appear in the Schedules and Statements if they have no net book value.
4. **Recharacterization.** Notwithstanding the Debtors' reasonable efforts to properly characterize, classify, categorize, or designate certain Claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statements, the Debtors may, nevertheless, have improperly characterized, classified, categorized, designated, or omitted certain items due to the complexity and size of the Debtors' businesses. Accordingly, the Debtors reserve all of their rights to recharacterize, reclassify, recategorize, redesignate, add, or delete items reported in the Schedules and Statements at a later time as is necessary or appropriate as additional information becomes available, including, without limitation, whether contracts or leases listed herein were deemed executory or unexpired as of the Petition Date and remain executory and unexpired postpetition.

5. **Real Property and Personal Property-Leased.** In the ordinary course of their businesses, the Debtors leased real property and various articles of personal property, including, fixtures, and equipment, from certain third-party lessors. The Debtors have made reasonable efforts to list all such leases in the Schedules and Statements. The Debtors have made reasonable efforts to include lease obligations on Schedule D (secured debt) to the extent applicable and to the extent the lessor filed a UCC-1. However, nothing in the Schedules or Statements is or shall be construed as an admission or determination as to the legal status of any lease (including whether to assume and assign or reject such lease or whether it is a true lease or a financing arrangement).
6. **Excluded Assets and Liabilities.** The Debtors have sought to allocate liabilities between the prepetition and postpetition periods based on the information and research conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further research is conducted, the allocation of liabilities between the prepetition and postpetition periods may change.

The liabilities listed on the Schedules do not reflect any analysis of Claims under section 503(b)(9) of the Bankruptcy Code. Accordingly, the Debtors reserve all of their rights to dispute or challenge the validity of any asserted Claims under section 503(b)(9) of the Bankruptcy Code or the characterization of the structure of any such transaction or any document or instrument related to any creditor's Claim.

The Debtors have excluded certain categories of assets, tax accruals, and liabilities from the Schedules and Statements, including, without limitation, goodwill, accrued salaries, employee benefit accruals, and deferred gains. In addition, certain immaterial assets and liabilities may have been excluded.

The Bankruptcy Court has authorized the Debtors to pay, in their discretion, certain outstanding prepetition Claims on a postpetition basis. Prepetition liabilities which have been or will be paid postpetition have been excluded from the Schedules and Statements. To the extent the Debtors pay any of the claims listed in the Schedules and Statements pursuant to any orders entered by the Bankruptcy Court, the Debtors reserve all rights to amend and supplement the Schedules and Statements and take other action, such as filing claims objections, as is necessary and appropriate to avoid overpayment or duplicate payment for such liabilities.

7. **Insiders.** Solely for purposes of the Schedules and Statements, the Debtors define "insiders" to include the following: (a) directors; (b) senior level officers; (c) equity holders holding in excess of 5% of the voting securities of the Debtor entities; (d) Debtor affiliates; and (e) relatives of any of the foregoing, but limited to direct descendants such as parents, siblings, children, and spouses (to the extent known by the Debtors). Entities listed as "insiders" have been included for informational purposes and their inclusion shall not constitute an admission that those entities are insiders for purposes of section 101(31) of the Bankruptcy Code.
8. **Intellectual Property Rights.** The exclusion of any intellectual property shall not be construed as an admission that such intellectual property rights have been abandoned, terminated, assigned, expired by their terms, or otherwise transferred pursuant to a sale, acquisition, or other transaction. Conversely, inclusion of certain intellectual property shall not be construed to be an admission that such intellectual property

rights have not been abandoned, terminated, assigned, expired by their terms, or otherwise transferred pursuant to a sale, acquisition, or other transaction.

In addition, although the Debtors have made diligent efforts to attribute intellectual property to the rightful Debtor entity, in certain instances, intellectual property owned by one Debtor may, in fact, be owned by another Debtor. Accordingly, the Debtors reserve all of their rights with respect to the legal status of any and all such intellectual property rights.

9. **Intercompany and Other Transactions.** For certain reporting and internal accounting purposes, the Debtors record certain intercompany receivables and payables. Receivables and payables among the Debtors are reported as assets on Schedule A/B or liabilities on Schedule E/F part 2, as appropriate (collectively, the “**Intercompany Claims**”). While the Debtors have used commercially reasonable efforts to ensure that the proper intercompany balance is attributed to each legal entity, the Debtors and their estates reserve all rights to amend the Intercompany Claims in the Schedules and Statements, including, without limitation, to change the characterization, classification, categorization or designation of such claims, including, but not limited to, the right to assert that any or all Intercompany Claims are, in fact, consolidated or otherwise properly assets or liabilities of a different Debtor entity. Although separate Schedules and Statements have been prepared and filed for each of the Debtors, certain of the information set forth in the Schedules and Statements has been prepared on a consolidated basis. As a result, the Schedules and Statements do not reflect all intercompany activity.

The listing in the Schedules or Statements (including, without limitation, Schedule A/B or Schedule E/F) by the Debtors of any Intercompany Claims is a statement of what appears in the Debtors’ books and records and does not reflect any admission or conclusion of the Debtors regarding whether such amount would be allowed as a Claim or how such obligations may be classified and/or characterized in a plan of reorganization or by the Bankruptcy Court.

10. **Executory Contracts and Unexpired Leases.** Although the Debtors made diligent attempts to attribute executory contracts and unexpired leases to their rightful Debtors, in certain instances, the Debtors may have inadvertently failed to do so due to the complexity and size of the Debtors’ businesses.

Moreover, other than real property leases reported in Schedule A/B 55, the Debtors have not necessarily 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 Debtors’ estates. The Debtors’ executory contracts and unexpired leases have been set forth in Schedule G.

11. **Materialman’s/Mechanic’s Liens.** The assets listed in the Schedules and Statements are presented without consideration of any materialman’s or mechanic’s liens.
12. **Classifications.** Listing a Claim or contract on (a) Schedule D as “secured,” (b) Schedule E/F part 1 as “priority,” (c) Schedule E/F part 2 as “unsecured,” or (d) Schedule G as “executory” or “unexpired,” does not constitute an admission by the Debtors of the legal rights of the Claimant, or a waiver of the Debtors’ rights to recharacterize or reclassify such Claims or contracts or leases or to exercise their rights to

setoff against such Claims.

13. Claims Description. Schedules D and E/F permit each Debtor to designate a Claim as “disputed,” “contingent,” and/or “unliquidated.” Any failure to designate a Claim on a given Debtor’s Schedules and Statements as “disputed,” “contingent,” or “unliquidated” does not constitute an admission by that Debtor that such amount is not “disputed,” “contingent,” or “unliquidated,” or that such Claim is not subject to objection. Moreover, listing a Claim does not constitute an admission of liability by the Debtors.

14. Causes of Action. Despite their reasonable efforts to identify all known assets, the Debtors may not have listed all of their causes of action or potential causes of action against third-parties as assets in the Schedules and Statements, including, without limitation, causes of actions arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. The Debtors reserve all of their rights with respect to any cause of action (including avoidance actions), controversy, right of setoff, cross-Claim, counter-Claim, 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, assertable 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**”) they may have, and neither these 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.

15. Litigation. Certain litigation actions (collectively, the “**Litigation Actions**”) reflected as claims against a particular Debtor may relate to one or more of the other Debtors. The Debtors made reasonable efforts to accurately record the Litigation Actions in the Schedules and Statements of the Debtor that is the party to the Litigation Action. The inclusion of any Litigation Action in the Schedules and Statements does not constitute an admission by the Debtors of liability, the validity of any Litigation Action or the amount of any potential claim that may result from any claims with respect to any Litigation Action, or the amount and treatment of any potential claim resulting from any Litigation Action currently pending or that may arise in the future.

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

- a. Undetermined Amounts. The description of an amount as “unknown,” “TBD” or “undetermined” is not intended to reflect upon the materiality of such amount.
- b. Totals. All totals that are included in the Schedules and Statements represent totals of all known amounts. To the extent there are unknown or undetermined amounts, the actual total may be different than the listed

total.

- c. Liens. Property and equipment listed in the Schedules and Statements are presented without consideration of any liens that may attach (or have attached) to such property and equipment.

- 17. Estimates and Assumptions.** Because of the timing of the filings, management was required to make certain estimates and assumptions that affected the reported amounts of these assets and liabilities. Actual amounts could differ from those estimates, perhaps materially.
- 18. Currency.** Unless otherwise indicated, all amounts are reflected in U.S. dollars.
- 19. Setoffs.** The Debtors incur certain offsets and other similar rights during the ordinary course of business. Offsets in the ordinary course can result from various items, including, without limitation, intercompany transactions, pricing discrepancies, returns, refunds, warranties, debit memos, credits, and other disputes between the Debtors and their suppliers and/or customers. These offsets and other similar rights are consistent with the ordinary course of business in the Debtors' industry and are not tracked separately. Therefore, although such offsets and other similar rights may have been accounted for when certain amounts were included in the Schedules, offsets are not independently accounted for, and as such, are or may be excluded from the Debtors' Schedules and Statements.
- 20. Global Notes Control.** If the Schedules and Statements differ from these Global Notes, the Global Notes shall control.

Specific Disclosures with Respect to the Debtors' Schedules

Schedule A/B. All values set forth in Schedule A/B reflect the book value of the Debtors' assets as of the close of business on July 13, 2020, unless otherwise noted below. Other than real property leases reported on Schedule A/B 55, the Debtors have not included leases and contracts on Schedule A/B. Leases and contracts are listed on Schedule G.

Schedule A/B 3. Cash values held in financial accounts are listed on Schedule A/B 3 as of the close of business on July 13, 2020. Details with respect to the Debtors' cash management system and bank accounts are provided in the *Motion Of Debtors For Entry Of Interim And Final Orders (A) Authorizing Debtors To Use Existing Cash Management System; (B) Authorizing And Directing Banks And Financial Institutions To Honor And Process Checks And Transfers; (C) Extending The Deadline For Debtors To Comply With The Requirements Of Section 345(B) Of The Bankruptcy Code; And (D) Authorizing Debtors To Use Existing Bank Accounts And Existing Business Forms* [Docket No. 8] (the "**Cash Management Motion**").

Schedule A/B 7. The Bankruptcy Court, pursuant to the *Motion Of Debtors For Entry Of Interim And Final Orders (I) Approving Proposed Form Of Adequate Assurance Of Payment To Utility Providers, (II) Establishing Procedures For Determining Adequate Assurance Of Payment For Future Utility Services, (III) Prohibiting Utility Providers From Altering, Refusing, Or Discontinuing Utility*

Service, And (iv) Granting Related Relief [Docket No. 10], has authorized the Debtors to provide adequate assurance of payment for postpetition utility services, including a deposit in the amount of \$118,266.22. Such deposit is not listed on Schedule A/B 7, which was prepared as of the Petition Date.

Schedule A/B 11. Accounts receivable do not include any intercompany receivables. Intercompany receivables, if any, are reported on Schedule A/B 77.

Schedule A/B 15. Ownership interests in subsidiaries have been listed in Schedules A/B 15 as an undetermined amount because the fair market value of such ownership is dependent on numerous variables and factors and likely differs significantly from their net book value. The Debtors were formed in September of 2014 and TPS is a successor to The Paper Store, Inc.

Schedule A/B 55. The Debtors do not own any real property. The Debtors have listed their real property leases in Schedule A/B 55, including leasehold interests/improvements.

Schedule A/B 63. The Debtors maintain a customer database. The amount is listed as undetermined because the fair market value of such ownership cannot be determined.

Schedule A/B 74 & 75. In the ordinary course of their businesses, the Debtors may have accrued, or may subsequently accrue, certain rights to counter-Claims, setoffs, refunds, or warranty Claims. Additionally, certain of the Debtors may be a party to pending litigation in which the Debtors have asserted, or may assert, Claims as a plaintiff or counter-Claims as a defendant. Because such Claims are unknown to the Debtors and not quantifiable as of the Petition Date, they are not listed on Schedule A/B 74 or 75. The Debtors' failure to list any contingent and/or unliquidated claim held by the Debtors in response to these questions shall not constitute a waiver, release, relinquishment, or forfeiture of such claim.

Schedule D. The Claims listed on Schedule D arose or were incurred on various dates; a determination of the date upon which each Claim arose or was incurred would be unduly burdensome and cost prohibitive. Accordingly, not all such dates are included. All Claims listed on Schedule D, however, appear to have been incurred before the Petition Date.

Reference to the applicable loan agreements and related documents is necessary for a complete description of the collateral and the nature, extent, and priority of liens. Nothing in the Global Notes or the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements. Except as specifically stated on Schedule D, real property lessors, utility companies, and other parties that may hold security deposits have not been listed on Schedule D. Nothing herein shall be construed as an admission by the Debtors of the legal rights of the Claimant or a waiver of the Debtors' rights to recharacterize or reclassify such Claim or contract.

Moreover, the Debtors have not included on Schedule D parties that may believe their Claims are secured through setoff rights, letters of credit, surety bonds, or inchoate statutory lien rights.

Finally, any description of any lien or of the Debtors' property that is subject to a lien that is included in Schedule D is not an admission by the Debtors of the validity or the enforceability of the lien. The descriptions included in Schedule D are derived from the various filings that record a creditor's alleged interest in the Debtors' property. The Debtors reserve all rights to challenge these interests in connection with the Chapter 11 Cases.

Schedule E/F part 1. The Bankruptcy Court has authorized the Debtors, in their discretion, to pay certain prepetition liabilities that may be entitled to priority under the applicable provisions of the Bankruptcy Code. For example, on July 17, 2020, the Bankruptcy Court entered the (i) *Interim Order (I) Authorizing Debtors To (A) Pay Prepetition Wages, Salaries, Reimbursable Expenses, And Other Obligations On Account Of Compensation And Benefits Programs And (B) Continue Compensation And Benefits Programs, And (II) Granting Related Relief* [Docket No. 66]; (ii) *Interim Order Authorizing Debtors To (I) Pay Certain Prepetition Tax Obligations, And (II) Granting Related Relief* [Docket No. 63]; and (iii) *Interim Order (I) Authorizing Debtors To (A) Continue Customer Programs In The Ordinary Course Of Business, And (B) Pay Prepetition Obligations Related Thereto, And (II) Granting Related Relief* [Docket No. 64]. To the extent that applicable Claims have been paid or will be paid under one or more of the foregoing orders, such Claims have not been included in Schedule E/F, Part 1.

The Debtors have listed only accrued vacation time off on Schedule E/F Part 1 as entitled to priority as such classification is consistent with the Debtors' policy to pay out vacation time upon termination of employment. Conversely, Schedule E/F Part 1 does not list accrued sick time off as it is not the Debtors' policy to pay out sick time upon termination of employment.

Schedule E/F part 2. The Debtors have used reasonable efforts to report all general unsecured Claims against the Debtors on Schedule E/F part 2, based upon the Debtors' books and records as of the Petition Date.

Determining the date upon which each Claim on Schedule E/F part 2 was incurred or arose would be unduly burdensome and cost prohibitive and, therefore, the Debtors do not list a date for each Claim listed on Schedule E/F part 2. Furthermore, claims listed on Schedule E/F part 2 may have been aggregated by unique creditor name and remit to address and may include several dates of incurrence for the aggregate balance listed.

Schedule E/F part 2 contains information regarding pending litigation involving the Debtors. The dollar amount of potential Claims associated with any such pending litigation is listed as "undetermined" and marked as contingent, unliquidated, and disputed in the Schedules and Statements. Some of the litigation Claims listed on Schedule E/F may be subject to subordination pursuant to section 510 of the Bankruptcy Code. Further, the incidents underlying the litigation Claims listed on Schedule E/F may have given rise to related obligations for which the Debtors may be responsible. Inclusion of these related obligations on Schedule E/F is not intended to suggest that the litigation counterparty is entitled to multiple or duplicative recoveries. Schedule E/F part 2 also includes potential or threatened litigation claims. Any information contained in Schedule E/F part 2 with respect to such potential litigation shall not be a binding representation of the Debtors' liabilities with respect to any of the potential suits and proceedings included therein. The Debtors expressly incorporate by reference into Schedule E/F part 2 all parties to pending litigation listed in the Debtors'

Statements 7, as contingent, unliquidated, and disputed claims, to the extent not already listed on Schedule E/F part 2.

In addition, as of the Petition Date, the Debtors' books and records reflected an aggregate net liability in respect of gift cards and store credits. The Debtors estimate that as of the Petition Date, approximately \$2,089,256.69 in issued gift cards is outstanding. Since the Debtors do not maintain information regarding the individual holders of unredeemed gift cards, the Debtors have listed the aggregate amount of unredeemed gift cards on Schedule E/F, part 2.

Schedule E/F part 2 reflects the prepetition amounts owing to counterparties to executory contracts and unexpired leases. Such prepetition amounts, however, may be paid in connection with the assumption, or assumption and assignment, of executory contracts or unexpired leases. Additionally, Schedule E/F part 2 does not include potential rejection damage Claims, if any, of the counterparties to executory contracts and unexpired leases that may be rejected.

Schedule G. The businesses of the Debtors are complex and, while every effort has been made to ensure the accuracy of Schedule G, inadvertent errors or omissions may have occurred. The Debtors hereby reserve all of their rights to (i) dispute the validity, status or enforceability of any contracts, agreements or leases set forth in Schedule G and (ii) amend or supplement such Schedule as necessary. Furthermore, the Debtors reserve all of their rights, claims and causes of action with respect to the contracts and agreements listed on the Schedules, including the right to dispute or challenge the characterization or the structure of any transaction, document or instrument. The presence of a contract or agreement on Schedule G does not constitute an admission that such contract or agreement is an executory contract or an unexpired lease.

The Debtors were formed in 2014 through various mergers and consolidations, and certain of the Debtors predecessors were parties to various contracts which may or may not have documented assignments to the Debtors. The Debtors have made diligent efforts to attribute the various contract to the rightful Debtor entity.

Certain information, such as the contact information of the counter-party or the remaining term of the contract or agreement, may not be included where such information could not be obtained using the Debtors' reasonable efforts. Listing or omitting a contract or agreement on Schedule G does not constitute an admission that such contract or agreement is or is not an executory contract or unexpired lease, was in effect on the Petition Date, or is valid or enforceable. Certain of the leases and contracts listed on Schedule G may contain certain renewal options, guarantees of payment, indemnifications, options to purchase, rights of first refusal, and other miscellaneous rights. Such rights, powers, duties, and obligations are not set forth separately on Schedule G.

Certain confidentiality and non-disclosure agreements may not be listed on Schedule G.

Certain of the contracts and agreements listed on Schedule G may consist of several parts, including, purchase orders, amendments, restatements, waivers, letters, and other documents that may not be listed on Schedule G or that may be listed as a single entry. In some cases, the same supplier or provider appears multiple times on Schedule G. This multiple listing is intended to reflect distinct agreements between the applicable Debtor and

such supplier or provider. The Debtors expressly reserve their rights to challenge whether such related materials constitute an executory contract, a single contract or agreement, or multiple, severable or separate contracts.

The contracts, agreements, and leases 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, memoranda and other documents, instruments, and agreements that may not be listed therein despite the Debtors' use of reasonable efforts to identify such documents. Further, unless otherwise specified on Schedule G, each executory contract or unexpired lease listed thereon shall include all exhibits, schedules, riders, modifications, declarations, amendments, supplements, attachments, restatements, or other agreements made directly or indirectly by any agreement, instrument, or other document that in any manner affects such executory contract or unexpired lease, without respect to whether such agreement, instrument, or other document is listed thereon.

In addition, the Debtors may have entered into various other types of agreements in the ordinary course of their businesses, such as subordination, nondisturbance, and attornment agreements, supplemental agreements, settlement agreements, amendments/letter agreements, title agreements and confidentiality agreements. Such documents may not be set forth on Schedule G. Certain of the executory agreements may not have been memorialized and could be subject to dispute. Executory agreements that are oral in nature have not been included on the Schedule G.

Schedule H. For purposes of Schedule H, the Debtors that are either the principal obligors or guarantors under the prepetition debt facilities are listed as Co-Debtors on Schedule H. The Debtors may not have identified certain guarantees associated with the Debtors' executory contracts, unexpired leases, secured financings, debt instruments, and other such agreements.

In the ordinary course of their businesses, the Debtors may be involved in pending or threatened litigation. These matters may involve multiple plaintiffs and defendants, some or all of whom may assert cross-Claims and counter-Claims against other parties. Because the Debtors have treated all such Claims as contingent, disputed, or unliquidated, such Claims have not been set forth individually on Schedule H. Litigation matters can be found on each Debtor's Schedule E/F part 2 and Statement 7, as applicable.

Specific Disclosures with Respect to the Debtors' Statements

Statement 3. Statement 3 includes any disbursement or other transfer made by the Debtors within 90 days before the Petition Date except for those made to insiders (which payments appear in response to Statement question 4), employees, and bankruptcy professionals (which payments appear in Statement 11 and include any retainers paid to bankruptcy professionals). The amounts listed in Statement 3 reflect the Debtors' disbursements netted against any check level detail; thus, to the extent a disbursement was made to pay for multiple invoices, only one entry has been listed on Statement 3.

Statement 4. Statement 4 accounts for a respective Debtor's intercompany transactions, as well as other transfers to insiders as applicable. With respect to individuals, the amounts listed reflect the universe of payments and transfers to such individuals including compensation, bonus (if any), expense reimbursement, relocation reimbursement, and/or severance.

Amounts paid on behalf of such employee for certain life and disability coverage, which coverage is provided to all of the Debtors' employees, has not been included.

The Debtors have included all consulting and payroll distributions and travel, entertainment, and other expense reimbursements, made over the twelve months preceding the Petition Date to any individual that may be deemed an "Insider," including relatives of insiders to the extent such relative is a direct descendant of the insider (*e.g.*, parents, siblings, children, and spouses).

The listing of a party as an Insider in the Schedules and Statements is not intended to be, nor shall be, construed as a legal characterization or determination of such party as an actual insider and does not act as an admission of any fact, claim, right or defense, and all such rights, claims, and defenses are hereby expressly reserved.

Statement 5. Statement 5 excludes goods returned in the ordinary course of business.

Statement 7. Any information contained in Statement 7 shall not be a binding representation of the Debtors' liabilities with respect to any of the suits and proceedings identified therein.

The Debtors used reasonable efforts to identify all pending litigation and assign appropriate descriptions thereto. In the event that the Debtors discover additional information pertaining to these legal actions identified in response to Question 7, the Debtors will use reasonable efforts to supplement the Statements in light thereof.

Statement 10. The Debtors occasionally incur losses for a variety of reasons, including theft and property damage. The Debtors, however, may not have records of all such losses if such losses do not have a material impact on the Debtors' businesses or are not reported for insurance purposes.

Statement 11. Out of an abundance of caution, the Debtors have included payments to all professionals who have rendered any advice related the Debtors' bankruptcy proceedings in Statement 11. However, it is possible that the disclosed fees also relate to other, non-bankruptcy related services, and may include services rendered to other parties.

Statement 19. While the Debtors do not, and have not, maintained safe deposit boxes, the Debtors do maintain a safe at each store location for storage of petty cash and cash receipts prior to making bank deposits.

Statement 27. The Debtors conduct a comprehensive cycle count of their inventories on a rolling basis throughout the fiscal year. Each location is subject to a full cycle count twice a year. The Debtors' inventories incorporate the results of the cycle counts.

Statement 26d. The Debtors have provided financial statements in the ordinary course of their businesses to numerous financial institutions, creditors, and other parties within two years immediately before the Petition Date. Considering the number of such recipients and the possibility that such information may have been shared with parties without the Debtors' knowledge or consent or subject to confidentiality agreements, the parties listed on Statement 26d may not be a complete listing of the parties that may have received such financial statements for the purposes of Statement 26d.

Statement 30. Unless otherwise indicated in a Debtor's specific response to Statement 30, the Debtors have included a comprehensive response to Statement 30 in Statement 4.

Fill in this information to identify the case:

Debtor name: The Paper Store, LLC

United States Bankruptcy Court for the: District of Massachusetts

Case number (if known): 20-40743

☐ 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

UNDETERMINED

1b. **Total personal property:**

Copy line 91A from Schedule A/B

\$46,754,940.55

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

Copy line 92 from Schedule A/B

\$46,754,940.55

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

\$41,267,812.40

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

\$506,306.45

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

+ \$63,237,191.03

4. **Total liabilities**

Lines 2 + 3a + 3b

\$105,011,309.88

Fill in this information to identify the case:

Debtor name: The Paper Store, LLC

United States Bankruptcy Court for the: District of Massachusetts

Case number (if known): 20-40743

☐ 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.	MAYNARD, MA- CHANGE FUNDS	\$1,150.00
2.2.	BEDFORD, MA- CHANGE FUNDS	\$900.00
2.3.	BILLERICA, MA- CHANGE FUNDS	\$1,400.00
2.4.	HUDSON, MA- CHANGE FUNDS	\$900.00
2.5.	LEOMINSTER, MA- CHANGE FUNDS	\$1,125.00
2.6.	CHELMSFORD, MA- CHANGE FUNDS	\$1,725.00
2.7.	SOLOMON POND MALL, MA- CHANGE FUNDS	\$1,450.00
2.8.	SUDBURY, MA- CHANGE FUNDS	\$1,350.00
2.9.	STONEHAM, MA- CHANGE FUNDS	\$1,150.00
2.10.	SHREWSBURY, MA- CHANGE FUNDS	\$1,650.00
2.11.	BEVERLY, MA- CHANGE FUNDS	\$1,825.00
2.12.	WEST ROXBURY, MA- CHANGE FUNDS	\$1,300.00
2.13.	NASHUA, NH- CHANGE FUNDS	\$1,400.00
2.14.	HINGHAM, MA- CHANGE FUNDS	\$2,550.00
2.15.	MILLBURY, MA- CHANGE FUNDS	\$2,100.00
2.16.	WALTHAM, MA- CHANGE FUNDS	\$1,470.00
2.17.	FRAMINGHAM, MA- CHANGE FUNDS	\$1,750.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.18. READING, MA- CHANGE FUNDS	\$1,500.00
2.19. NORTHBOROUGH, MA- CHANGE FUNDS	\$1,425.00
2.20. WAREHAM, MA- CHANGE FUNDS	\$1,400.00
2.21. DEDHAM, MA- CHANGE FUNDS	\$1,625.00
2.22. BELLINGHAM, MA- CHANGE FUNDS	\$1,575.00
2.23. SWAMPSCOTT, MA- CHANGE FUNDS	\$1,600.00
2.24. WESTFORD, MA- CHANGE FUNDS	\$1,100.00
2.25. CONCORD, NH- CHANGE FUNDS	\$1,250.00
2.26. WEST LEBANON, NH- CHANGE FUNDS	\$1,200.00
2.27. SAUGUS, MA- CHANGE FUNDS	\$1,750.00
2.28. BURLINGTON, MA- CHANGE FUNDS	\$1,200.00
2.29. SMITHFIELD, RI- CHANGE FUNDS	\$950.00
2.30. WARWICK, RI- CHANGE FUNDS	\$950.00
2.31. EPPING, NH- CHANGE FUNDS	\$1,450.00
2.32. STAMFORD, CT- CHANGE FUNDS	\$1,100.00
2.33. NORWALK, CT- CHANGE FUNDS	\$1,000.00
2.34. FAIRFIELD, CT- CHANGE FUNDS	\$1,140.00
2.35. STRATFORD, CT- CHANGE FUNDS	\$1,100.00
2.36. PORTLAND, ME- CHANGE FUNDS	\$1,425.00
2.37. LYNNFIELD, MA- CHANGE FUNDS	\$1,425.00
2.38. BRANFORD, CT- CHANGE FUNDS	\$1,400.00
2.39. AUGUSTA, ME- CHANGE FUNDS	\$1,500.00
2.40. SEEKONK, MA- CHANGE FUNDS	\$1,250.00
2.41. BROOKFIELD, CT- CHANGE FUNDS	\$1,325.00
2.42. WEYMOUTH, MA- CHANGE FUNDS	\$1,050.00
2.43. SCARBOROUGH, ME- CHANGE FUNDS	\$1,100.00
2.44. HADLEY, MA- CHANGE FUNDS	\$1,100.00
2.45. N. NASHUA, NH- CHANGE FUNDS	\$1,250.00
2.46. MILFORD, CT- CHANGE FUNDS	\$900.00
2.47. PARSIPPANY, NJ- CHANGE FUNDS	\$1,050.00
2.48. SUCCASUNNA, NJ- CHANGE FUNDS	\$950.00
2.49. ACTON MASS AVE, MA- CHANGE FUNDS	\$1,200.00
2.50. POMPTON, NJ- CHANGE FUNDS	\$975.00
2.51. ROCKAWAY, NJ- CHANGE FUNDS	\$1,100.00
2.52. CANTON, CT- CHANGE FUNDS	\$950.00
2.53. BRISTOL, CT- CHANGE FUNDS	\$1,350.00
2.54. MEDFORD, MA- CHANGE FUNDS	\$1,250.00
2.55. LITTLETON, MA- CHANGE FUNDS	\$1,300.00
2.56. CLIFTON, NJ- CHANGE FUNDS	\$1,600.00

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.57.	MANSFIELD, MA- CHANGE FUNDS	\$1,400.00
2.58.	HYANNIS, MA- CHANGE FUNDS	\$1,100.00
2.59.	SOMERSET, MA- CHANGE FUNDS	\$1,100.00
2.60.	TAUNTON, MA- CHANGE FUNDS	\$1,250.00
2.61.	RAMSEY, NJ- CHANGE FUNDS	\$1,250.00
2.62.	W. HARTFORD, CT- CHANGE FUNDS	\$1,100.00
2.63.	GLASTONBURY, CT- CHANGE FUNDS	\$1,200.00
2.64.	S. WINDSOR, CT- CHANGE FUNDS	\$1,400.00
2.65.	CANTON, MA- CHANGE FUNDS	\$1,100.00
2.66.	QUINCY, MA- CHANGE FUNDS	\$950.00
2.67.	WAKEFIELD, RI- CHANGE FUNDS	\$650.00
2.68.	CRANSTON, RI- CHANGE FUNDS	\$1,250.00
2.69.	PLYMOUTH, MA- CHANGE FUNDS	\$1,850.00
2.70.	ROCHESTER NH- -CHANGE FUNDS	\$1,300.00
2.71.	BRAINTREE MA- -CHANGE FUNDS	\$1,750.00
2.72.	MIDDLETOWN RI- -CHANGE FUNDS	\$525.00
2.73.	PHEASANT LANE MALL NH- -CHANGE FUNDS	\$950.00
2.74.	EAST HANOVER NJ- -CHANGE FUNDS	\$950.00
2.75.	NORTH HAVEN CT- -CHANGE FUNDS	\$1,100.00
2.76.	AMHERST NY- -CHANGE FUNDS	\$1,100.00
2.77.	PARAMUS NJ- -CHANGE FUNDS	\$1,300.00
2.78.	MANCHESTER NH- -CHANGE FUNDS	\$1,250.00
2.79.	WAYNE NJ- -CHANGE FUNDS	\$950.00
2.80.	PLAISTOW, NH- -CHANGE FUNDS	\$950.00
2.81.	AMESBURY MA- -CHANGE FUNDS	\$950.00
2.82.	FARMINGDALE NY- -CHANGE FUNDS	\$1,100.00
2.83.	HICKSVILLE, NY- -CHANGE FUNDS	\$950.00
2.84.	HUNTINGTON STATION NY- -CHANGE FUNDS	\$950.00
2.85.	EAST ISLIP, NY- -CHANGE FUNDS	\$950.00
2.86.	LAKE GROVE, NY- -CHANGE FUNDS	\$1,100.00

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

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1.	JP MORGAN CHASE	CHECKING	9699	\$1,953,733.77
3.2.	JP MORGAN CHASE	CHECKING	9798	\$1,686,587.09
3.3.	JP MORGAN CHASE	CHECKING	2807	\$190,614.16
3.4.	JP MORGAN CHASE	CHECKING	9392	\$6,799,171.31
3.5.	MIDDLESEX SAVINGS BANK	CHECKING	3713	\$6,270.77
3.6.	MIDDLESEX SAVINGS BANK	CHECKING	2760	\$51,814.51

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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
3.7.	MIDDLESEX SAVINGS BANK	CHECKING	3490	\$5,853.03
3.8.	BANK OF AMERICA	CHECKING	4902	\$798,722.88
3.9.	TD BANK	CHECKING	6999	\$164,144.20

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.

\$11,764,596.72

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

7. Deposits, including security deposits and utility deposits

	Description, including name of holder of deposit	Current value of debtor's interest
7.1.	SECURITY 910 HAMBURG TURNPIKE, LLC	\$2,550.00
7.2.	UTILITY DEPOSIT BERKSHIRE GAS	\$610.00
7.3.	SECURITY BRIXMORE SPE 4 LLC	\$16,000.00
7.4.	SECURITY CARRIAGETOWN STATION LLC	\$13,840.25
7.5.	SECURITY CENTER OF HUDSON (E&A) LLC	\$19,655.00
7.6.	UTILITY DEPOSIT CENTRAL MAINE POWER	\$1,966.00
7.7.	UTILITY DEPOSIT CENTRAL MAINE POWER	\$2,980.00
7.8.	UTILITY DEPOSIT CENTRAL MAINE POWER	\$2,773.00
7.9.	UTILITY DEPOSIT CONNECTICUT LIGHT & POWER	\$1,920.00
7.10.	UTILITY DEPOSIT CONNECTICUT LIGHT & POWER	\$950.00
7.11.	UTILITY DEPOSIT CONNECTICUT LIGHT & POWER	\$1,615.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

7. Deposits, including security deposits and utility deposits

	Description, including name of holder of deposit	Current value of debtor's interest
7.12.	UTILITY DEPOSIT CONNECTICUT NATURAL GAS CORP	\$500.00
7.13.	UTILITY DEPOSIT CT NATURAL GAS	\$250.00
7.14.	SECURITY DRUM HILL ASSOCIATES LLC	\$5,803.00
7.15.	SECURITY DUDLEY TRADING ASSOCIATES	\$24,000.00
7.16.	CONTRACT DEPOSIT ENTERPRISE RENT-A-CAR	\$10,000.00
7.17.	UTILITY DEPOSIT EVERSOURCE ELECTRIC	\$1,684.00
7.18.	UTILITY DEPOSIT EVERSOURCE ELECTRIC	\$845.00
7.19.	UTILITY DEPOSIT EVERSOURCE ELECTRIC	\$1,615.00
7.20.	UTILITY DEPOSIT EVERSOURCE ELECTRIC	\$5,485.00
7.21.	UTILITY DEPOSIT EVERSOURCE ELECTRIC	\$2,105.00
7.22.	UTILITY DEPOSIT EVERSOURCE ELECTRIC	\$1,180.00
7.23.	UTILITY DEPOSIT EVERSOURCE GAS	\$700.00
7.24.	SECURITY GREAT ROAD SHOPPING CENTER	\$60,000.00
7.25.	SECURITY HANNAFORD BROS. CO., LLC	\$7,962.50
7.26.	SECURITY INLAND COMMERCIAL ESTATE SERVICES, LLC	\$7,200.00
7.27.	UTILITY DEPOSIT JERSEY CENTRAL POWER AND LIGHT	\$1,618.00
7.28.	UTILITY DEPOSIT JERSEY CENTRAL POWER AND LIGHT	\$1,592.00
7.29.	UTILITY DEPOSIT JERSEY CENTRAL POWER AND LIGHT	\$1,244.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

7. Deposits, including security deposits and utility deposits

	Description, including name of holder of deposit	Current value of debtor's interest
7.30.	SIGNAGE DEPOSIT KMART CORPORATION	\$9,000.00
7.31.	CONTRACT DEPOSIT LEASE QUERY	\$11,033.33
7.32.	UTILITY DEPOSIT LIBERTY UTILITIES GAS	\$376.37
7.33.	UTILITY DEPOSIT LIBERTY UTILITIES GAS	\$287.41
7.34.	UTILITY DEPOSIT MANSFIELD ELETRIC	\$10,330.00
7.35.	UTILITY DEPOSIT NATIONAL FUEL (AMHERST DEP)	\$520.00
7.36.	UTILITY DEPOSIT NATIONAL GRID	\$3,655.00
7.37.	UTILITY DEPOSIT NATIONAL GRID/THROUGH BOX MILL ROAD REALTY	\$3,701.69
7.38.	UTILITY DEPOSIT NATIONAL GRID/THROUGH BOX MILL ROAD REALTY	\$2,955.00
7.39.	UTILITY DEPOSIT NATIONAL GRID/THROUGH BOX MILL ROAD REALTY	\$6,930.00
7.40.	UTILITY DEPOSIT NATIONAL GRID/THROUGH BOX MILL ROAD REALTY	\$2,245.00
7.41.	UTILITY DEPOSIT NATIONAL GRID/THROUGH BOX MILL ROAD REALTY	\$3,380.00
7.42.	UTILITY DEPOSIT NEW JERSEY NATURAL GAS	\$245.00
7.43.	SECURITY R&F DANBURY, LLC	\$12,635.00
7.44.	CONTRACT LAST 3 MONTH RETALON	\$41,670.00
7.45.	UTILITY DEPOSIT ROCKLAND ELECTRIC COMPANY	\$1,030.00
7.46.	SECURITY SONYA NERSESSIAN ESQ.	\$12,513.00
7.47.	SECURITY SONYA NERSESSIAN ESQ.	\$5,950.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit	Current value of debtor's interest

7.48. SECURITY	\$5,920.83

THE STOP & SHOP SUPERMARKET COMPANY

7.49. UTILITY DEPOSIT	\$1,850.00

WESTERN MASSACHUSETTS ELECTRIC

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. WORKERS COMP INSURANCE	\$5,671.58

ASSOCIATION MEMBERS WCT

8.2. FLOOD INSURANCE-SPECIFIC STORES	\$5,355.97

ASSURANT

8.3. CYBER LIABILITY	\$2,236.06

BEAZLEY INSURANCE

8.4. EPLI	\$32,571.06

CROSS INSURANCE-WAKEFIELD INC

8.5. LIFE INSURANCE	\$650.87

GENWORTH LIFE AND ANNUITY

8.6. LONG TERM CARE INSURANCE	\$6,835.55

GENWORTH LIFE AND ANNUITY

8.7. WORKERS COMP INSURANCE	\$1,603.20

MA RETAIL MERCHANTS WC GROUP IN

8.8. WORKERS COMP INSURANCE	\$85,081.19

MEMIC

8.9. LIFE INSURANCE	\$2,111.30

NEW ENGLAND LIFE

8.10. LIFE INSURANCE	\$1,181.25

OHIO NATIONAL LIFE INSURANCE

8.11. D&O INSURANCE	\$9,836.70

PHILADELPHIA INSURANCE CO

8.12. LIFE INSURANCE	\$2,740.93

PRUDENTIAL

8.13. INTEREST	\$21,207.53

ROBERT ANDERSON

8.14. FLOOD INSURANCE-SPECIFIC STORES	\$36,155.32

SEATTLE SPECIALTY

9. Total of part 2

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

\$548,108.89

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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. 90 days old or less:	\$49,117.77	- \$0.00	= →	\$49,117.77
	Face amount	Doubtful or uncollectible accounts		
11b. Over 90 days old:	\$37,063.53	- \$0.00	= →	\$37,063.53

12. Total of part 3

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

\$86,181.30

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

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.

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

	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				
20.1.	_____	_____	\$ _____	_____	\$ _____
21.	Finished goods, including goods held for resale				
	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
21.1.	RECEIPTS LAST 20 DAYS	_____	\$1,443,015.00	INVOICE	\$1,443,015.00
21.2.	PERISHABLE GOODS	_____	\$413,950.00	STANDARD COST	\$413,950.00
21.3.	GOODS FOR RESALE	_____	\$31,434,330.00	STANDARD COST	\$31,434,330.00
21.4.	GOODS FOR RESALE- PREPAID	_____	\$864,758.64	STANDARD COST	\$864,758.64
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.	MISCELLANEOUS STORE & OFFICE SUPPLIES AND PACKAGING MATERIALS	NONE	UNKNOWN	_____	UNKNOWN

23. Total of part 5

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

\$34,156,053.64

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: \$1,443,015.00 Valuation method: INVOICE Current value: \$1,443,015.00**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.	_____	\$ _____	_____	\$ _____
29.	Farm animals. Examples: Livestock, poultry, farm-raised fish			
29.1.	_____	\$ _____	_____	\$ _____

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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. CORPORATE OFFICE-FURN & FIXT-OWNED	\$28,211.05	_____	UNDETERMINED
40. Office fixtures			
40.1. BILLERICA, MA- FURNITURE & FIXTURES - OWNED	\$32,855.17	_____	UNDETERMINED
40.2. HUDSON, MA- FURNITURE & FIXTURES - OWNED	\$9,933.79	_____	UNDETERMINED
40.3. LEOMINSTER, MA- FURNITURE & FIXTURES - OWNED	\$4,242.70	_____	UNDETERMINED
40.4. CHELMSFORD, MA- FURNITURE & FIXTURES - OWNED	\$1,636.42	_____	UNDETERMINED
40.5. SOLOMON POND MALL, MA- FURNITURE & FIXTURES - OWNED	\$30,667.72	_____	UNDETERMINED
40.6. SUDBURY, MA- FURNITURE & FIXTURES - OWNED	\$2,459.38	_____	UNDETERMINED
40.7. STONEHAM, MA- FURNITURE & FIXTURES - OWNED	\$25,680.01	_____	UNDETERMINED
40.8. BEVERLY, MA- FURNITURE & FIXTURES - OWNED	\$90,042.21	_____	UNDETERMINED
40.9. WEST ROXBURY, MA- FURNITURE & FIXTURES - OWNED	\$19,353.96	_____	UNDETERMINED

Debtor **The Paper Store, LLC** Case number (if known) **20-40743**

40.10.	NASHUA, NH- FURNITURE & FIXTURES - OWNED	\$8,842.37	_____	UNDETERMINED
40.11.	HINGHAM, MA- FURNITURE & FIXTURES - OWNED	\$84,752.29	_____	UNDETERMINED
40.12.	MILLBURY, MA- FURNITURE & FIXTURES - OWNED	\$25,813.16	_____	UNDETERMINED
40.13.	WALTHAM, MA- FURNITURE & FIXTURES - OWNED	\$61.59	_____	UNDETERMINED
40.14.	FRAMINGHAM, MA- FURNITURE & FIXTURES - OWNED	\$9,243.46	_____	UNDETERMINED
40.15.	READING, MA- FURNITURE & FIXTURES - OWNED	\$23,761.48	_____	UNDETERMINED
40.16.	NORTHBOROUGH, MA- FURNITURE & FIXTURES - OWNED	\$3,033.86	_____	UNDETERMINED
40.17.	WAREHAM, MA- FURNITURE & FIXTURES - OWNED	\$258.59	_____	UNDETERMINED
40.18.	DEDHAM, MA- FURNITURE & FIXTURES - OWNED	\$18,682.90	_____	UNDETERMINED
40.19.	BELLINGHAM, MA- FURNITURE & FIXTURES - OWNED	\$7,602.86	_____	UNDETERMINED
40.20.	SWAMPSCOTT, MA- FURNITURE & FIXTURES - OWNED	\$3,408.47	_____	UNDETERMINED
40.21.	CONCORD, NH- FURNITURE & FIXTURES - OWNED	\$9,571.98	_____	UNDETERMINED
40.22.	WEST LEBANON, NH- FURNITURE & FIXTURES - OWNED	\$1,425.30	_____	UNDETERMINED
40.23.	SAUGUS, MA- FURNITURE & FIXTURES - OWNED	\$1,241.55	_____	UNDETERMINED
40.24.	BURLINGTON, MA- FURNITURE & FIXTURES - OWNED	\$393.20	_____	UNDETERMINED
40.25.	WARWICK, RI- FURNITURE & FIXTURES - OWNED	\$59.40	_____	UNDETERMINED
40.26.	EPHING, NH- FURNITURE & FIXTURES - OWNED	\$40.69	_____	UNDETERMINED
40.27.	STAMFORD, CT- FURNITURE & FIXTURES - OWNED	\$9,491.38	_____	UNDETERMINED
40.28.	FAIRFIELD, CT- FURNITURE & FIXTURES - OWNED	\$5,689.40	_____	UNDETERMINED
40.29.	PORTLAND, ME- FURNITURE & FIXTURES - OWNED	\$1,262.83	_____	UNDETERMINED
40.30.	LYNNFIELD, MA- FURNITURE & FIXTURES - OWNED	\$2,243.14	_____	UNDETERMINED
40.31.	BRANFORD, CT- FURNITURE & FIXTURES - OWNED	\$4,097.48	_____	UNDETERMINED
40.32.	AUGUSTA, ME- FURNITURE & FIXTURES - OWNED	\$325.80	_____	UNDETERMINED
40.33.	SEEKONK, MA- FURNITURE & FIXTURES - OWNED	\$5,793.07	_____	UNDETERMINED
40.34.	BROOKFIELD, CT- FURNITURE & FIXTURES - OWNED	\$16,528.55	_____	UNDETERMINED
40.35.	WEYMOUTH, MA- FURNITURE & FIXTURES - OWNED	\$4,739.88	_____	UNDETERMINED
40.36.	SCARBOROUGH, ME- FURNITURE & FIXTURES - OWNED	\$17,587.06	_____	UNDETERMINED
40.37.	HADLEY, MA- FURNITURE & FIXTURES - OWNED	\$31,273.33	_____	UNDETERMINED
40.38.	N. NASHUA, NH- FURNITURE & FIXTURES - OWNED	\$46,257.16	_____	UNDETERMINED
40.39.	MILFORD, CT- FURNITURE & FIXTURES - OWNED	\$22,394.57	_____	UNDETERMINED
40.40.	PARSIPPANY, NJ- FURNITURE & FIXTURES - OWNED	\$157,904.16	_____	UNDETERMINED
40.41.	SUCCASUNNA, NJ- FURNITURE & FIXTURES - OWNED	\$7,836.02	_____	UNDETERMINED
40.42.	ACTON MASS AVE, MA- FURNITURE & FIXTURES - OWNED	\$27,826.47	_____	UNDETERMINED
40.43.	POMPTON, NJ- FURNITURE & FIXTURES - OWNED	\$7,830.16	_____	UNDETERMINED
40.44.	ROCKAWAY, NJ- FURNITURE & FIXTURES - OWNED	\$31,510.13	_____	UNDETERMINED
40.45.	CANTON, CT- FURNITURE & FIXTURES - OWNED	\$38,038.78	_____	UNDETERMINED
40.46.	BRISTOL, CT- FURNITURE & FIXTURES - OWNED	\$23,282.43	_____	UNDETERMINED
40.47.	MEDFORD, MA- FURNITURE & FIXTURES - OWNED	\$36,457.76	_____	UNDETERMINED
40.48.	LITTLETON, MA- FURNITURE & FIXTURES - OWNED	\$26,952.18	_____	UNDETERMINED
40.49.	CLIFTON, NJ- FURNITURE & FIXTURES - OWNED	\$31,701.09	_____	UNDETERMINED
40.50.	MANSFIELD, MA- FURNITURE & FIXTURES - OWNED	\$115,390.04	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

40.51.	HYANNIS, MA- FURNITURE & FIXTURES - OWNED	\$59,409.92	_____	UNDETERMINED
40.52.	SOMERSET, MA- FURNITURE & FIXTURES - OWNED	\$41,326.17	_____	UNDETERMINED
40.53.	TAUNTON, MA- FURNITURE & FIXTURES - OWNED	\$78,299.78	_____	UNDETERMINED
40.54.	RAMSEY, NJ- FURNITURE & FIXTURES - OWNED	\$86,047.41	_____	UNDETERMINED
40.55.	W. HARTFORD, CT- FURNITURE & FIXTURES - OWNED	\$67,086.10	_____	UNDETERMINED
40.56.	GLASTONBURY, CT- FURNITURE & FIXTURES - OWNED	\$86,554.02	_____	UNDETERMINED
40.57.	S. WINDSOR, CT- FURNITURE & FIXTURES - OWNED	\$72,568.63	_____	UNDETERMINED
40.58.	CANTON, MA- FURNITURE & FIXTURES - OWNED	\$61,138.51	_____	UNDETERMINED
40.59.	QUINCY, MA- FURNITURE & FIXTURES - OWNED	\$24,328.45	_____	UNDETERMINED
40.60.	WAKEFIELD, RI- FURNITURE & FIXTURES - OWNED	\$27,979.19	_____	UNDETERMINED
40.61.	CRANSTON, RI- FURNITURE & FIXTURES - OWNED	\$47,209.42	_____	UNDETERMINED
40.62.	PLYMOUTH, MA- FURNITURE & FIXTURES - OWNED	\$108,280.40	_____	UNDETERMINED
40.63.	ROCHESTER NH- FURNITURE & FIXTURES - OWNED	\$73,417.80	_____	UNDETERMINED
40.64.	BRAINTREE MA- FURNITURE & FIXTURES - OWNED	\$180,087.49	_____	UNDETERMINED
40.65.	MIDDLETOWN RI- FURNITURE & FIXTURES - OWNED	\$82,048.45	_____	UNDETERMINED
40.66.	PHEASANT LANE MALL NH- FURNITURE & FIXTURES - OWNED	\$16,752.86	_____	UNDETERMINED
40.67.	EAST HANOVER NJ- FURNITURE & FIXTURES - OWNED	\$82,641.89	_____	UNDETERMINED
40.68.	NORTH HAVEN CT- FURNITURE & FIXTURES - OWNED	\$94,632.92	_____	UNDETERMINED
40.69.	AMHERST NY- FURNITURE & FIXTURES - OWNED	\$92,708.73	_____	UNDETERMINED
40.70.	PARAMUS NJ- FURNITURE & FIXTURES - OWNED	\$102,571.68	_____	UNDETERMINED
40.71.	MANCHESTER NH- FURNITURE & FIXTURES - OWNED	\$89,867.77	_____	UNDETERMINED
40.72.	WAYNE NJ- FURNITURE & FIXTURES - OWNED	\$21,803.10	_____	UNDETERMINED
40.73.	SOUTHBURY, CT- FURNITURE & FIXTURES - OWNED	\$90,729.11	_____	UNDETERMINED
40.74.	PLAISTOW, NH- FURNITURE & FIXTURES - OWNED	\$48,087.45	_____	UNDETERMINED
40.75.	AMESBURY MA- FURNITURE & FIXTURES - OWNED	\$47,497.10	_____	UNDETERMINED
40.76.	FARMINGDALE NY- FURNITURE & FIXTURES - OWNED	\$22,613.12	_____	UNDETERMINED
40.77.	HICKSVILLE, NY- FURNITURE & FIXTURES - OWNED	\$19,089.36	_____	UNDETERMINED
40.78.	HUNTINGTON STATION NY- FURNITURE & FIXTURES - OWNED	\$25,296.63	_____	UNDETERMINED
40.79.	EAST ISLIP, NY- FURNITURE & FIXTURES - OWNED	\$7,231.14	_____	UNDETERMINED
40.80.	LAKE GROVE, NY- FURNITURE & FIXTURES - OWNED	\$15,963.84	_____	UNDETERMINED
40.81.	MASSAPEQUA, NY- FURNITURE & FIXTURES - OWNED	\$26,116.85	_____	UNDETERMINED
40.82.	WAREHOUSE- FURNITURE & FIXTURES - OWNED	\$239,189.62	_____	UNDETERMINED
40.83.	E-COMMERCE- FURNITURE & FIXTURES - OWNED	\$20,922.58	_____	UNDETERMINED

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.	MAYNARD, MA - EQUIPMENT - OWNED/LEASED	\$7,454.89	_____	UNDETERMINED
41.2.	BEDFORD, MA - EQUIPMENT - OWNED/LEASED	\$10,090.12	_____	UNDETERMINED
41.3.	BILLERICA, MA - EQUIPMENT - OWNED/LEASED	\$2,037.43	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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
41.4.	HUDSON, MA - EQUIPMENT - OWNED/LEASED	\$11,260.50	_____	UNDETERMINED
41.5.	LEOMINSTER, MA - EQUIPMENT - OWNED/LEASED	\$19,572.08	_____	UNDETERMINED
41.6.	CHELMSFORD, MA - EQUIPMENT - OWNED/LEASED	\$15,737.02	_____	UNDETERMINED
41.7.	SOLOMON POND MALL, MA - EQUIPMENT - OWNED/LEASED	\$45,846.11	_____	UNDETERMINED
41.8.	SUDBURY, MA - EQUIPMENT - OWNED/LEASED	\$15,276.60	_____	UNDETERMINED
41.9.	STONEHAM, MA - EQUIPMENT - OWNED/LEASED	\$18,733.97	_____	UNDETERMINED
41.10.	SHREWSBURY, MA - EQUIPMENT - OWNED/LEASED	\$20,293.83	_____	UNDETERMINED
41.11.	BEVERLY, MA - EQUIPMENT - OWNED/LEASED	\$37,605.86	_____	UNDETERMINED
41.12.	WEST ROXBURY, MA - EQUIPMENT - OWNED/LEASED	\$35,227.95	_____	UNDETERMINED
41.13.	NASHUA, NH - EQUIPMENT - OWNED/LEASED	\$22,921.50	_____	UNDETERMINED
41.14.	HINGHAM, MA - EQUIPMENT - OWNED/LEASED	\$27,998.27	_____	UNDETERMINED
41.15.	MILLBURY, MA - EQUIPMENT - OWNED/LEASED	\$27,910.18	_____	UNDETERMINED
41.16.	WALTHAM, MA - EQUIPMENT - OWNED/LEASED	\$12,326.40	_____	UNDETERMINED
41.17.	FRAMINGHAM, MA - EQUIPMENT - OWNED/LEASED	\$15,793.37	_____	UNDETERMINED
41.18.	READING, MA - EQUIPMENT - OWNED/LEASED	\$23,829.65	_____	UNDETERMINED
41.19.	NORTHBOROUGH, MA - EQUIPMENT - OWNED/LEASED	\$12,939.20	_____	UNDETERMINED
41.20.	WAREHAM, MA - EQUIPMENT - OWNED/LEASED	\$18,123.94	_____	UNDETERMINED
41.21.	DEDHAM, MA - EQUIPMENT - OWNED/LEASED	\$25,527.84	_____	UNDETERMINED
41.22.	BELLINGHAM, MA - EQUIPMENT - OWNED/LEASED	\$24,875.31	_____	UNDETERMINED
41.23.	SWAMPSCOTT, MA - EQUIPMENT - OWNED/LEASED	\$16,636.02	_____	UNDETERMINED
41.24.	WESTFORD, MA - EQUIPMENT - OWNED/LEASED	\$1,912.51	_____	UNDETERMINED
41.25.	CONCORD, NH - EQUIPMENT - OWNED/LEASED	\$1,915.84	_____	UNDETERMINED
41.26.	WEST LEBANON, NH - EQUIPMENT - OWNED/LEASED	\$21,224.63	_____	UNDETERMINED
41.27.	SAUGUS, MA - EQUIPMENT - OWNED/LEASED	\$26,495.85	_____	UNDETERMINED
41.28.	BURLINGTON, MA - EQUIPMENT - OWNED/LEASED	\$24,697.33	_____	UNDETERMINED
41.29.	SMITHFIELD, RI - EQUIPMENT - OWNED/LEASED	\$27,109.19	_____	UNDETERMINED
41.30.	WARWICK, RI - EQUIPMENT - OWNED/LEASED	\$22,536.12	_____	UNDETERMINED
41.31.	EPPING, NH - EQUIPMENT - OWNED/LEASED	\$27,772.20	_____	UNDETERMINED
41.32.	STAMFORD, CT - EQUIPMENT - OWNED/LEASED	\$13,606.05	_____	UNDETERMINED
41.33.	NORWALK, CT - EQUIPMENT - OWNED/LEASED	\$24,054.17	_____	UNDETERMINED
41.34.	FAIRFIELD, CT - EQUIPMENT - OWNED/LEASED	\$24,931.27	_____	UNDETERMINED
41.35.	PORTLAND, ME - EQUIPMENT - OWNED/LEASED	\$20,066.53	_____	UNDETERMINED
41.36.	LYNNFIELD, MA - EQUIPMENT - OWNED/LEASED	\$13,034.70	_____	UNDETERMINED
41.37.	BRANFORD, CT - EQUIPMENT - OWNED/LEASED	\$25,649.00	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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
41.38.	AUGUSTA, ME - EQUIPMENT - OWNED/LEASED	\$13,590.58	_____	UNDETERMINED
41.39.	SEEKONK, MA - EQUIPMENT - OWNED/LEASED	\$20,474.16	_____	UNDETERMINED
41.40.	BROOKFIELD, CT - EQUIPMENT - OWNED/LEASED	\$29,332.84	_____	UNDETERMINED
41.41.	SCARBOROUGH, ME - EQUIPMENT - OWNED/LEASED	\$22,913.64	_____	UNDETERMINED
41.42.	HADLEY, MA - EQUIPMENT - OWNED/LEASED	\$16,764.77	_____	UNDETERMINED
41.43.	MILFORD, CT - EQUIPMENT - OWNED/LEASED	\$12,121.30	_____	UNDETERMINED
41.44.	PARSIPPANY, NJ - EQUIPMENT - OWNED/LEASED	\$48,898.52	_____	UNDETERMINED
41.45.	SUCCASUNNA, NJ - EQUIPMENT - OWNED/LEASED	\$1,989.60	_____	UNDETERMINED
41.46.	ACTON MASS AVE, MA - EQUIPMENT - OWNED/LEASED	\$1,446.87	_____	UNDETERMINED
41.47.	POMPTON, NJ - EQUIPMENT - OWNED/LEASED	\$5,337.61	_____	UNDETERMINED
41.48.	ROCKAWAY, NJ - EQUIPMENT - OWNED/LEASED	\$9,566.45	_____	UNDETERMINED
41.49.	CANTON, CT - EQUIPMENT - OWNED/LEASED	\$2,820.60	_____	UNDETERMINED
41.50.	BRISTOL, CT - EQUIPMENT - OWNED/LEASED	\$4,615.10	_____	UNDETERMINED
41.51.	MEDFORD, MA - EQUIPMENT - OWNED/LEASED	\$2,069.14	_____	UNDETERMINED
41.52.	LITTLETON, MA - EQUIPMENT - OWNED/LEASED	\$4,802.00	_____	UNDETERMINED
41.53.	CLIFTON, NJ - EQUIPMENT - OWNED/LEASED	\$8,421.65	_____	UNDETERMINED
41.54.	MANSFIELD, MA - EQUIPMENT - OWNED/LEASED	\$26,727.19	_____	UNDETERMINED
41.55.	HYANNIS, MA - EQUIPMENT - OWNED/LEASED	\$9,800.85	_____	UNDETERMINED
41.56.	SOMERSET, MA - EQUIPMENT - OWNED/LEASED	\$10,417.83	_____	UNDETERMINED
41.57.	TAUNTON, MA - EQUIPMENT - OWNED/LEASED	\$14,059.41	_____	UNDETERMINED
41.58.	RAMSEY, NJ - EQUIPMENT - OWNED/LEASED	\$10,738.37	_____	UNDETERMINED
41.59.	W. HARTFORD, CT - EQUIPMENT - OWNED/LEASED	\$16,228.75	_____	UNDETERMINED
41.60.	GLASTONBURY, CT - EQUIPMENT - OWNED/LEASED	\$46,857.55	_____	UNDETERMINED
41.61.	S. WINDSOR, CT - EQUIPMENT - OWNED/LEASED	\$21,479.92	_____	UNDETERMINED
41.62.	CANTON, MA - EQUIPMENT - OWNED/LEASED	\$28,158.92	_____	UNDETERMINED
41.63.	QUINCY, MA - EQUIPMENT - OWNED/LEASED	\$18,238.13	_____	UNDETERMINED
41.64.	WAKEFIELD, RI - EQUIPMENT - OWNED/LEASED	\$15,249.83	_____	UNDETERMINED
41.65.	CRANSTON, RI - EQUIPMENT - OWNED/LEASED	\$12,618.05	_____	UNDETERMINED
41.66.	PLYMOUTH, MA - EQUIPMENT - OWNED/LEASED	\$34,451.78	_____	UNDETERMINED
41.67.	ROCHESTER NH - EQUIPMENT - OWNED/LEASED	\$20,902.83	_____	UNDETERMINED
41.68.	BRAINTREE MA - EQUIPMENT - OWNED/LEASED	\$63,432.07	_____	UNDETERMINED
41.69.	MIDDLETOWN RI - EQUIPMENT - OWNED/LEASED	\$29,587.32	_____	UNDETERMINED
41.70.	PHEASANT LANE MALL NH - EQUIPMENT - OWNED/LEASED	\$11,624.31	_____	UNDETERMINED
41.71.	EAST HANOVER NJ - EQUIPMENT - OWNED/LEASED	\$24,147.74	_____	UNDETERMINED
41.72.	NORTH HAVEN CT - EQUIPMENT - OWNED/LEASED	\$42,067.44	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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
41.73.	AMHERST NY - EQUIPMENT - OWNED/LEASED	\$94,131.36	_____	UNDETERMINED
41.74.	PARAMUS NJ - EQUIPMENT - OWNED/LEASED	\$51,572.04	_____	UNDETERMINED
41.75.	MANCHESTER NH - EQUIPMENT - OWNED/LEASED	\$38,581.57	_____	UNDETERMINED
41.76.	WAYNE NJ - EQUIPMENT - OWNED/LEASED	\$19,901.35	_____	UNDETERMINED
41.77.	SOUTHBURY, CT - EQUIPMENT - OWNED/LEASED	\$12,256.81	_____	UNDETERMINED
41.78.	PLAISTOW, NH - EQUIPMENT - OWNED/LEASED	\$21,986.79	_____	UNDETERMINED
41.79.	AMESBURY MA - EQUIPMENT - OWNED/LEASED	\$25,086.93	_____	UNDETERMINED
41.80.	FARMINGDALE NY - EQUIPMENT - OWNED/LEASED	\$34,883.80	_____	UNDETERMINED
41.81.	HICKSVILLE, NY - EQUIPMENT - OWNED/LEASED	\$9,802.62	_____	UNDETERMINED
41.82.	HUNTINGTON STATION NY - EQUIPMENT - OWNED/LEASED	\$10,654.41	_____	UNDETERMINED
41.83.	EAST ISLIP, NY - EQUIPMENT - OWNED/LEASED	\$13,129.09	_____	UNDETERMINED
41.84.	LAKE GROVE, NY - EQUIPMENT - OWNED/LEASED	\$8,246.79	_____	UNDETERMINED
41.85.	MASSAPEQUA, NY - EQUIPMENT - OWNED/LEASED	\$12,233.61	_____	UNDETERMINED
41.86.	WAREHOUSE - EQUIPMENT - OWNED/LEASED-	\$693,362.15	_____	UNDETERMINED
41.87.	E-COMMERCE - EQUIPMENT - OWNED/LEASED	\$639,996.02	_____	UNDETERMINED
41.88.	VARIOUS LEASED EQUIPMENT ¹	\$526,953.23	_____	UNDETERMINED

¹THE LEASED VALUE LISTED HERE IS INCLUDED IN THE NET BOOK VALUE LISTED FOR ALL THE EQUIPMENT LISTED HEREIN.**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.

UNDETERMINED

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.

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

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
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles				
47.1.	2015 RAMT PROM25 ID 0000_AU_00002-1	\$2,719.37	Net Book Value	UNDETERMINED
47.2.	2015 HINO 238 ID 0000_AU_00004-1	\$16,859.68	Net Book Value	UNDETERMINED
47.3.	2017 FORD EXPEDITION ID 0000_AU_00005-1	\$32,261.74	Net Book Value	UNDETERMINED
47.4.	2016 HINO ID 0000_AU_00006-1	\$39,972.51	Net Book Value	UNDETERMINED
47.5.	2016 HINO ID 0000_AU_00007-1	\$39,972.51	Net Book Value	UNDETERMINED
47.6.	2017 ACURA MDX ID 0000_AU_00008-1	\$25,383.99	Net Book Value	UNDETERMINED
47.7.	2018 GMC YUKON XL ID 0000_AU_00009-1 (LEASED)	\$39,714.30	Net Book Value	UNDETERMINED
47.8.	2018 FORD EXPLORER ID 0000_AU_00010-1	\$25,214.10	Net Book Value	UNDETERMINED
47.9.	2016 FORD CARGO VAN ID 0000_AU_00011-1	\$9,810.89	Net Book Value	UNDETERMINED
47.10.	2018 FORD EXPEDITION ID 0000_AU_00012-1 (LEASED)	\$49,134.15	Net Book Value	UNDETERMINED
47.11.	2016 DODGE CHARGER ID 0000_AU_00013-1	\$28,820.72	Net Book Value	UNDETERMINED
47.12.	2017 GMC SAVANA ID 0000_AU_00014-1	\$15,480.80	Net Book Value	UNDETERMINED
47.13.	2018 TOYOTA HIGHLANDER ID 0000_AU_00015-1	\$29,082.50	Net Book Value	UNDETERMINED
47.14.	2019 TOYOTA HIGHLANDER ID 0000_AU_00016-1	\$31,238.13	Net Book Value	UNDETERMINED
47.15.	2008 DELIVERY TRUCK ID 998189-1	\$0.00	Net Book Value	UNDETERMINED
47.16.	2008 DELIVERY TRUCK ID 998190-1	\$0.00	Net Book Value	UNDETERMINED
47.17.	2013 TOYOTA HIGHLANDER ID 998199-1	\$0.00	Net Book Value	UNDETERMINED
47.18.	2014 HINO VIN# 55964 ID 998201-1	\$0.00	Net Book Value	UNDETERMINED
47.19.	2014 BMW 750LXL ID 998202-1	\$0.00	Net Book Value	UNDETERMINED
47.20.	2014 BMW 750LXL ID 998203-1	\$0.00	Net Book Value	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. _____ \$ _____

51. Total of part 8

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

UNDETERMINED

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

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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

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

55.1.	LEASEHOLD	\$0.00		UNDETERMINED
STORAGE FACILITY NORTHSHORE SELF STORAGE 38 SWAMPSCOTT RD SALEM MA 01970				
55.2.	LEASEHOLD	\$0.00		UNDETERMINED
STORAGE FACILITY EXTRA SPACE STORAGE 122 ALLIED DRIVE DEDHAM MA 02026				
55.3.	LEASEHOLD	\$0.00		UNDETERMINED
STORAGE FACILITY ISTORAGE 125 RECREATION PARK DRIVE HINGHAM MA 02043				
55.4.	LEASEHOLD	\$0.00		UNDETERMINED
STORAGE FACILITY EAGLE LEASING (BEDFORD, MA) 291 GREAT ROAD BEDFORD MA 01730				
55.5.	LEASEHOLD	\$0.00		UNDETERMINED
STORAGE FACILITY EAGLE LEASING (CONCORD, NH) 30 FORD EDDY ROAD CONCORD NH 03301				
55.6.	LEASEHOLD	\$0.00		UNDETERMINED
STORAGE FACILITY EAGLE LEASING (NORWALK, CT) 652 MAIN STREET NORWALK CT 06851				
55.7.	LEASEHOLD	\$0.00		UNDETERMINED
STORAGE FACILITY EAGLE LEASING (READING, MA) 30 WALKERS BROOK DRIVE READING MA 01867				

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

	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				
55.8.	STORAGE FACILITY EAGLE LEASING (EPPING, NH) 11 BRICKYARD SQUARE EPPING NH 03042	LEASEHOLD	\$0.00		UNDETERMINED
55.9.	STORAGE FACILITY EAGLE LEASING (BROOKFIELD, CT) 14 CANDLEWOOD LAKE ROAD BROOKFIELD CT 06804	LEASEHOLD	\$0.00		UNDETERMINED
55.10.	STORAGE FACILITY EAGLE LEASING (ROCHESTER, NH) 120 MARKETPLACE BLVD ROCHESTER NH 03867	LEASEHOLD	\$0.00		UNDETERMINED
55.11.	LEASEHOLD IMPROVEMENTS CORPORATE OFFICE 20 MAIN STREET ACTON MA 01720	LEASEHOLD IMPROVEMENTS	\$30,024.31		UNDETERMINED
55.12.	LEASEHOLD IMPROVEMENTS STORE BEDFORD, MA STORE #3 291 GREAT ROAD BEDFORD MA 01730	LEASEHOLD IMPROVEMENTS	\$13,484.12		UNDETERMINED
55.13.	LEASEHOLD IMPROVEMENTS STORE BILLERICA, MA STORE #4 199 BOSTON ROAD BILLERICA MA 01862	LEASEHOLD IMPROVEMENTS	\$21,016.62		UNDETERMINED
55.14.	LEASEHOLD IMPROVEMENTS STORE HUDSON, MA STORE #6 10 TECHNOLOGY DRIVE HUDSON MA 01749	LEASEHOLD IMPROVEMENTS	\$4,827.52		UNDETERMINED
55.15.	LEASEHOLD IMPROVEMENTS STORE LEOMINSTER, MA STORE #7 90 WATER TOWER PLACE LEOMINSTER MA 01453	LEASEHOLD IMPROVEMENTS	\$4,351.78		UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

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				
55.16. LEASEHOLD IMPROVEMENTS STORE CHELMSFORD, MA STORE #8 90 DRUM HILL ROAD CHELMSFORD MA 01824	LEASEHOLD IMPROVEMENTS	\$4,457.44	_____	UNDETERMINED
55.17. LEASEHOLD IMPROVEMENTS STORE SOLOMON POND MALL, MA STORE #9 601 DONALD LYNCH BLVD SOLOMON POND MALL MA 01752	LEASEHOLD IMPROVEMENTS	\$318,493.88	_____	UNDETERMINED
55.18. LEASEHOLD IMPROVEMENTS STORE SUDBURY, MA STORE #10 435 BOSTON POST ROAD SUDBURY MA 01776	LEASEHOLD IMPROVEMENTS	\$1,023.50	_____	UNDETERMINED
55.19. LEASEHOLD IMPROVEMENTS STORE STONEHAM, MA STORE #12 99C MAIN STREET STONEHAM MA 02180	LEASEHOLD IMPROVEMENTS	\$14,328.91	_____	UNDETERMINED
55.20. LEASEHOLD IMPROVEMENTS STORE SHREWSBURY, MA STORE #13 50A BOSTON TURNPIKE ROAD SHREWSBURY MA 01545	LEASEHOLD IMPROVEMENTS	\$1,405.30	_____	UNDETERMINED
55.21. LEASEHOLD IMPROVEMENTS STORE BEVERLY, MA STORE #14 53 DODGE STREET BEVERLY MA 01915	LEASEHOLD IMPROVEMENTS	\$22,727.69	_____	UNDETERMINED
55.22. LEASEHOLD IMPROVEMENTS STORE WEST ROXBURY, MA STORE #15 1804 CENTRE STREET WEST ROXBURY MA 02132	LEASEHOLD IMPROVEMENTS	\$25,253.14	_____	UNDETERMINED
55.23. LEASEHOLD IMPROVEMENTS STORE NASHUA, NH STORE #16 213 DANIEL WEBSTER HIGHWAY # 5 NASHUA NH 03060	LEASEHOLD IMPROVEMENTS	\$1,340.55	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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				
55.24. LEASEHOLD IMPROVEMENTS STORE HINGHAM, MA STORE #17 94 DERBY STREET, STE 205 HINGHAM MA 02043	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.25. LEASEHOLD IMPROVEMENTS STORE MILLBURY, MA STORE #18 70 WORCESTER-PROVIDENCE TPKE. STE 600 MILLBURY MA 01527	LEASEHOLD IMPROVEMENTS	\$1,768.12	_____	UNDETERMINED
55.26. LEASEHOLD IMPROVEMENTS STORE WALTHAM, MA STORE #19 848 LEXINGTON STREET WALTHAM MA 02452	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.27. LEASEHOLD IMPROVEMENTS STORE FRAMINGHAM, MA STORE #20 1 WORCESTER ROAD, SPACE 516 FRAMINGHAM MA 01701	LEASEHOLD IMPROVEMENTS	\$7,934.64	_____	UNDETERMINED
55.28. LEASEHOLD IMPROVEMENTS STORE READING, MA STORE #21 30 WALKERS BROOK DRIVE READING MA 01867	LEASEHOLD IMPROVEMENTS	\$31,549.72	_____	UNDETERMINED
55.29. LEASEHOLD IMPROVEMENTS STORE NORTHBOROUGH, MA STORE #22 9108 SHOPS WAY NORTHBOROUGH MA 01532	LEASEHOLD IMPROVEMENTS	\$55,470.10	_____	UNDETERMINED
55.30. LEASEHOLD IMPROVEMENTS STORE WAREHAM, MA STORE #23 2421 CRANBERRY HIGHWAY BLDG 1C#450 WAREHAM MA 02571	LEASEHOLD IMPROVEMENTS	\$15,279.10	_____	UNDETERMINED
55.31. LEASEHOLD IMPROVEMENTS STORE DEDHAM, MA STORE #24 320 LEGACY PLACE DRIVE DEDHAM MA 02026	LEASEHOLD IMPROVEMENTS	\$7,232.40	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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				
55.32. LEASEHOLD IMPROVEMENTS STORE BELLINGHAM, MA STORE #25 257 HARTFORD AVE, SPACE 206 BELLINGHAM MA 02019	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.33. LEASEHOLD IMPROVEMENTS STORE SWAMPSCOTT, MA STORE #26 435 PARADISE ROAD SWAMPSCOTT MA 01907	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.34. LEASEHOLD IMPROVEMENTS STORE WESTFORD, MA STORE #27 160 LITTLETON ROAD, STORE #12 WESTFORD MA 01886	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.35. LEASEHOLD IMPROVEMENTS STORE CONCORD, NH STORE #28 30 FORT EDDY ROAD CONCORD NH 03301	LEASEHOLD IMPROVEMENTS	\$4,965.64	_____	UNDETERMINED
55.36. LEASEHOLD IMPROVEMENTS STORE WEST LEBANON, NH STORE #29 ROUTE 12A, 250 PLAINFIELD ROAD WEST LEBANON NH 03784	LEASEHOLD IMPROVEMENTS	\$4,542.06	_____	UNDETERMINED
55.37. LEASEHOLD IMPROVEMENTS STORE SAUGUS, MA STORE #30 214F BROADWAY (ROUTE 1) SAUGUS MA 01906	LEASEHOLD IMPROVEMENTS	\$11,005.82	_____	UNDETERMINED
55.38. LEASEHOLD IMPROVEMENTS STORE BURLINGTON, MA STORE #31 43 MIDDLESEX TURNPIKE UNIT #20 BURLINGTON MA 01803	LEASEHOLD IMPROVEMENTS	\$26,350.47	_____	UNDETERMINED
55.39. LEASEHOLD IMPROVEMENTS STORE SMITHFIELD, RI STORE #32 371 PUTNAM PIKE, STE A-570 SMITHFIELD RI 02917	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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				
55.40. LEASEHOLD IMPROVEMENTS STORE WARWICK, RI STORE #33 400 BALD HILL ROAD SPACE C-11 WARWICK RI 02886	LEASEHOLD IMPROVEMENTS	\$109.37	_____	UNDETERMINED
55.41. LEASEHOLD IMPROVEMENTS STORE EPPING, NH STORE #34 11 BRICKYARD SQUARE, STE 3 EPPING NH 03042	LEASEHOLD IMPROVEMENTS	\$52,102.11	_____	UNDETERMINED
55.42. LEASEHOLD IMPROVEMENTS STORE STAMFORD, CT STORE #35 2321 SUMMER STREET STAMFORD CT 06905	LEASEHOLD IMPROVEMENTS	\$114,326.08	_____	UNDETERMINED
55.43. LEASEHOLD IMPROVEMENTS STORE NORWALK, CT STORE #36 652 MAIN STREET (ROUTE 7) NORWALK CT 06851	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.44. LEASEHOLD IMPROVEMENTS STORE FAIRFIELD, CT STORE #37 2255 BLACK ROCK TURNPIKE FAIRFIELD CT 06825	LEASEHOLD IMPROVEMENTS	\$2,018.27	_____	UNDETERMINED
55.45. LEASEHOLD IMPROVEMENTS STORE PORTLAND, ME STORE #39 105 MARKET STREET LYNNFIELD MA 01940	LEASEHOLD IMPROVEMENTS	\$18,519.30	_____	UNDETERMINED
55.46. LEASEHOLD IMPROVEMENTS STORE LYNNFIELD, MA STORE #40 1060 WEST MAIN STREET BRANFORD CT 06405	LEASEHOLD IMPROVEMENTS	\$92,301.55	_____	UNDETERMINED
55.47. LEASEHOLD IMPROVEMENTS STORE BRANFORD, CT STORE #41 14 STEPHEN KING DRIVE, SUITE 3 AUGUSTA ME 04330	LEASEHOLD IMPROVEMENTS	\$92,550.62	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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				
55.48. LEASEHOLD IMPROVEMENTS STORE AUGUSTA, ME STORE #42 37 COMMERCE WAY SEEKONK MA 02771	LEASEHOLD IMPROVEMENTS	\$2,205.41	_____	UNDETERMINED
55.49. LEASEHOLD IMPROVEMENTS STORE SEEKONK, MA STORE #43 14 CANDLEWOOD LAKE ROAD BROOKFIELD CT 06804	LEASEHOLD IMPROVEMENTS	\$187,027.56	_____	UNDETERMINED
55.50. LEASEHOLD IMPROVEMENTS STORE BROOKFIELD, CT STORE #44 35 PLEASANT STREET, SUITE 3111 WEYMOUTH MA 02190	LEASEHOLD IMPROVEMENTS	\$92,257.64	_____	UNDETERMINED
55.51. LEASEHOLD IMPROVEMENTS STORE WEYMOUTH, MA STORE #45 31 HANNAFORD DRIVE, SUITE 11 SCARBOROUGH ME 04070	LEASEHOLD IMPROVEMENTS	\$911.75	_____	UNDETERMINED
55.52. LEASEHOLD IMPROVEMENTS STORE SCARBOROUGH, ME STORE #46 335 RUSSELL STREET, UNIT 303 HADLEY MA 01035	LEASEHOLD IMPROVEMENTS	\$1,964.40	_____	UNDETERMINED
55.53. LEASEHOLD IMPROVEMENTS STORE HADLEY, MA STORE #47 379 AMHERST STREET, SPACE C N. NASHUA NH 03063	LEASEHOLD IMPROVEMENTS	\$617.84	_____	UNDETERMINED
55.54. LEASEHOLD IMPROVEMENTS STORE N. NASHUA, NH STORE #48 1660 BOSTON POST ROAD, UNIT A-13 MILFORD CT 06460	LEASEHOLD IMPROVEMENTS	\$101,784.24	_____	UNDETERMINED
55.55. LEASEHOLD IMPROVEMENTS STORE MILFORD, CT STORE #49 52 WATERVIEW BLVD PARSIPPANY NJ 07054	LEASEHOLD IMPROVEMENTS	\$87.05	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

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				
55.56. LEASEHOLD IMPROVEMENTS STORE PARSIPPANY, NJ STORE #50 275 STATE ROUTE 10E SUCCASUNNA NJ 07876	LEASEHOLD IMPROVEMENTS	\$267,281.42	_____	UNDETERMINED
55.57. LEASEHOLD IMPROVEMENTS STORE SUCCASUNNA, NJ STORE #51 393 MASSACHUSETTS AVENUE ACTON MA 01720	LEASEHOLD IMPROVEMENTS	\$7,968.60	_____	UNDETERMINED
55.58. LEASEHOLD IMPROVEMENTS STORE ACTON MASS AVE, MA STORE #52 57 WANAQUE AVENUE POMPTON NJ 07442	LEASEHOLD IMPROVEMENTS	\$109,829.38	_____	UNDETERMINED
55.59. LEASEHOLD IMPROVEMENTS STORE POMPTON, NJ STORE #53 301 MT HOPE AVENUE ROCKAWAY NJ 07866	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.60. LEASEHOLD IMPROVEMENTS STORE ROCKAWAY, NJ STORE #54 110 ALBANY TURNPIKE, BLDG. H, UNITS 1013-1015 CANTON CT 06019	LEASEHOLD IMPROVEMENTS	\$284,538.87	_____	UNDETERMINED
55.61. LEASEHOLD IMPROVEMENTS STORE CANTON, CT STORE #55 99 FARMINGTON AVE, UNIT 12 BRISTOL CT 06010	LEASEHOLD IMPROVEMENTS	\$106,164.32	_____	UNDETERMINED
55.62. LEASEHOLD IMPROVEMENTS STORE BRISTOL, CT STORE #56 710 FELLSWAY MEDFORD MA 02155	LEASEHOLD IMPROVEMENTS	\$166,593.33	_____	UNDETERMINED
55.63. LEASEHOLD IMPROVEMENTS STORE MEDFORD, MA STORE #57 604 CONSTITUTION AVE LITTLETON MA 01460	LEASEHOLD IMPROVEMENTS	\$132,818.53	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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				
55.64. LEASEHOLD IMPROVEMENTS STORE LITTLETON, MA STORE #58 110 KINGSLAND ROAD CLIFTON NJ 07014	LEASEHOLD IMPROVEMENTS	\$115,011.21	_____	UNDETERMINED
55.65. LEASEHOLD IMPROVEMENTS STORE CLIFTON, NJ STORE #59 280 SCHOOL STREET, STE. F180 MANSFIELD MA 02048	LEASEHOLD IMPROVEMENTS	\$176,196.53	_____	UNDETERMINED
55.66. LEASEHOLD IMPROVEMENTS STORE MANSFIELD, MA STORE #60 790 IYANNOUGH ROAD HYANNIS MA 02601	LEASEHOLD IMPROVEMENTS	\$381,021.37	_____	UNDETERMINED
55.67. LEASEHOLD IMPROVEMENTS STORE HYANNIS, MA STORE #61 855 GRAND ARMY HIGHWAY SOMERSET MA 02726	LEASEHOLD IMPROVEMENTS	\$207,286.09	_____	UNDETERMINED
55.68. LEASEHOLD IMPROVEMENTS STORE SOMERSET, MA STORE #62 9 MOZZONE BLVD TAUNTON MA 02780	LEASEHOLD IMPROVEMENTS	\$83,537.65	_____	UNDETERMINED
55.69. LEASEHOLD IMPROVEMENTS STORE TAUNTON, MA STORE #63 36 INTERSTATE SHOP CENTER, SUITE #14 RAMSEY NJ 07446	LEASEHOLD IMPROVEMENTS	\$230,715.26	_____	UNDETERMINED
55.70. LEASEHOLD IMPROVEMENTS STORE RAMSEY, NJ STORE #64 6 SIMS ROAD UNIT L-050 WEST HARTFORD CT 06117	LEASEHOLD IMPROVEMENTS	\$230,380.34	_____	UNDETERMINED
55.71. LEASEHOLD IMPROVEMENTS STORE W. HARTFORD, CT STORE #65 175 GLASTONBURY BLVD GLASTONBURY CT 06033	LEASEHOLD IMPROVEMENTS	\$241,987.68	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

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				
55.72. LEASEHOLD IMPROVEMENTS STORE GLASTONBURY, CT STORE #66 43 EVERGREEN WAY SOUTH WINDSOR CT 06074	LEASEHOLD IMPROVEMENTS	\$289,529.28	_____	UNDETERMINED
55.73. LEASEHOLD IMPROVEMENTS STORE S. WINDSOR, CT STORE #67 95 WASHINGTON ST, SUITE 406 CANTON MA 02021	LEASEHOLD IMPROVEMENTS	\$321,094.88	_____	UNDETERMINED
55.74. LEASEHOLD IMPROVEMENTS STORE CANTON, MA STORE #68 51 NEWPORT AVE QUINCY MA 2171	LEASEHOLD IMPROVEMENTS	\$217,263.21	_____	UNDETERMINED
55.75. LEASEHOLD IMPROVEMENTS STORE QUINCY, MA STORE #69 160 OLD TOWER HILL RD, SUITE 12 WAKEFIELD RI 2879	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.76. LEASEHOLD IMPROVEMENTS STORE WAKEFIELD, RI STORE #70 63 HILLSIDE RD, SUITE 8090 CRANSTON RI 2920	LEASEHOLD IMPROVEMENTS	\$0.00	_____	UNDETERMINED
55.77. LEASEHOLD IMPROVEMENTS STORE CRANSTON, RI STORE #71 134 COLONY PLACE RD PLYMOUTH MA 2360	LEASEHOLD IMPROVEMENTS	\$16,379.63	_____	UNDETERMINED
55.78. LEASEHOLD IMPROVEMENTS STORE PLYMOUTH, MA STORE #72 120 MARKETPLACE BLVD ROCHESTER NH 03867	LEASEHOLD IMPROVEMENTS	\$217,047.19	_____	UNDETERMINED
55.79. LEASEHOLD IMPROVEMENTS STORE ROCHESTER NH STORE #73 246 GROVE STREET BRAINTREE MA 02184	LEASEHOLD IMPROVEMENTS	\$273,588.32	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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				
55.80. LEASEHOLD IMPROVEMENTS STORE BRAINTREE MA STORE #74 1313 WEST MAIN ROAD MIDDLETOWN RI 02842	LEASEHOLD IMPROVEMENTS	\$230,753.32	_____	UNDETERMINED
55.81. LEASEHOLD IMPROVEMENTS STORE MIDDLETOWN RI STORE #75 310 DANIEL WEBSTER HWY, SUITE 107 NASHUA NH 03060	LEASEHOLD IMPROVEMENTS	\$215,012.24	_____	UNDETERMINED
55.82. LEASEHOLD IMPROVEMENTS STORE EAST HANOVER NJ STORE #76 200 STATE ROUTE 10 WEST E. HANOVER NJ 07936	LEASEHOLD IMPROVEMENTS	\$242,343.85	_____	UNDETERMINED
55.83. LEASEHOLD IMPROVEMENTS STORE NORTH HAVEN CT STORE #78 57 WASHINGTON AVE NORTH HAVEN CT 06473	LEASEHOLD IMPROVEMENTS	\$227,925.71	_____	UNDETERMINED
55.84. LEASEHOLD IMPROVEMENTS STORE AMHERST NY STORE #80 1569 NIAGARA FALLS BLVD AMHERST NY 014228	LEASEHOLD IMPROVEMENTS	\$415,164.85	_____	UNDETERMINED
55.85. LEASEHOLD IMPROVEMENTS STORE PARAMUS NJ STORE #81 1378 PARAMUS PARK PARAMUS NJ 07652	LEASEHOLD IMPROVEMENTS	\$466,264.38	_____	UNDETERMINED
55.86. LEASEHOLD IMPROVEMENTS STORE MANCHESTER NH STORE #82 30 MARCH AVE MANCHESTER NH 03103	LEASEHOLD IMPROVEMENTS	\$279,369.25	_____	UNDETERMINED
55.87. LEASEHOLD IMPROVEMENTS STORE WAYNE NJ STORE #83 43 PREAKNESS SHOPPING CENTER WAYNE NJ 07470	LEASEHOLD IMPROVEMENTS	\$19,360.35	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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				
55.88. LEASEHOLD IMPROVEMENTS STORE SOUTHBURY, CT STORE #84 100 MAIN STREET NORTH SOUTHBURY CT 06488	LEASEHOLD IMPROVEMENTS	\$201,517.15	_____	UNDETERMINED
55.89. LEASEHOLD IMPROVEMENTS STORE PLAISTOW, NH STORE #85 58 PLAISTOW ROAD, STE B3 PLAISTOW NH 03865	LEASEHOLD IMPROVEMENTS	\$29,517.55	_____	UNDETERMINED
55.90. LEASEHOLD IMPROVEMENTS STORE AMESBURY MA STORE #86 380 LAFAYETTE RD SEABROOK NH 03874	LEASEHOLD IMPROVEMENTS	\$140,183.37	_____	UNDETERMINED
55.91. LEASEHOLD IMPROVEMENTS STORE FARMINGDALE NY STORE #87 203 AIRPORT PLAZA BLVD FARMINGDALE NY 11735	LEASEHOLD IMPROVEMENTS	\$69,138.65	_____	UNDETERMINED
55.92. LEASEHOLD IMPROVEMENTS STORE HICKSVILLE, NY STORE #88 358 BROADWAY MALL, SUITE 212 HICKSVILLE NY 11801	LEASEHOLD IMPROVEMENTS	\$7,018.76	_____	UNDETERMINED
55.93. LEASEHOLD IMPROVEMENTS STORE HUNTINGTON STATION NY STORE #89 160 WALT WHITMAN RD, SUITE 1084 HUNTINGTON STATION NY 11746	LEASEHOLD IMPROVEMENTS	\$8,442.12	_____	UNDETERMINED
55.94. LEASEHOLD IMPROVEMENTS STORE EAST ISLIP, NY STORE #90 2650 SUNRISE HWY, UNIT 2 EAST ISLIP NY 11730	LEASEHOLD IMPROVEMENTS	\$27,616.05	_____	UNDETERMINED
55.95. LEASEHOLD IMPROVEMENTS STORE LAKE GROVE, NY STORE #91 648 SMITH HAVEN MALL LAKE GROVE NY 11755	LEASEHOLD IMPROVEMENTS	\$6,327.97	_____	UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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

55.96. LEASEHOLD IMPROVEMENTS STORE MASSAPEQUA, NY STORE #92 5260 SUNRISE HIGHWAY MASSAPEQUA NY 11762	LEASEHOLD IMPROVEMENTS	\$234,063.83	_____	UNDETERMINED
55.97. LEASEHOLD IMPROVEMENTS WAREHOUSE LOCATION #98 46 INDUSTRIAL RD LEOMINSTER MA 01453	LEASEHOLD IMPROVEMENTS	\$210,688.08	_____	UNDETERMINED

56. Total of part 9

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

UNDETERMINED

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. TRADEMARK - LET'S DO MORE GIVING. BECAUSE GIVING IS A BEAUTIFUL THING U.S. TRADEMARK REGISTRATION NO.: 5,109,704	UNDETERMINED	_____	UNDETERMINED
60.2. TRADEMARK - LEGACY & MAIN (CLASS 24: BLANKETS) U.S. TRADEMARK REGISTRATION NO.: 5,596,331	UNDETERMINED	_____	UNDETERMINED
60.3. TRADEMARK - MIA+ TESS & DESIGN (CLASS 14: JEWELRY, NAMELY, RINGS) U.S. TRADEMARK REGISTRATION NO.: 5,596,186	UNDETERMINED	_____	UNDETERMINED
60.4. TRADEMARK - MIA+ TESS (CLASS 14: JEWELRY, NAMELY, RINGS) U.S. TRADEMARK REGISTRATION NO.: 5,596,185	UNDETERMINED	_____	UNDETERMINED
60.5. TRADEMARK - MIA+ TESS (CLASS 25: CLOTHING, NAMELY, SHIRTS, PANTS, SWEATERS, JACKETS, COATS JOGGING PANTS, LOUNGING PANTS, VESTS, SCARVES, TEE-SHIRTS, DRESSES) . U.S. TRADEMARK REGISTRATION NO.: 5,617,871	UNDETERMINED	_____	UNDETERMINED

Debtor **The Paper Store, LLC** Case number (if known) **20-40743**

60.6.	MIA + TESS & DESIGN (CLASS 25: CLOTHING, NAMELY, SHIRTS, PANTS, SWEATERS, JACKETS, COATS, JOGGING PANTS, LOUNGING PANTS, VESTS, SCARVES, TEE-SHIRTS, DRESSES) U.S. TRADEMARK REGISTRATION NO.: 5,617,872	UNDETERMINED	_____	UNDETERMINED
60.7.	TRADEMARK - NORTHERN ORIGINAL U.S. TRADEMARK REGISTRATION NO.: 5,734,801	UNDETERMINED	_____	UNDETERMINED
60.8.	TRADEMARK - SUGAR & CO. U.S. TRADEMARK REGISTRATION NO.: 5,482,976	UNDETERMINED	_____	UNDETERMINED
60.9.	TRADEMARK - THE PAPER STORE (NEW LOGO) U.S. TRADEMARK REGISTRATION NO. 5,071,916	UNDETERMINED	_____	UNDETERMINED

61. Internet domain names and websites

	Net book value of debtor's interest	Valuation method	Current value of debtor's interest	
61.1.	BETTERTHANYOUSPORT.COM	UNDETERMINED	_____	UNDETERMINED
61.2.	BETTERTHANYOUSPORTS.COM	UNDETERMINED	_____	UNDETERMINED
61.3.	BETTERTHANYOUSPORTS.INFO	UNDETERMINED	_____	UNDETERMINED
61.4.	BETTERTHANYOUSPORTS.NET	UNDETERMINED	_____	UNDETERMINED
61.5.	BETTERTHANYOUSPORTS.ORG	UNDETERMINED	_____	UNDETERMINED
61.6.	GIFTOFGIVING.GIVES	UNDETERMINED	_____	UNDETERMINED
61.7.	IAMANORTHERNORIGINAL.COM	UNDETERMINED	_____	UNDETERMINED
61.8.	LEGACYANDMAIN.BIZ	UNDETERMINED	_____	UNDETERMINED
61.9.	LEGACYANDMAIN.CO	UNDETERMINED	_____	UNDETERMINED
61.10.	LEGACYANDMAIN.COM	UNDETERMINED	_____	UNDETERMINED
61.11.	LEGACYANDMAIN.INFO	UNDETERMINED	_____	UNDETERMINED
61.12.	LEGACYANDMAIN.MOBI	UNDETERMINED	_____	UNDETERMINED
61.13.	LEGACYANDMAIN.NET	UNDETERMINED	_____	UNDETERMINED
61.14.	LEGACYANDMAIN.ORG	UNDETERMINED	_____	UNDETERMINED
61.15.	LEGACYANDMAIN.US	UNDETERMINED	_____	UNDETERMINED
61.16.	LEGACYMAIN.BIZ	UNDETERMINED	_____	UNDETERMINED
61.17.	LEGACYMAIN.CO	UNDETERMINED	_____	UNDETERMINED
61.18.	LEGACYMAIN.INFO	UNDETERMINED	_____	UNDETERMINED
61.19.	LEGACYMAIN.MOBI	UNDETERMINED	_____	UNDETERMINED
61.20.	LEGACYMAIN.NET	UNDETERMINED	_____	UNDETERMINED
61.21.	LEGACYMAIN.ORG	UNDETERMINED	_____	UNDETERMINED
61.22.	MIAANDTESS.BIZ	UNDETERMINED	_____	UNDETERMINED
61.23.	MIAANDTESS.CO	UNDETERMINED	_____	UNDETERMINED
61.24.	MIAANDTESS.COM	UNDETERMINED	_____	UNDETERMINED
61.25.	MIAANDTESS.INFO	UNDETERMINED	_____	UNDETERMINED
61.26.	MIAANDTESS.NET	UNDETERMINED	_____	UNDETERMINED
61.27.	MIAANDTESS.ORG	UNDETERMINED	_____	UNDETERMINED
61.28.	MIAANDTESS.US	UNDETERMINED	_____	UNDETERMINED
61.29.	MIATESS.BIZ	UNDETERMINED	_____	UNDETERMINED
61.30.	MIATESS.CO	UNDETERMINED	_____	UNDETERMINED
61.31.	MIATESS.COM	UNDETERMINED	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****61. Internet domain names and websites**

		Net book value of debtor's interest	Valuation method	Current value of debtor's interest
61.32.	MIATESS.INFO	UNDETERMINED	_____	UNDETERMINED
61.33.	MIATESS.NET	UNDETERMINED	_____	UNDETERMINED
61.34.	MIATESS.ORG	UNDETERMINED	_____	UNDETERMINED
61.35.	MIATESS.US	UNDETERMINED	_____	UNDETERMINED
61.36.	MIATESSDESIGN.COM	UNDETERMINED	_____	UNDETERMINED
61.37.	MIATESSDESIGNS.CO	UNDETERMINED	_____	UNDETERMINED
61.38.	MIATESSDESIGNS.COM	UNDETERMINED	_____	UNDETERMINED
61.39.	MIATESSDESIGNS.INFO	UNDETERMINED	_____	UNDETERMINED
61.40.	MIATESSDESIGNS.NET	UNDETERMINED	_____	UNDETERMINED
61.41.	MIATESSDESIGNS.ORG	UNDETERMINED	_____	UNDETERMINED
61.42.	MIATESSDESIGNS.US	UNDETERMINED	_____	UNDETERMINED
61.43.	NORTHERLYORIGINALS.NET	UNDETERMINED	_____	UNDETERMINED
61.44.	NORTHERN-ORIGINAL.COM	UNDETERMINED	_____	UNDETERMINED
61.45.	NORTHERNORIGINAL.BIZ	UNDETERMINED	_____	UNDETERMINED
61.46.	NORTHERNORIGINAL.CO	UNDETERMINED	_____	UNDETERMINED
61.47.	NORTHERNORIGINAL.COM	UNDETERMINED	_____	UNDETERMINED
61.48.	NORTHERNORIGINAL.GURU	UNDETERMINED	_____	UNDETERMINED
61.49.	NORTHERNORIGINAL.INFO	UNDETERMINED	_____	UNDETERMINED
61.50.	NORTHERNORIGINAL.ME	UNDETERMINED	_____	UNDETERMINED
61.51.	NORTHERNORIGINAL.MOBI	UNDETERMINED	_____	UNDETERMINED
61.52.	NORTHERNORIGINAL.NET	UNDETERMINED	_____	UNDETERMINED
61.53.	NORTHERNORIGINAL.NEWS	UNDETERMINED	_____	UNDETERMINED
61.54.	NORTHERNORIGINAL.ONE	UNDETERMINED	_____	UNDETERMINED
61.55.	NORTHERNORIGINAL.ONLINE	UNDETERMINED	_____	UNDETERMINED
61.56.	NORTHERNORIGINAL.ORG	UNDETERMINED	_____	UNDETERMINED
61.57.	NORTHERNORIGINAL.PHOTOGRAPHY	UNDETERMINED	_____	UNDETERMINED
61.58.	NORTHERNORIGINAL.US	UNDETERMINED	_____	UNDETERMINED
61.59.	NORTHERNORIGINAL.XYZ	UNDETERMINED	_____	UNDETERMINED
61.60.	NORTHERNORIGINALS.BIZ	UNDETERMINED	_____	UNDETERMINED
61.61.	NORTHERNORIGINALS.CO	UNDETERMINED	_____	UNDETERMINED
61.62.	NORTHERNORIGINALS.INFO	UNDETERMINED	_____	UNDETERMINED
61.63.	NORTHERNORIGINALS.LIVE	UNDETERMINED	_____	UNDETERMINED
61.64.	NORTHERNORIGINALS.ME	UNDETERMINED	_____	UNDETERMINED
61.65.	NORTHERNORIGINALS.MOBI	UNDETERMINED	_____	UNDETERMINED
61.66.	NORTHERNORIGINALS.NET	UNDETERMINED	_____	UNDETERMINED
61.67.	NORTHERNORIGINALS.NEWS	UNDETERMINED	_____	UNDETERMINED
61.68.	NORTHERNORIGINALS.ONE	UNDETERMINED	_____	UNDETERMINED
61.69.	NORTHERNORIGINALS.ONLINE	UNDETERMINED	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****61. Internet domain names and websites**

		Net book value of debtor's interest	Valuation method	Current value of debtor's interest
61.70.	NORTHERNORIGINALS.ORG	UNDETERMINED	_____	UNDETERMINED
61.71.	NORTHERNORIGINALS.PHOTOGRAPHY	UNDETERMINED	_____	UNDETERMINED
61.72.	NORTHERNORIGINALS.US	UNDETERMINED	_____	UNDETERMINED
61.73.	NORTHERNORIGINALS.XYZ	UNDETERMINED	_____	UNDETERMINED
61.74.	SHOPTHEPAPERSTORE.COM	UNDETERMINED	_____	UNDETERMINED
61.75.	THENORTHERNORIGINAL.COM	UNDETERMINED	_____	UNDETERMINED
61.76.	THEPAPERSTORE.CO	UNDETERMINED	_____	UNDETERMINED
61.77.	THEPAPERSTORE.GIFT	UNDETERMINED	_____	UNDETERMINED
61.78.	THEPAPERSTORE.GIFTS	UNDETERMINED	_____	UNDETERMINED
61.79.	THEPAPERSTORE.GIVES	UNDETERMINED	_____	UNDETERMINED
61.80.	THEPAPERSTORE.GURU	UNDETERMINED	_____	UNDETERMINED
61.81.	THEPAPERSTOREBLOG.BIZ	UNDETERMINED	_____	UNDETERMINED
61.82.	THEPAPERSTOREBLOG.CO	UNDETERMINED	_____	UNDETERMINED
61.83.	THEPAPERSTOREBLOG.COM	UNDETERMINED	_____	UNDETERMINED
61.84.	THEPAPERSTOREBLOG.INFO	UNDETERMINED	_____	UNDETERMINED
61.85.	THEPAPERSTOREBLOG.MOBI	UNDETERMINED	_____	UNDETERMINED
61.86.	THEPAPERSTOREBLOG.NET	UNDETERMINED	_____	UNDETERMINED
61.87.	THEPAPERSTOREBLOG.ORG	UNDETERMINED	_____	UNDETERMINED
61.88.	THEPAPERSTORESHOP.COM	UNDETERMINED	_____	UNDETERMINED
61.89.	THEPAPERSTORESITE.BIZ	UNDETERMINED	_____	UNDETERMINED
61.90.	THEPAPERSTORESITE.CO	UNDETERMINED	_____	UNDETERMINED
61.91.	THEPAPERSTORESITE.COM	UNDETERMINED	_____	UNDETERMINED
61.92.	THEPAPERSTORESITE.INFO	UNDETERMINED	_____	UNDETERMINED
61.93.	THEPAPERSTORESITE.MOBI	UNDETERMINED	_____	UNDETERMINED
61.94.	THEPAPERSTORESITE.NET	UNDETERMINED	_____	UNDETERMINED
61.95.	THEPAPERSTORESITE.ORG	UNDETERMINED	_____	UNDETERMINED
61.96.	TPS.GIFT	UNDETERMINED	_____	UNDETERMINED
61.97.	TPS.GIFTS	UNDETERMINED	_____	UNDETERMINED
61.98.	TPS.GIVES	UNDETERMINED	_____	UNDETERMINED
61.99.	TPSGIFT.GURU	UNDETERMINED	_____	UNDETERMINED
61.100.	TPSGIFTS.BIZ	UNDETERMINED	_____	UNDETERMINED
61.101.	TPSGIFTS.CO	UNDETERMINED	_____	UNDETERMINED
61.102.	TPSGIFTS.COM	UNDETERMINED	_____	UNDETERMINED
61.103.	TPSGIFTS.GURU	UNDETERMINED	_____	UNDETERMINED
61.104.	TPSGIFTS.INFO	UNDETERMINED	_____	UNDETERMINED
61.105.	TPSGIFTS.MOBI	UNDETERMINED	_____	UNDETERMINED
61.106.	TPSGIFTS.NET	UNDETERMINED	_____	UNDETERMINED
61.107.	TPSGIFTS.ORG	UNDETERMINED	_____	UNDETERMINED

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****61. Internet domain names and websites**

	Net book value of debtor's interest	Valuation method	Current value of debtor's interest
61.108. TPSGIFTSOnline.COM	UNDETERMINED	_____	UNDETERMINED
61.109. TPSGIFTSOnline.NET	UNDETERMINED	_____	UNDETERMINED
61.110. TPSGIFTSShop.COM	UNDETERMINED	_____	UNDETERMINED
61.111. TPSGIFTSStore.COM	UNDETERMINED	_____	UNDETERMINED
61.112. WEHAVETHEGIFT.GIFT	UNDETERMINED	_____	UNDETERMINED
61.113. WEHAVETHEGIFT.GIFTS	UNDETERMINED	_____	UNDETERMINED
61.114. WEHAVETHEGIFTS.GIFTS	UNDETERMINED	_____	UNDETERMINED
61.115. WEVEGOTTHEGIFT.GIFT	UNDETERMINED	_____	UNDETERMINED
61.116. WEVEGOTTHEGIFTS.GIFTS	UNDETERMINED	_____	UNDETERMINED

62. Licenses, franchises, and royalties

62.1. _____ \$ _____ _____ \$ _____

63. Customer lists, mailing lists, or other compilations

63.1. THE DEBTOR MAINTAINS A CUSTOMER LIST OF APPROXIMATELY 2.4 MILLION CUSTOMERS UNDETERMINED _____ UNDETERMINED

64. Other intangibles, or intellectual property

64.1. DEBT DISCOUNT \$243,052.14 _____ \$0.00

64.2. DEFERRED FINANCING COSTS \$8,333.18 _____ \$0.00

65. Goodwill

65.1. GOODWILL \$971,733.80 _____ UNDETERMINED

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.

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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. ALASKA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.2. ARKANSAS DEPARTMENT OF REVENUE AND FINANCE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.3. COMPTROLLER OF MARYLAND	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.4. GEORGIA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.5. INDIANA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.6. IOWA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.7. KENTUCKY DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.8. LOUISIANA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.9. MICHIGAN DEPARTMENT OF TREASURY	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.10. MINNESOTA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.11. NEBRASKA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.12. NEVADA DEPARTMENT OF TAXATION	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.13. NORTH CAROLINA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.14. OHIO DEPARTMENT OF TAXATION	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.15. PENNSYLVANIA DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.16. UTAH STATE TAX COMMISSION	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.17. VERMONT DEPARTMENT OF TAXES	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.18. VIRGINIA DEPARTMENT OF TAXATION	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.19. WASHINGTON STATE DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.20. WEST VIRGINIA TAX DEPARTMENT	UNDETERMINED	\$ _____	_____	UNDETERMINED
72.21. WISCONSIN DEPARTMENT OF REVENUE	UNDETERMINED	\$ _____	_____	UNDETERMINED

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. ¹ MA RETAIL MERCHANTS WC GROUP INC.	014005030195119	_____	_____	_____	UNDETERMINED

Debtor	The Paper Store, LLC				Case number (if known) 20-40743
73.2. ²	ASSOCIATION MEMBERS WC	030009100119119			UNDETERMINED
73.3. ³	MEMIC INDEMNITY COMPANY	310 2803281			UNDETERMINED
73.4. ⁴	PHOENIX INSURANCE COMPANY (TRAVELER)	6305J87965A			UNDETERMINED
73.5. ⁵	THE PHOENIX INSURANCE COMPANY (TRAVELER)	BA2N427969			UNDETERMINED
73.6. ⁶	TRAVELERS PROPERTY CASUALTY CO OF AMERICA	CUP6J095004			UNDETERMINED
73.7. ⁷	BEAZLEY INSURANCE COMPANY	V15030200701			UNDETERMINED
73.8. ⁸	JOHNSON & JOHNSON	CF4999002			UNDETERMINED
73.9. ⁸	AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA	87060176732019			UNDETERMINED
73.10. ⁸	JOHNSON & JOHNSON	HCF4999272			UNDETERMINED
73.11. ⁹	ACE AMERICAN INSURANCE CO. (CHUBB)	PHF D42277964 001			UNDETERMINED
73.12. ¹⁰	QBE SPECIALTY INSURANCE CO.	100005770			UNDETERMINED
73.13. ¹¹	MARKEL AMERICAN INSURANCE CO.	MKLM1MXM000184			UNDETERMINED
73.14. ¹²	XL SPECIALTY INSURANCE CO	ELU166184-20			UNDETERMINED
73.15. ¹³	GENWORTH LIFE AND ANNUITY	66500044			UNDETERMINED
73.16. ¹⁴	PRUDENTIAL FINANCIAL	L4 098 192			UNDETERMINED
73.17. ¹⁵	PRUDENTIAL FINANCIAL	L4 098 216			UNDETERMINED
73.18. ¹⁶	PRUDENTIAL FINANCIAL	L4 098 203			UNDETERMINED
73.19. ¹⁷	NEW ENGLAND FINANCIAL	38064845			UNDETERMINED
73.20. ¹⁸	OHIO NATIONAL LIFE INSURANCE	703875			UNDETERMINED
73.21. ¹⁹	AMERICAN ALTERNATIVE INSURANCE CORPORATION	19C0004UF			UNDETERMINED
73.22. ²⁰	HANOVER INSURANCE GROUP	BLP9259249			UNDETERMINED
73.23. ²¹	HANOVER INSURANCE GROUP	BDNA217550			UNDETERMINED
73.24. ²²	LIBERTY MUTUAL SURETY	TBD - APPLICATION PENDING			UNDETERMINED

¹WORKERS COMPENSATION (MA)

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

²WORKERS
COMPENSATION (NH)

³WORKERS
COMPENSATION (CT,
ME, NJ, NY AND RI)

⁴PACKAGE POLICY
(GENERAL LIABILITY,
FLOOD, EARTHQUAKE,
WINDSTORM/HAIL,
INLAND MARINE,
EMPLOYEE BENEFITS
ERRORS OR OMISSIONS)

⁵COMMERCIAL
AUTOMOBILE LIABILITY

⁶EXCESS UMBRELLA
LIABILITY POLICY

⁷CYBER LIABILITY
POLICY

⁸FLOOD INSURANCE

⁹FOREIGN PACKAGE POLICY

¹⁰MANAGEMENT LIABILITY POLICY

¹¹FIRST EXCESS –
DIRECTORS AND
OFFICERS LIABILITY
POLICY

¹²EXCESS DIRECTORS AND
OFFICERS LIABILITY
POLICY – A-SIDE DIC
COVERAGE

¹³LIFE – MARGUERITE M. ANDERSON

¹⁴LIFE – JAMES C.
ANDERSON

¹⁵LIFE – LAURA E.
CAROLAN

¹⁶LIFE – MARGARET
ANDERSON LAVOI

¹⁷LIFE – JOHN M.
ANDERSON

¹⁸LIFE - THOMAS J.
ANDERSON

¹⁹CUSTOMS BOND

²⁰PROFESSIONAL
SOLICITORS AND
COMMERCIAL COVENTURERS

²¹ERISA COMPLIANCE BOND

²²RHODE ISLAND DEPT. OF LABOR & TRAINING PAYROLL BOND

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.	_____	\$ _____	\$ _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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.	CARES ACT EMPLOYEE RETENTION TAX CREDIT CREDITS	\$_____	\$200,000.00

76. Trusts, equitable or future interests in property

76.1. _____ \$_____

77. Other property of any kind not already listed

Examples: Season tickets, country club membership

77.1. _____ \$_____

78. Total of part 11

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

\$200,000.00

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

☒ No

☐ Yes

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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>	\$11,764,596.72	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$548,108.89	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$86,181.30	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$34,156,053.64	
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>	UNDETERMINED	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	UNDETERMINED	
88. Real property. <i>Copy line 56, Part 9.</i>	→	UNDETERMINED
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	UNDETERMINED	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$200,000.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$46,754,940.55	+ 91b. UNDETERMINED
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$46,754,940.55

Fill in this information to identify the case:

Debtor name: The Paper Store, LLC

United States Bankruptcy Court for the: District of Massachusetts

Case number (if known): 20-40743

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

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

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

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

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

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

2.1. Creditor's name and address

ALLY
P.O. BOX 8100
HUNT VALLEY MD 21030

Creditor's email address, if known

Date debt was incurred: November 2015

Last 4 digits of account number: 6397

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

2015 RAMT PROM25 ID 0000_AU_00002-1

Describe the lien

VEHICLE LOAN

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

\$4,528.03

UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.2. **Creditor's name and address**

ALLY
P.O. BOX 380902
BLOOMINGTON MN 55438

Creditor's email address, if known

Date debt was incurred: September 2017

Last 4 digits of account number: 6262

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

2016 HINO ID 0000_AU_00006-1 \$45,221.83 UNDETERMINED

Describe the lien

VEHICLE LOAN

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

2.3. **Creditor's name and address**

ALLY
P.O. BOX 380902
BLOOMINGTON MN 55438

Creditor's email address, if known

Date debt was incurred: September 2017

Last 4 digits of account number: 9231

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

2016 HINO ID 0000_AU_00007-1 \$43,928.27 UNDETERMINED

Describe the lien

VEHICLE LOAN

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.4.	Creditor's name and address ALLY PO BOX 8138 COCKEYSVILLE MD 21030 Creditor's email address, if known Date debt was incurred: January 2018 Last 4 digits of account number: 7206 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 2018 GMC YUKON XL ID 0000_AU_00009-1 \$36,795.63 UNDETERMINED Describe the lien VEHICLE LEASE Is the creditor an insider or related party? ☒ No ☐ Yes Is anyone else liable on this claim? ☒ No ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed
2.5.	Creditor's name and address ALLY PO BOX 8138 COCKEYSVILLE MD 21030 Creditor's email address, if known Date debt was incurred: May 2018 Last 4 digits of account number: 6867 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 2018 FORD EXPEDITION ID 0000_AU_00012-1 \$50,243.86 UNDETERMINED Describe the lien VEHICLE LEASE Is the creditor an insider or related party? ☒ No ☐ Yes Is anyone else liable on this claim? ☒ No ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.6. **Creditor's name and address**
- ALLY
PO BOX 8138
COCKEYVILLE MD 21030
- Creditor's email address, if known**
-
- Date debt was incurred:** May 2018
- Last 4 digits of account number:** 5527
- 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**
- 2016 DODGE CHARGER ID 0000_AU_00013-1 \$29,643.54 UNDETERMINED
- Describe the lien**
- VEHICLE LOAN
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- 2.7. **Creditor's name and address**
- ALLY
P.O. BOX 8100
HUNT VALLEY MD 21030
- Creditor's email address, if known**
-
- Date debt was incurred:** July 2016
- Last 4 digits of account number:** 3147
- 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**
- 2015 HINO 238 ID 0000_AU_00004-1 \$21,712.30 UNDETERMINED
- Describe the lien**
- VEHICLE LOAN
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.8. Creditor's name and address ALLY PO BOX 8138 COCKEYSVILLE MD 21030 Creditor's email address, if known Date debt was incurred: April 2019 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 2019 TOYOTA HIGHLANDER ID 0000_AU_00016-1 Describe the lien VEHICLE LOAN Is the creditor an insider or related party? ☒ No ☐ Yes Is anyone else liable on this claim? ☒ No ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	\$30,819.72 UNDETERMINED
2.9. Creditor's name and address CITIZENS ONE AUTO FINANCE P.O. BOX 42113 PROVIDENCE RI 02094 Creditor's email address, if known Date debt was incurred: September 2017 Last 4 digits of account number: 2710 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 2017 ACURA MDX ID 0000_AU_00008-1 Describe the lien VEHICLE LOAN Is the creditor an insider or related party? ☒ No ☐ Yes Is anyone else liable on this claim? ☒ No ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed	\$20,290.75 UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.10. **Creditor's name and address**

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF UNEMPLOYMENT
ASSISTANCE
CHARLES F. HURLEY BUILDING
19 STANIFORD STREET
BOSTON MA 02114

Creditor's email address, if known

Date debt was incurred: 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

LIEN IN ANY PROPERTY, REAL OR PERSONAL, TANGIBLE OR INTANGIBLE

Describe the lien

TAX LIEN RECORDED, MASSACHUSETTS - MIDDLESEX SOUTH REGISTRY OF DEEDS; RECORDED 4/14/2016; FILE NO. BK67088/PG218

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

\$26,369.76 UNDETERMINED

2.11. **Creditor's name and address**

CORPORATION SERVICE COMPANY, AS REPRESENTATIVE
P.O. BOX 2576
SPRINGFIELD IL 62708

Creditor's email address, if known

Date debt was incurred: September 2018

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

ALL OF THE ASSETS AND PROPERTY, INCLUDING, BUT NOT LIMITED TO, ANY AND ALL OF THE HARDWARE, EQUIPMENT, FURNITURE, FIXTURES, GOODS, GENERAL INTANGIBLES, INTANGIBLES, LICENSES AND SOFTWARE

Describe the lien

UCC FINANCING STATEMENT RECORDED WITH MASSACHUSETTS - SECRETARY OF THE COMMONWEALTH, DATED 9/28/2018, FILE NO.201849905820

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

UNDETERMINED UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.12. **Creditor's name and address**

FORD CREDIT
BOX 220564
PITTSBURGH PA 15257

Creditor's email address, if known

Date debt was incurred: October 2017

Last 4 digits of account number: 6867

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

2017 FORD EXPEDITION ID
0000_AU_00005-1

Describe the lien

VEHICLE LOAN

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

\$27,686.99 UNDETERMINED

2.13. **Creditor's name and address**

IKON FINANCIAL SVCS
1738 BASS RD
MACON GA 31210-1043

Creditor's email address, if known

Date debt was incurred: May 2017

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

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

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

Describe debtor's property that is subject to a lien

ALL EQUIPMENT NOW OR HEREAFTER
LEASED IN AN EQUIPMENT LEASING
TRANSACTION IN CONNECTION WITH
THAT CERTAIN MASTER AGREEMENT NO.
SEE BELOW; PRODUCT SCHEDULE
NO./AGREEMENT NO. 1028885ML, MASTER
AGREEMENT/LEASE NO. 1028885

Describe the lien

UCC FINANCING STATEMENT RECORDED
WITH MASSACHUSETTS - SECRETARY OF
THE COMMONWEALTH, DATED 5/30/2017,
FILE NO.201737235770

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

UNDETERMINED UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.14. **Creditor's name and address**

KAYNE SENIOR CREDIT II, LLC
AS ADMINISTRATIVE AGENT
311 SOUTH WACKER DRIVE
SUITE 3350
CHICAGO IL 60606

Creditor's email address, if known

Date debt was incurred: September 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.

☐ 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 INCLUDING ACCOUNTS RECEIVABLE, INVENTORY, CASH AND OTHER PERSONAL PROPERTY

\$40,332,110.21 UNDETERMINED

Describe the lien

UCC FINANCING STATEMENT RECORDED WITH MASSACHUSETTS - SECRETARY OF THE COMMONWEALTH, DATED 9/24/2014, FILE NO.201414861610; CONTINUED ON 5/9/2019, FILE NO. 201955232700

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

2.15. **Creditor's name and address**

LEXUS FINANCIAL SERVICES
P.O. BOX 4102
CAROL STREAM IL 60197-4102

Creditor's email address, if known

Date debt was incurred: July 2018

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

2018 LEXUS ES350

\$12,651.86 UNDETERMINED

Describe the lien

VEHICLE LEASE

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.16. **Creditor's name and address**
- TOYOTA INDUSTRIES COMMERICAL
FINANCE, INC
DEPT 2431
CAROL STREAM IL 60132-2431
- Creditor's email address, if known**
- _____
- Date debt was incurred:** October 2018
- Last 4 digits of account number:** 9975
- 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**
- 2018 TOYOTA HIGHLANDER ID
0000_AU_00015-1
- Describe the lien**
- VEHICLE LOAN
- Is the creditor an insider or related party?**
- ☒ No
- ☐ Yes
- Is anyone else liable on this claim?**
- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).
- As of the petition filing date, the claim is:**
Check all that apply.
- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- \$34,168.73 UNDETERMINED
- 2.17. **Creditor's name and address**
- WINTHROP LEASING
11100 WAYZATA BOULEVARD
SUITE 801
MINNETONKA MN 55305
- Creditor's email address, if known**
- _____
- Date debt was incurred:** Nov 2018 - Nov 2019
- 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**
- LEASED PROPERTY (REGISTERS)
- Describe the lien**
- LEASED PROPERTY
- 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
- \$551,640.92 UNDETERMINED
3. **Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**
- \$41,267,812.40**

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

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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.	BOWDITCH & DEWEY LLP MARK W POWERS 311 MAIN ST WORCESTER MA 01608	Line 2.14	_____
3.2.	LAREDO & SMITH LLP MARC C LAREDO;MATTHEW A KANE 101 FEDERAL ST.,STE 650 BOSTON MA 02110	Line 2.17	_____
3.3.	LOEB & LOEB LANCE JURICH 10100 SANTA MONICA BLVD SUITE 2200 LOS ANGELES CA 90067	Line 2.14	_____
3.4.	LOEB & LOEB VADIM J. RUBINSTEIN 345 PARK AVENUE NEW YORK NY 10154	Line 2.14	_____
3.5.	MA- DEPARTMENT OF REVENUE CELINE E DE LA FOSCADE-CONDON 100 CAMBRIDGE ST P O BOX 9565 BOSTON MA 02114	Line 2.10	_____
3.6.	MAYER BROWN AARON GAVANT 71 SOUTH WACKER DRIVE CHICAGO IL 60606	Line 2.14	_____
3.7.	MAYER BROWN SEAN SCOTT 71 SOUTH WACKER DRIVE CHICAGO IL 60606	Line 2.14	_____
3.8.	MIRICK O'CONNELL DEMALLIE & LOUGEE LLP PAUL W CAREY 100 FRONT ST WORCESTER MA 01608	Line 2.14	_____
3.9.	MIRICK O'CONNELL DEMALLIE & LOUGEE LLP CHRISTINE E DEVINE 100 FRONT ST WORCESTER MA 01608	Line 2.14	_____

Fill in this information to identify the case:

Debtor name: The Paper Store, LLC

United States Bankruptcy Court for the: District of Massachusetts

Case number (if known): 20-40743

☐ 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
	ABEL, JILL M Address Intentionally Omitted	☐ Contingent ☐ Unliquidated ☐ Disputed	\$1,445.60	\$1,057.70
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			Nonpriority amount \$387.91
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
	ADAMCZYK, HEATHER E Address Intentionally Omitted	☐ Contingent ☐ Unliquidated ☐ Disputed	\$2,959.02	\$1,946.73
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			Nonpriority amount \$1,012.30

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.3.	Priority creditor's name and mailing address AKYUZ, MAGGY Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$937.72</td> </tr> </table>	Total claim	\$937.72	<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;">\$435.00</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;">\$502.72</td> </tr> </table>	Priority amount	\$435.00	Nonpriority amount	\$502.72
Total claim										
\$937.72										
Priority amount										
\$435.00										
Nonpriority amount										
\$502.72										
2.4.	Priority creditor's name and mailing address ALEJANDRE, CHRISTIAN G Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$737.26</td> </tr> </table>	Total claim	\$737.26	<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;">\$737.02</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;">\$0.24</td> </tr> </table>	Priority amount	\$737.02	Nonpriority amount	\$0.24
Total claim										
\$737.26										
Priority amount										
\$737.02										
Nonpriority amount										
\$0.24										
2.5.	Priority creditor's name and mailing address ALLEN, ERIC M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.6.	Priority creditor's name and mailing address ALMOND, TERESA E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$770.00</td></tr></table>	Total claim	\$770.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$350.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$420.00</td></tr></table>	Priority amount	\$350.00	Nonpriority amount	\$420.00
Total claim										
\$770.00										
Priority amount										
\$350.00										
Nonpriority amount										
\$420.00										
2.7.	Priority creditor's name and mailing address ALMORI, BRITTNEY M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$708.00</td></tr></table>	Total claim	\$708.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$393.38</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$314.62</td></tr></table>	Priority amount	\$393.38	Nonpriority amount	\$314.62
Total claim										
\$708.00										
Priority amount										
\$393.38										
Nonpriority amount										
\$314.62										
2.8.	Priority creditor's name and mailing address ALVARADO, ELIZABETH Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$213.44</td></tr></table>	Total claim	\$213.44	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$213.44</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$213.44	Nonpriority amount	\$0.00
Total claim										
\$213.44										
Priority amount										
\$213.44										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.9.	Priority creditor's name and mailing address ANDERSON, MICHELLE J Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,355.77	Priority amount \$673.08
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$1,682.69
	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? ☒ No ☐ Yes		

2.10.	Priority creditor's name and mailing address ANDERSON, ROSS P Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,668.40	Priority amount \$1,067.44
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$1,600.96
	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? ☒ No ☐ Yes		

2.11.	Priority creditor's name and mailing address ANNESE, CHRISTINE R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,294.02	Priority amount \$1,634.61
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$659.40
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.12.	Priority creditor's name and mailing address AUCOIN, DENISE C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$657.69</td> </tr> </table>	Total claim	\$657.69	<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;">\$657.69</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	\$657.69	Nonpriority amount	\$0.00
Total claim										
\$657.69										
Priority amount										
\$657.69										
Nonpriority amount										
\$0.00										
2.13.	Priority creditor's name and mailing address BABAJTIS ABDULLA, JENNIFER M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,681.73</td> </tr> </table>	Total claim	\$1,681.73	<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;">\$1,274.04</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;">\$407.69</td> </tr> </table>	Priority amount	\$1,274.04	Nonpriority amount	\$407.69
Total claim										
\$1,681.73										
Priority amount										
\$1,274.04										
Nonpriority amount										
\$407.69										
2.14.	Priority creditor's name and mailing address BACCHIOCCHI, HEATHER B Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$680.00</td> </tr> </table>	Total claim	\$680.00	<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;">\$340.00</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;">\$340.00</td> </tr> </table>	Priority amount	\$340.00	Nonpriority amount	\$340.00
Total claim										
\$680.00										
Priority amount										
\$340.00										
Nonpriority amount										
\$340.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.15.	Priority creditor's name and mailing address BAGEHORN, ERNIE D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$793.39</td> </tr> </table>	Total claim	\$793.39	<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;">\$453.39</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;">\$340.00</td> </tr> </table>	Priority amount	\$453.39	Nonpriority amount	\$340.00
Total claim										
\$793.39										
Priority amount										
\$453.39										
Nonpriority amount										
\$340.00										
2.16.	Priority creditor's name and mailing address BAKER, ONNA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$228.71</td> </tr> </table>	Total claim	\$228.71	<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;">\$228.59</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;">\$0.12</td> </tr> </table>	Priority amount	\$228.59	Nonpriority amount	\$0.12
Total claim										
\$228.71										
Priority amount										
\$228.59										
Nonpriority amount										
\$0.12										
2.17.	Priority creditor's name and mailing address BAKER, PAMELA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$369.23</td> </tr> </table>	Total claim	\$369.23	<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;">\$369.23</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	\$369.23	Nonpriority amount	\$0.00
Total claim										
\$369.23										
Priority amount										
\$369.23										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.18.	Priority creditor's name and mailing address BARBOSA, NIDIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$386.72</td> </tr> </table>	Total claim	\$386.72	<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;">\$386.72</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	\$386.72	Nonpriority amount	\$0.00
Total claim										
\$386.72										
Priority amount										
\$386.72										
Nonpriority amount										
\$0.00										
2.19.	Priority creditor's name and mailing address BARNUM, CHRISTINE A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$696.00</td> </tr> </table>	Total claim	\$696.00	<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;">\$386.72</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;">\$309.29</td> </tr> </table>	Priority amount	\$386.72	Nonpriority amount	\$309.29
Total claim										
\$696.00										
Priority amount										
\$386.72										
Nonpriority amount										
\$309.29										
2.20.	Priority creditor's name and mailing address BARRETT, SHANNON J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,500.20</td> </tr> </table>	Total claim	\$1,500.20	<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;">\$865.50</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;">\$634.70</td> </tr> </table>	Priority amount	\$865.50	Nonpriority amount	\$634.70
Total claim										
\$1,500.20										
Priority amount										
\$865.50										
Nonpriority amount										
\$634.70										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.21.	Priority creditor's name and mailing address BARRY, MICHAEL T Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,311.54</td> </tr> </table>	Total claim	\$1,311.54	<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;">\$894.23</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;">\$417.31</td> </tr> </table>	Priority amount	\$894.23	Nonpriority amount	\$417.31
Total claim										
\$1,311.54										
Priority amount										
\$894.23										
Nonpriority amount										
\$417.31										
2.22.	Priority creditor's name and mailing address BATEMAN, TAMMY L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,000.10</td> </tr> </table>	Total claim	\$1,000.10	<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;">\$769.33</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;">\$230.77</td> </tr> </table>	Priority amount	\$769.33	Nonpriority amount	\$230.77
Total claim										
\$1,000.10										
Priority amount										
\$769.33										
Nonpriority amount										
\$230.77										
2.23.	Priority creditor's name and mailing address BATTLE, DREIME L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$918.00</td> </tr> </table>	Total claim	\$918.00	<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;">\$680.00</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;">\$238.00</td> </tr> </table>	Priority amount	\$680.00	Nonpriority amount	\$238.00
Total claim										
\$918.00										
Priority amount										
\$680.00										
Nonpriority amount										
\$238.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.24.	Priority creditor's name and mailing address BAUGHMAN, SARAH N Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$578.62</td></tr></table>	Total claim	\$578.62	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$413.39</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$165.23</td></tr></table>	Priority amount	\$413.39	Nonpriority amount	\$165.23
Total claim										
\$578.62										
Priority amount										
\$413.39										
Nonpriority amount										
\$165.23										
2.25.	Priority creditor's name and mailing address BEARSE, ASHLEY J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$768.06</td></tr></table>	Total claim	\$768.06	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$480.06</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$288.00</td></tr></table>	Priority amount	\$480.06	Nonpriority amount	\$288.00
Total claim										
\$768.06										
Priority amount										
\$480.06										
Nonpriority amount										
\$288.00										
2.26.	Priority creditor's name and mailing address BEAUPRE, MICHAEL T Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$270.72</td></tr></table>	Total claim	\$270.72	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$270.72</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$270.72	Nonpriority amount	\$0.00
Total claim										
\$270.72										
Priority amount										
\$270.72										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.27.	Priority creditor's name and mailing address BELLIO, ANDREA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$2,871.93</td></tr></table>	Total claim	\$2,871.93	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$2,267.31</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$604.62</td></tr></table>	Priority amount	\$2,267.31	Nonpriority amount	\$604.62
Total claim										
\$2,871.93										
Priority amount										
\$2,267.31										
Nonpriority amount										
\$604.62										
2.28.	Priority creditor's name and mailing address BENZ, STEPHANIE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$2,428.12</td></tr></table>	Total claim	\$2,428.12	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$2,428.12</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$2,428.12	Nonpriority amount	\$0.00
Total claim										
\$2,428.12										
Priority amount										
\$2,428.12										
Nonpriority amount										
\$0.00										
2.29.	Priority creditor's name and mailing address BERBAS, SHELBI Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$576.05</td></tr></table>	Total claim	\$576.05	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$360.05</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$216.00</td></tr></table>	Priority amount	\$360.05	Nonpriority amount	\$216.00
Total claim										
\$576.05										
Priority amount										
\$360.05										
Nonpriority amount										
\$216.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.30.	Priority creditor's name and mailing address BLANCHARD, CYNTHIA A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$252.00	Priority amount \$252.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.31.	Priority creditor's name and mailing address BOEHM, CHRISTA A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,510.36	Priority amount \$1,192.31
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$318.05
	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? ☒ No ☐ Yes		

2.32.	Priority creditor's name and mailing address BOLICK, MARGARITA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.33.	Priority creditor's name and mailing address BORRERO, AMANDA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$671.94</td></tr></table>	Total claim	\$671.94	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$239.94</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$432.00</td></tr></table>	Priority amount	\$239.94	Nonpriority amount	\$432.00
Total claim										
\$671.94										
Priority amount										
\$239.94										
Nonpriority amount										
\$432.00										
2.34.	Priority creditor's name and mailing address BOULAY, PAUL F Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$628.96</td></tr></table>	Total claim	\$628.96	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$424.96</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$204.00</td></tr></table>	Priority amount	\$424.96	Nonpriority amount	\$204.00
Total claim										
\$628.96										
Priority amount										
\$424.96										
Nonpriority amount										
\$204.00										
2.35.	Priority creditor's name and mailing address BOWEN, JULIE A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$315.00</td></tr></table>	Total claim	\$315.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$315.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$315.00	Nonpriority amount	\$0.00
Total claim										
\$315.00										
Priority amount										
\$315.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.36.	Priority creditor's name and mailing address BREault, CHRISTOPHER M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$960.00	Priority amount \$426.72
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$533.28
	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? ☒ No ☐ Yes		

2.37.	Priority creditor's name and mailing address BRENNAN, EMMA R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$300.04	Priority amount \$225.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$75.04
	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? ☒ No ☐ Yes		

2.38.	Priority creditor's name and mailing address BRIER, LOREN M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,610.00	Priority amount \$690.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$920.00
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.39.	Priority creditor's name and mailing address BROOKS, LINDSAY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$768.00	Priority amount \$640.00 Nonpriority amount \$128.00
2.40.	Priority creditor's name and mailing address BUCHANIO, KATIE L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$1,044.00	Priority amount \$580.00 Nonpriority amount \$464.00
2.41.	Priority creditor's name and mailing address BUDARZ, TANYA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$1,062.50	Priority amount \$1,062.50 Nonpriority amount \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.42.	Priority creditor's name and mailing address BUONAUGURIO, KATHLEEN M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$362.78	Priority amount \$362.78
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.43.	Priority creditor's name and mailing address BUONO, JENNIFER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,031.94	Priority amount \$599.94
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$432.00
	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? ☒ No ☐ Yes		

2.44.	Priority creditor's name and mailing address BURAKIEWICZ, ZORIALYS Y Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,189.00	Priority amount \$580.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$609.00
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.45.	Priority creditor's name and mailing address CACERES VELAZQUEZ, JOSE G Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,302.00	Priority amount \$1,260.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$42.00
	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? ☒ No ☐ Yes		

2.46.	Priority creditor's name and mailing address CAFASSO, SAVANNAH M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$910.00	Priority amount \$390.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$520.00
	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? ☒ No ☐ Yes		

2.47.	Priority creditor's name and mailing address CALDAS, DEBORAH Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$799.95	Priority amount \$499.95
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$300.00
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.48.	Priority creditor's name and mailing address CAPELLI SANTOS, GIANNINA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$383.75	Priority amount \$383.75
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.49.	Priority creditor's name and mailing address CARBONIER, SARA B Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$5,516.83	Priority amount \$3,310.10
				Nonpriority amount \$2,206.73
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.50.	Priority creditor's name and mailing address CARRIGNAN, SHAWN E Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$613.41	Priority amount \$613.18
				Nonpriority amount \$0.23
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.51.	Priority creditor's name and mailing address CASAVANT, SANDRA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,089.00</td></tr></table>	Total claim	\$1,089.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$660.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$429.00</td></tr></table>	Priority amount	\$660.00	Nonpriority amount	\$429.00
Total claim										
\$1,089.00										
Priority amount										
\$660.00										
Nonpriority amount										
\$429.00										
2.52.	Priority creditor's name and mailing address CASSANELLI, BIANCA J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,050.00</td></tr></table>	Total claim	\$1,050.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$900.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$150.00</td></tr></table>	Priority amount	\$900.00	Nonpriority amount	\$150.00
Total claim										
\$1,050.00										
Priority amount										
\$900.00										
Nonpriority amount										
\$150.00										
2.53.	Priority creditor's name and mailing address CASTRO, NICOLE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$630.05</td></tr></table>	Total claim	\$630.05	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$270.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$360.05</td></tr></table>	Priority amount	\$270.00	Nonpriority amount	\$360.05
Total claim										
\$630.05										
Priority amount										
\$270.00										
Nonpriority amount										
\$360.05										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.54.	Priority creditor's name and mailing address CAVALIERI, ALYSSA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$446.72	Priority amount \$335.00
				Nonpriority amount \$111.72
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.55.	Priority creditor's name and mailing address CEDENO, ELBA I Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$693.00	Priority amount \$630.00
				Nonpriority amount \$63.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.56.	Priority creditor's name and mailing address CHALOUX, JAMIE L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,241.34	Priority amount \$1,200.72
				Nonpriority amount \$1,040.62
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.57.	Priority creditor's name and mailing address CHAMPAGNE, JODI L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$180.00	Priority amount \$180.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.58.	Priority creditor's name and mailing address COFFILL, MICHELLE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$266.72	Priority amount \$266.72
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.59.	Priority creditor's name and mailing address COLEMAN, JOHN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,112.72	Priority amount \$993.49
				Nonpriority amount \$119.23
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.60.	Priority creditor's name and mailing address CONGDON, TRACIE M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$599.94	Priority amount \$599.94
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.61.	Priority creditor's name and mailing address CONTRERAS, MARIA J Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$599.94	Priority amount \$239.94
				Nonpriority amount \$360.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.62.	Priority creditor's name and mailing address COOPER, CHRISTINE M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,114.74	Priority amount \$586.74
				Nonpriority amount \$528.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.63.	Priority creditor's name and mailing address CORRIS, COLLEEN A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,458.44	Priority amount \$833.44
				Nonpriority amount \$625.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.64.	Priority creditor's name and mailing address COSKI, LISA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$380.29	Priority amount \$380.29
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.65.	Priority creditor's name and mailing address COURTEMANCHE-SAMUDA, JILL D Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,250.00	Priority amount \$1,250.00
				Nonpriority amount \$1,000.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.66.	Priority creditor's name and mailing address COVEY, ERIN C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$750.00</td></tr></table>	Total claim	\$750.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$600.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$150.00</td></tr></table>	Priority amount	\$600.00	Nonpriority amount	\$150.00
Total claim										
\$750.00										
Priority amount										
\$600.00										
Nonpriority amount										
\$150.00										
2.67.	Priority creditor's name and mailing address COX, ASHLEY M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$3,041.82</td></tr></table>	Total claim	\$3,041.82	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$2,401.44</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$640.38</td></tr></table>	Priority amount	\$2,401.44	Nonpriority amount	\$640.38
Total claim										
\$3,041.82										
Priority amount										
\$2,401.44										
Nonpriority amount										
\$640.38										
2.68.	Priority creditor's name and mailing address CUMBO, SARAH Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,422.98</td></tr></table>	Total claim	\$1,422.98	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$769.33</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$653.65</td></tr></table>	Priority amount	\$769.33	Nonpriority amount	\$653.65
Total claim										
\$1,422.98										
Priority amount										
\$769.33										
Nonpriority amount										
\$653.65										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.69.	Priority creditor's name and mailing address CURRY, KEVIN M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$476.00</td></tr></table>	Total claim	\$476.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$476.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$476.00	Nonpriority amount	\$0.00
Total claim										
\$476.00										
Priority amount										
\$476.00										
Nonpriority amount										
\$0.00										
2.70.	Priority creditor's name and mailing address CUTRONI, DANIELLE C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,196.40</td></tr></table>	Total claim	\$1,196.40	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,110.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$86.40</td></tr></table>	Priority amount	\$1,110.00	Nonpriority amount	\$86.40
Total claim										
\$1,196.40										
Priority amount										
\$1,110.00										
Nonpriority amount										
\$86.40										
2.71.	Priority creditor's name and mailing address DAMUTH, JESSICA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$739.95</td></tr></table>	Total claim	\$739.95	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$499.95</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$240.00</td></tr></table>	Priority amount	\$499.95	Nonpriority amount	\$240.00
Total claim										
\$739.95										
Priority amount										
\$499.95										
Nonpriority amount										
\$240.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.72.	Priority creditor's name and mailing address DANTZLER, TANYA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,140.68	Priority amount \$1,689.90
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$450.78
	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? ☒ No ☐ Yes		

2.73.	Priority creditor's name and mailing address DAVEY, PETER Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,551.37	Priority amount \$528.85
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$1,022.53
	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? ☒ No ☐ Yes		

2.74.	Priority creditor's name and mailing address DAVIAGE, AUDREY J Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$536.54	Priority amount \$536.54
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.75.	Priority creditor's name and mailing address DAVIDSON, SEAN MICHAEL S Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$103.39</td></tr></table>	Total claim	\$103.39	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$103.39</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$103.39	Nonpriority amount	\$0.00
Total claim										
\$103.39										
Priority amount										
\$103.39										
Nonpriority amount										
\$0.00										
2.76.	Priority creditor's name and mailing address DAVILA, FLOR D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$684.00</td></tr></table>	Total claim	\$684.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$540.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$144.00</td></tr></table>	Priority amount	\$540.00	Nonpriority amount	\$144.00
Total claim										
\$684.00										
Priority amount										
\$540.00										
Nonpriority amount										
\$144.00										
2.77.	Priority creditor's name and mailing address DAVIS, TABITHA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$80.23</td></tr></table>	Total claim	\$80.23	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$80.23</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$80.23	Nonpriority amount	\$0.00
Total claim										
\$80.23										
Priority amount										
\$80.23										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.78.	Priority creditor's name and mailing address DAVIS, TARYNE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$1,292.80</td> </tr> </table>	Total claim	\$1,292.80	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,010.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$282.80</td> </tr> </table>	Priority amount	\$1,010.00	Nonpriority amount	\$282.80
Total claim										
\$1,292.80										
Priority amount										
\$1,010.00										
Nonpriority amount										
\$282.80										
2.79.	Priority creditor's name and mailing address DEBAETS, HEATHER L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$232.00</td> </tr> </table>	Total claim	\$232.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$232.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$232.00	Nonpriority amount	\$0.00
Total claim										
\$232.00										
Priority amount										
\$232.00										
Nonpriority amount										
\$0.00										
2.80.	Priority creditor's name and mailing address DECAMBRA, MICHELLE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$510.00</td> </tr> </table>	Total claim	\$510.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$510.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$510.00	Nonpriority amount	\$0.00
Total claim										
\$510.00										
Priority amount										
\$510.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.81.	Priority creditor's name and mailing address DECHELLIS, JUDITH M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$528.00</td> </tr> </table>	Total claim	\$528.00	<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;">\$528.00</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	\$528.00	Nonpriority amount	\$0.00
Total claim										
\$528.00										
Priority amount										
\$528.00										
Nonpriority amount										
\$0.00										
2.82.	Priority creditor's name and mailing address DECHELLIS, MICHAELA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$360.05</td> </tr> </table>	Total claim	\$360.05	<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;">\$270.00</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;">\$90.05</td> </tr> </table>	Priority amount	\$270.00	Nonpriority amount	\$90.05
Total claim										
\$360.05										
Priority amount										
\$270.00										
Nonpriority amount										
\$90.05										
2.83.	Priority creditor's name and mailing address DELAY, PAMELA W Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$906.61</td> </tr> </table>	Total claim	\$906.61	<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;">\$476.00</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;">\$430.61</td> </tr> </table>	Priority amount	\$476.00	Nonpriority amount	\$430.61
Total claim										
\$906.61										
Priority amount										
\$476.00										
Nonpriority amount										
\$430.61										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.84.	Priority creditor's name and mailing address DELMONICO, DAVID Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$696.00	Priority amount \$386.72
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$309.29
	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? ☒ No ☐ Yes		

2.85.	Priority creditor's name and mailing address DEPIETRI, KAYLA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.86.	Priority creditor's name and mailing address DESROSIERS, MICHELE M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.87.	Priority creditor's name and mailing address DIBUONO, DONNA E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$290.00</td> </tr> </table>	Total claim	\$290.00	<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;">\$290.00</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	\$290.00	Nonpriority amount	\$0.00
Total claim										
\$290.00										
Priority amount										
\$290.00										
Nonpriority amount										
\$0.00										
2.88.	Priority creditor's name and mailing address DION SOBERG, JULIE A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$899.04</td> </tr> </table>	Total claim	\$899.04	<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;">\$899.04</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	\$899.04	Nonpriority amount	\$0.00
Total claim										
\$899.04										
Priority amount										
\$899.04										
Nonpriority amount										
\$0.00										
2.89.	Priority creditor's name and mailing address DION, BRANDON M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$952.14</td> </tr> </table>	Total claim	\$952.14	<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;">\$952.14</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	\$952.14	Nonpriority amount	\$0.00
Total claim										
\$952.14										
Priority amount										
\$952.14										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.90.	Priority creditor's name and mailing address DOBSON, TANYA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$450.00</td> </tr> </table>	Total claim	\$450.00	<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;">\$450.00</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	\$450.00	Nonpriority amount	\$0.00
Total claim										
\$450.00										
Priority amount										
\$450.00										
Nonpriority amount										
\$0.00										
2.91.	Priority creditor's name and mailing address DONOVAN, COLLEEN M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$780.00</td> </tr> </table>	Total claim	\$780.00	<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;">\$400.05</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;">\$379.95</td> </tr> </table>	Priority amount	\$400.05	Nonpriority amount	\$379.95
Total claim										
\$780.00										
Priority amount										
\$400.05										
Nonpriority amount										
\$379.95										
2.92.	Priority creditor's name and mailing address DOWNING, ANNASTASIA T Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$744.00</td> </tr> </table>	Total claim	\$744.00	<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;">\$620.00</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;">\$124.00</td> </tr> </table>	Priority amount	\$620.00	Nonpriority amount	\$124.00
Total claim										
\$744.00										
Priority amount										
\$620.00										
Nonpriority amount										
\$124.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.93.	Priority creditor's name and mailing address DRISCOLL, KIM E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$6,947.11</td> </tr> </table>	Total claim	\$6,947.11	<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;">\$4,168.27</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;">\$2,778.85</td> </tr> </table>	Priority amount	\$4,168.27	Nonpriority amount	\$2,778.85
Total claim										
\$6,947.11										
Priority amount										
\$4,168.27										
Nonpriority amount										
\$2,778.85										
2.94.	Priority creditor's name and mailing address DROBNAK, KRISTINA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$644.23</td> </tr> </table>	Total claim	\$644.23	<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;">\$644.23</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	\$644.23	Nonpriority amount	\$0.00
Total claim										
\$644.23										
Priority amount										
\$644.23										
Nonpriority amount										
\$0.00										
2.95.	Priority creditor's name and mailing address DUBROWSKI, MOLLY C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$888.62</td> </tr> </table>	Total claim	\$888.62	<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;">\$413.39</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;">\$475.23</td> </tr> </table>	Priority amount	\$413.39	Nonpriority amount	\$475.23
Total claim										
\$888.62										
Priority amount										
\$413.39										
Nonpriority amount										
\$475.23										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.96.	Priority creditor's name and mailing address DUNLAP, BRITTANY L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$990.00	Priority amount \$440.06
				Nonpriority amount \$549.95
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.97.	Priority creditor's name and mailing address DUPONTE, CRYSTAL E Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$594.00	Priority amount \$594.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.98.	Priority creditor's name and mailing address DUPUIS, DANIELLE R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$440.00	Priority amount \$440.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.99.	Priority creditor's name and mailing address DURANT, BRIDGET M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$84.02</td> </tr> </table>	Total claim	\$84.02	<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;">\$84.02</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	\$84.02	Nonpriority amount	\$0.00
Total claim										
\$84.02										
Priority amount										
\$84.02										
Nonpriority amount										
\$0.00										
2.100.	Priority creditor's name and mailing address DWYER, JENNIFER E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$2,979.09</td> </tr> </table>	Total claim	\$2,979.09	<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;">\$2,427.40</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;">\$551.68</td> </tr> </table>	Priority amount	\$2,427.40	Nonpriority amount	\$551.68
Total claim										
\$2,979.09										
Priority amount										
\$2,427.40										
Nonpriority amount										
\$551.68										
2.101.	Priority creditor's name and mailing address DZICZEK, MICHAEL J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$9.23</td> </tr> </table>	Total claim	\$9.23	<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;">\$9.23</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	\$9.23	Nonpriority amount	\$0.00
Total claim										
\$9.23										
Priority amount										
\$9.23										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.102.	Priority creditor's name and mailing address EMERSON, ALICIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$840.00	Priority amount \$499.95 Nonpriority amount \$340.05
2.103.	Priority creditor's name and mailing address ENGEL, MARLEEN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$816.00	Priority amount \$340.00 Nonpriority amount \$476.00
2.104.	Priority creditor's name and mailing address ENOS, DEBRA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$1,541.56	Priority amount \$833.44 Nonpriority amount \$708.13

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.105.	Priority creditor's name and mailing address ESKILDSEN, MARK A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,947.12</td></tr></table>	Total claim	\$1,947.12	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,947.12</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$1,947.12	Nonpriority amount	\$0.00
Total claim										
\$1,947.12										
Priority amount										
\$1,947.12										
Nonpriority amount										
\$0.00										
2.106.	Priority creditor's name and mailing address ESTES, HILLARY R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$3,041.82</td></tr></table>	Total claim	\$3,041.82	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$2,321.39</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$720.43</td></tr></table>	Priority amount	\$2,321.39	Nonpriority amount	\$720.43
Total claim										
\$3,041.82										
Priority amount										
\$2,321.39										
Nonpriority amount										
\$720.43										
2.107.	Priority creditor's name and mailing address FARROW, KATELYN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$65.87</td></tr></table>	Total claim	\$65.87	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$65.87</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$65.87	Nonpriority amount	\$0.00
Total claim										
\$65.87										
Priority amount										
\$65.87										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.108.	Priority creditor's name and mailing address FEARON, VICTORIA S Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$589.95</td></tr></table>	Total claim	\$589.95	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$589.95</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$589.95	Nonpriority amount	\$0.00
Total claim										
\$589.95										
Priority amount										
\$589.95										
Nonpriority amount										
\$0.00										
2.109.	Priority creditor's name and mailing address FELDER, NIKITA C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,541.95</td></tr></table>	Total claim	\$1,541.95	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,192.31</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$349.64</td></tr></table>	Priority amount	\$1,192.31	Nonpriority amount	\$349.64
Total claim										
\$1,541.95										
Priority amount										
\$1,192.31										
Nonpriority amount										
\$349.64										
2.110.	Priority creditor's name and mailing address FELICIANO, KIARA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$122.69</td></tr></table>	Total claim	\$122.69	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$122.69</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$122.69	Nonpriority amount	\$0.00
Total claim										
\$122.69										
Priority amount										
\$122.69										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.111.	Priority creditor's name and mailing address FERGUSON, SARAH J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,198.63</td> </tr> </table>	Total claim	\$1,198.63	<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;">\$1,198.63</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	\$1,198.63	Nonpriority amount	\$0.00
Total claim										
\$1,198.63										
Priority amount										
\$1,198.63										
Nonpriority amount										
\$0.00										
2.112.	Priority creditor's name and mailing address FERREIRA, NICOLE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$906.60</td> </tr> </table>	Total claim	\$906.60	<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;">\$800.00</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;">\$106.60</td> </tr> </table>	Priority amount	\$800.00	Nonpriority amount	\$106.60
Total claim										
\$906.60										
Priority amount										
\$800.00										
Nonpriority amount										
\$106.60										
2.113.	Priority creditor's name and mailing address FILLER, LOU-RIVA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$589.39</td> </tr> </table>	Total claim	\$589.39	<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;">\$340.00</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;">\$249.39</td> </tr> </table>	Priority amount	\$340.00	Nonpriority amount	\$249.39
Total claim										
\$589.39										
Priority amount										
\$340.00										
Nonpriority amount										
\$249.39										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.114.	Priority creditor's name and mailing address FINLAY, NANCY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$1,496.00</td> </tr> </table>	Total claim	\$1,496.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,320.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$176.00</td> </tr> </table>	Priority amount	\$1,320.00	Nonpriority amount	\$176.00
Total claim										
\$1,496.00										
Priority amount										
\$1,320.00										
Nonpriority amount										
\$176.00										
2.115.	Priority creditor's name and mailing address FINNEGAN, PATRICIA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$1.14</td> </tr> </table>	Total claim	\$1.14	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1.14</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$1.14	Nonpriority amount	\$0.00
Total claim										
\$1.14										
Priority amount										
\$1.14										
Nonpriority amount										
\$0.00										
2.116.	Priority creditor's name and mailing address FINOS, LORI Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$419.40</td> </tr> </table>	Total claim	\$419.40	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$419.21</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.19</td> </tr> </table>	Priority amount	\$419.21	Nonpriority amount	\$0.19
Total claim										
\$419.40										
Priority amount										
\$419.21										
Nonpriority amount										
\$0.19										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.117.	Priority creditor's name and mailing address FISHER, SAMANTHA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$673.07</td> </tr> </table>	Total claim	\$673.07	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$673.07</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$673.07	Nonpriority amount	\$0.00
Total claim										
\$673.07										
Priority amount										
\$673.07										
Nonpriority amount										
\$0.00										
2.118.	Priority creditor's name and mailing address FLAVIN, MEGHAN J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$2,721.63</td> </tr> </table>	Total claim	\$2,721.63	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$2,268.02</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$453.60</td> </tr> </table>	Priority amount	\$2,268.02	Nonpriority amount	\$453.60
Total claim										
\$2,721.63										
Priority amount										
\$2,268.02										
Nonpriority amount										
\$453.60										
2.119.	Priority creditor's name and mailing address FORHAN, JENNIFER Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$298.62</td> </tr> </table>	Total claim	\$298.62	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$280.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$18.62</td> </tr> </table>	Priority amount	\$280.00	Nonpriority amount	\$18.62
Total claim										
\$298.62										
Priority amount										
\$280.00										
Nonpriority amount										
\$18.62										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.120.	Priority creditor's name and mailing address FOSS, KHRISTEN A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.121.	Priority creditor's name and mailing address FREGAPANE, AMANDA E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.122.	Priority creditor's name and mailing address FUCHS, ALESSANDRO Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,792.97</td></tr></table>	Total claim	\$1,792.97	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,792.97</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$1,792.97	Nonpriority amount	\$0.00
Total claim										
\$1,792.97										
Priority amount										
\$1,792.97										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.123.	Priority creditor's name and mailing address FUMICELLO, DOROTHY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$873.63</td> </tr> </table>	Total claim	\$873.63	<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;">\$836.54</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;">\$37.09</td> </tr> </table>	Priority amount	\$836.54	Nonpriority amount	\$37.09
Total claim										
\$873.63										
Priority amount										
\$836.54										
Nonpriority amount										
\$37.09										
2.124.	Priority creditor's name and mailing address FURTADO, AMY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.125.	Priority creditor's name and mailing address GAGNON, DEBRA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,050.00</td> </tr> </table>	Total claim	\$1,050.00	<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;">\$450.00</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;">\$600.00</td> </tr> </table>	Priority amount	\$450.00	Nonpriority amount	\$600.00
Total claim										
\$1,050.00										
Priority amount										
\$450.00										
Nonpriority amount										
\$600.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.126.	Priority creditor's name and mailing address GARCIA-MANNING, TERESA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$434.00</td> </tr> </table>	Total claim	\$434.00	<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;">\$0.00</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;">\$434.00</td> </tr> </table>	Priority amount	\$0.00	Nonpriority amount	\$434.00
Total claim										
\$434.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$434.00										
2.127.	Priority creditor's name and mailing address GARDNER, KIMBERLY D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$870.00</td> </tr> </table>	Total claim	\$870.00	<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;">\$580.00</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;">\$290.00</td> </tr> </table>	Priority amount	\$580.00	Nonpriority amount	\$290.00
Total claim										
\$870.00										
Priority amount										
\$580.00										
Nonpriority amount										
\$290.00										
2.128.	Priority creditor's name and mailing address GARFIELD, REBECCA H. Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,375.00</td> </tr> </table>	Total claim	\$1,375.00	<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;">\$1,375.00</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	\$1,375.00	Nonpriority amount	\$0.00
Total claim										
\$1,375.00										
Priority amount										
\$1,375.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.129.	Priority creditor's name and mailing address GATH, HEATHER J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$850.72</td> </tr> </table>	Total claim	\$850.72	<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;">\$580.00</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;">\$270.72</td> </tr> </table>	Priority amount	\$580.00	Nonpriority amount	\$270.72
Total claim										
\$850.72										
Priority amount										
\$580.00										
Nonpriority amount										
\$270.72										
2.130.	Priority creditor's name and mailing address GAUVIN, TIMOTHY D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$502.34</td> </tr> </table>	Total claim	\$502.34	<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;">\$264.36</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;">\$237.98</td> </tr> </table>	Priority amount	\$264.36	Nonpriority amount	\$237.98
Total claim										
\$502.34										
Priority amount										
\$264.36										
Nonpriority amount										
\$237.98										
2.131.	Priority creditor's name and mailing address GEBRAYEL, DANIELLE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$3,980.77</td> </tr> </table>	Total claim	\$3,980.77	<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;">\$2,596.16</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;">\$1,384.62</td> </tr> </table>	Priority amount	\$2,596.16	Nonpriority amount	\$1,384.62
Total claim										
\$3,980.77										
Priority amount										
\$2,596.16										
Nonpriority amount										
\$1,384.62										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.132.	Priority creditor's name and mailing address GEIBEL, MATTHEW Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$42.72</td> </tr> </table>	Total claim	\$42.72	<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;">\$42.72</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	\$42.72	Nonpriority amount	\$0.00
Total claim										
\$42.72										
Priority amount										
\$42.72										
Nonpriority amount										
\$0.00										
2.133.	Priority creditor's name and mailing address GENDRON, AUNNA D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$953.29</td> </tr> </table>	Total claim	\$953.29	<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;">\$433.29</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;">\$520.00</td> </tr> </table>	Priority amount	\$433.29	Nonpriority amount	\$520.00
Total claim										
\$953.29										
Priority amount										
\$433.29										
Nonpriority amount										
\$520.00										
2.134.	Priority creditor's name and mailing address GENSLER, SUSAN A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$720.00</td> </tr> </table>	Total claim	\$720.00	<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;">\$540.00</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;">\$180.00</td> </tr> </table>	Priority amount	\$540.00	Nonpriority amount	\$180.00
Total claim										
\$720.00										
Priority amount										
\$540.00										
Nonpriority amount										
\$180.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.135.	Priority creditor's name and mailing address GERSHON, JAYNE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$983.38</td> </tr> </table>	Total claim	\$983.38	<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;">\$393.38</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;">\$590.00</td> </tr> </table>	Priority amount	\$393.38	Nonpriority amount	\$590.00
Total claim										
\$983.38										
Priority amount										
\$393.38										
Nonpriority amount										
\$590.00										
2.136.	Priority creditor's name and mailing address GIARDINI, TAMI L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$3,243.77</td> </tr> </table>	Total claim	\$3,243.77	<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;">\$2,495.21</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;">\$748.56</td> </tr> </table>	Priority amount	\$2,495.21	Nonpriority amount	\$748.56
Total claim										
\$3,243.77										
Priority amount										
\$2,495.21										
Nonpriority amount										
\$748.56										
2.137.	Priority creditor's name and mailing address GIVENS, RACHELLE D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$433.29</td> </tr> </table>	Total claim	\$433.29	<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;">\$433.29</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	\$433.29	Nonpriority amount	\$0.00
Total claim										
\$433.29										
Priority amount										
\$433.29										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.138.	Priority creditor's name and mailing address GLEICH, KATRINA L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,235.13	Priority amount \$1,182.69
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$52.43
	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? ☒ No ☐ Yes		

2.139.	Priority creditor's name and mailing address GONYEA, HANNAH E Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.140.	Priority creditor's name and mailing address GONZALES, JOVANIE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$86.54	Priority amount \$86.54
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.141.	Priority creditor's name and mailing address GONZALEZ, OMAHIRA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,918.06	Priority amount \$871.91
				Nonpriority amount \$1,046.16
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.142.	Priority creditor's name and mailing address GONZALEZ, SANDRA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$760.05	Priority amount \$300.00
				Nonpriority amount \$460.05
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.143.	Priority creditor's name and mailing address GRANT, LISA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$3,281.26	Priority amount \$2,524.04
				Nonpriority amount \$757.21
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.144.	Priority creditor's name and mailing address GRANT, SANDRA J Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,653.76	Priority amount \$769.33
				Nonpriority amount \$884.43
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.145.	Priority creditor's name and mailing address GREEN, ROBERT R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$683.80	Priority amount \$526.00
				Nonpriority amount \$157.80
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.146.	Priority creditor's name and mailing address GREENE, ARNOLD Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$85.04	Priority amount \$85.04
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.147.	Priority creditor's name and mailing address GREENE, ERIC T Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$448.00</td></tr></table>	Total claim	\$448.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$320.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$128.00</td></tr></table>	Priority amount	\$320.00	Nonpriority amount	\$128.00
Total claim										
\$448.00										
Priority amount										
\$320.00										
Nonpriority amount										
\$128.00										
2.148.	Priority creditor's name and mailing address GRENIER, JENNAFER J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,020.00</td></tr></table>	Total claim	\$1,020.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$600.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$420.00</td></tr></table>	Priority amount	\$600.00	Nonpriority amount	\$420.00
Total claim										
\$1,020.00										
Priority amount										
\$600.00										
Nonpriority amount										
\$420.00										
2.149.	Priority creditor's name and mailing address GUDZIK, JOHN M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$757.21</td></tr></table>	Total claim	\$757.21	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$757.21</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$757.21	Nonpriority amount	\$0.00
Total claim										
\$757.21										
Priority amount										
\$757.21										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.150.	Priority creditor's name and mailing address GUERTIN, JEREMY P Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$889.29</td> </tr> </table>	Total claim	\$889.29	<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;">\$676.72</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;">\$212.57</td> </tr> </table>	Priority amount	\$676.72	Nonpriority amount	\$212.57
Total claim										
\$889.29										
Priority amount										
\$676.72										
Nonpriority amount										
\$212.57										
2.151.	Priority creditor's name and mailing address GUILD, KENNETH J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,965.62</td> </tr> </table>	Total claim	\$1,965.62	<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;">\$1,965.62</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	\$1,965.62	Nonpriority amount	\$0.00
Total claim										
\$1,965.62										
Priority amount										
\$1,965.62										
Nonpriority amount										
\$0.00										
2.152.	Priority creditor's name and mailing address GUZMAN, JAN CARLOS Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$502.72</td> </tr> </table>	Total claim	\$502.72	<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;">\$502.72</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	\$502.72	Nonpriority amount	\$0.00
Total claim										
\$502.72										
Priority amount										
\$502.72										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.153.	Priority creditor's name and mailing address HAMEL-SURETTE, DONNA L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,026.00	Priority amount \$1,026.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.154.	Priority creditor's name and mailing address HARLING, DANIELLE H Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$640.00	Priority amount \$640.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.155.	Priority creditor's name and mailing address HARTY, MAUREEN I Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,250.00	Priority amount \$1,250.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.156.	Priority creditor's name and mailing address HARVEY, DONNA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$566.61</td></tr></table>	Total claim	\$566.61	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$566.61</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$566.61	Nonpriority amount	\$0.00
Total claim										
\$566.61										
Priority amount										
\$566.61										
Nonpriority amount										
\$0.00										
2.157.	Priority creditor's name and mailing address HAYES, EMILY R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$999.21</td></tr></table>	Total claim	\$999.21	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$412.50</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$586.71</td></tr></table>	Priority amount	\$412.50	Nonpriority amount	\$586.71
Total claim										
\$999.21										
Priority amount										
\$412.50										
Nonpriority amount										
\$586.71										
2.158.	Priority creditor's name and mailing address HEBENSTREIT, SHARON R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$2,266.83</td></tr></table>	Total claim	\$2,266.83	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,105.77</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$1,161.06</td></tr></table>	Priority amount	\$1,105.77	Nonpriority amount	\$1,161.06
Total claim										
\$2,266.83										
Priority amount										
\$1,105.77										
Nonpriority amount										
\$1,161.06										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.159.	Priority creditor's name and mailing address HERBRAND, JENNIFER R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$457.79</td> </tr> </table>	Total claim	\$457.79	<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;">\$457.79</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	\$457.79	Nonpriority amount	\$0.00
Total claim										
\$457.79										
Priority amount										
\$457.79										
Nonpriority amount										
\$0.00										
2.160.	Priority creditor's name and mailing address HERNANDEZ, MELISSA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$769.32</td> </tr> </table>	Total claim	\$769.32	<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;">\$769.32</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	\$769.32	Nonpriority amount	\$0.00
Total claim										
\$769.32										
Priority amount										
\$769.32										
Nonpriority amount										
\$0.00										
2.161.	Priority creditor's name and mailing address HERSEY, MICHAEL J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,077.05</td> </tr> </table>	Total claim	\$1,077.05	<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;">\$1,077.05</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	\$1,077.05	Nonpriority amount	\$0.00
Total claim										
\$1,077.05										
Priority amount										
\$1,077.05										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.162.	Priority creditor's name and mailing address HERZOG, ROBIN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,224.00</td></tr></table>	Total claim	\$1,224.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,147.50</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$76.50</td></tr></table>	Priority amount	\$1,147.50	Nonpriority amount	\$76.50
Total claim										
\$1,224.00										
Priority amount										
\$1,147.50										
Nonpriority amount										
\$76.50										
2.163.	Priority creditor's name and mailing address HEWITT, CRAIG M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$7,866.58</td></tr></table>	Total claim	\$7,866.58	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$4,290.86</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$3,575.72</td></tr></table>	Priority amount	\$4,290.86	Nonpriority amount	\$3,575.72
Total claim										
\$7,866.58										
Priority amount										
\$4,290.86										
Nonpriority amount										
\$3,575.72										
2.164.	Priority creditor's name and mailing address HILL, AMANDA B Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$168.00</td></tr></table>	Total claim	\$168.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$168.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$168.00	Nonpriority amount	\$0.00
Total claim										
\$168.00										
Priority amount										
\$168.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.165.	Priority creditor's name and mailing address HILL, ASHLEY L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$924.00</td></tr></table>	Total claim	\$924.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$924.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$924.00	Nonpriority amount	\$0.00
Total claim										
\$924.00										
Priority amount										
\$924.00										
Nonpriority amount										
\$0.00										
2.166.	Priority creditor's name and mailing address HOADLEY, DONNA I Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$906.72</td></tr></table>	Total claim	\$906.72	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$640.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$266.72</td></tr></table>	Priority amount	\$640.00	Nonpriority amount	\$266.72
Total claim										
\$906.72										
Priority amount										
\$640.00										
Nonpriority amount										
\$266.72										
2.167.	Priority creditor's name and mailing address HODGDON, SAMANTHA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$461.54</td></tr></table>	Total claim	\$461.54	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$461.54</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$461.54	Nonpriority amount	\$0.00
Total claim										
\$461.54										
Priority amount										
\$461.54										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.168.	Priority creditor's name and mailing address HORVATH, AMANDA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$576.98</td> </tr> </table>	Total claim	\$576.98	<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;">\$576.98</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	\$576.98	Nonpriority amount	\$0.00
Total claim										
\$576.98										
Priority amount										
\$576.98										
Nonpriority amount										
\$0.00										
2.169.	Priority creditor's name and mailing address HUSTON, COURTNEY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$499.95</td> </tr> </table>	Total claim	\$499.95	<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;">\$499.95</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	\$499.95	Nonpriority amount	\$0.00
Total claim										
\$499.95										
Priority amount										
\$499.95										
Nonpriority amount										
\$0.00										
2.170.	Priority creditor's name and mailing address HUTCHISON, LAURA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$666.35</td> </tr> </table>	Total claim	\$666.35	<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;">\$666.35</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	\$666.35	Nonpriority amount	\$0.00
Total claim										
\$666.35										
Priority amount										
\$666.35										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.171.	Priority creditor's name and mailing address ISGUR, GARY D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.172.	Priority creditor's name and mailing address IVES, LAURIE A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.173.	Priority creditor's name and mailing address IWANIUK, VICTORIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$280.05</td> </tr> </table>	Total claim	\$280.05	<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;">\$280.05</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	\$280.05	Nonpriority amount	\$0.00
Total claim										
\$280.05										
Priority amount										
\$280.05										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.174.	Priority creditor's name and mailing address JACOBS, RACHEL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,312.50	Priority amount \$1,875.00
				Nonpriority amount \$437.50
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.175.	Priority creditor's name and mailing address JAILLET, TINA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$105.20	Priority amount \$105.20
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.176.	Priority creditor's name and mailing address JARVIS, MARY A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$396.29	Priority amount \$396.29
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.177.	Priority creditor's name and mailing address JASIECKI, ELIZABETH Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$429.38</td> </tr> </table>	Total claim	\$429.38	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$280.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$149.38</td> </tr> </table>	Priority amount	\$280.00	Nonpriority amount	\$149.38
Total claim										
\$429.38										
Priority amount										
\$280.00										
Nonpriority amount										
\$149.38										
2.178.	Priority creditor's name and mailing address JAVELLE, PORTIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$1,534.62</td> </tr> </table>	Total claim	\$1,534.62	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,096.16</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$438.46</td> </tr> </table>	Priority amount	\$1,096.16	Nonpriority amount	\$438.46
Total claim										
\$1,534.62										
Priority amount										
\$1,096.16										
Nonpriority amount										
\$438.46										
2.179.	Priority creditor's name and mailing address JEAN-JACQUES, BLOSSOM Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Total claim	\$0.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.180.	Priority creditor's name and mailing address JOACHIM, JAMES M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$930.00	Priority amount \$775.00 Nonpriority amount \$155.00
2.181.	Priority creditor's name and mailing address JOHNSON, ASHLEY D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$1,634.62	Priority amount \$721.16 Nonpriority amount \$913.46
2.182.	Priority creditor's name and mailing address JOHNSON, CORTNEY R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$192.36	Priority amount \$192.36 Nonpriority amount \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.183.	Priority creditor's name and mailing address JOHNSON, KAILYN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$992.00</td> </tr> </table>	Total claim	\$992.00	<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;">\$775.00</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;">\$217.00</td> </tr> </table>	Priority amount	\$775.00	Nonpriority amount	\$217.00
Total claim										
\$992.00										
Priority amount										
\$775.00										
Nonpriority amount										
\$217.00										
2.184.	Priority creditor's name and mailing address JONES, NAOMI L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$320.00</td> </tr> </table>	Total claim	\$320.00	<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;">\$320.00</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	\$320.00	Nonpriority amount	\$0.00
Total claim										
\$320.00										
Priority amount										
\$320.00										
Nonpriority amount										
\$0.00										
2.185.	Priority creditor's name and mailing address JOYCE, AMANDA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,371.16</td> </tr> </table>	Total claim	\$1,371.16	<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;">\$663.47</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;">\$707.70</td> </tr> </table>	Priority amount	\$663.47	Nonpriority amount	\$707.70
Total claim										
\$1,371.16										
Priority amount										
\$663.47										
Nonpriority amount										
\$707.70										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.186.	Priority creditor's name and mailing address JOYCE, JENNIFER Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$580.05</td> </tr> </table>	Total claim	\$580.05	<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;">\$400.05</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;">\$180.00</td> </tr> </table>	Priority amount	\$400.05	Nonpriority amount	\$180.00
Total claim										
\$580.05										
Priority amount										
\$400.05										
Nonpriority amount										
\$180.00										
2.187.	Priority creditor's name and mailing address KAMPNER, TONI Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$457.93</td> </tr> </table>	Total claim	\$457.93	<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;">\$457.93</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	\$457.93	Nonpriority amount	\$0.00
Total claim										
\$457.93										
Priority amount										
\$457.93										
Nonpriority amount										
\$0.00										
2.188.	Priority creditor's name and mailing address KANE, JOSHUA T Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,416.56</td> </tr> </table>	Total claim	\$1,416.56	<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;">\$980.77</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;">\$435.79</td> </tr> </table>	Priority amount	\$980.77	Nonpriority amount	\$435.79
Total claim										
\$1,416.56										
Priority amount										
\$980.77										
Nonpriority amount										
\$435.79										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.189.	Priority creditor's name and mailing address KAPSIMALIS, KATELYN A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$1,440.86</td> </tr> </table>	Total claim	\$1,440.86	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,440.86</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$1,440.86	Nonpriority amount	\$0.00
Total claim										
\$1,440.86										
Priority amount										
\$1,440.86										
Nonpriority amount										
\$0.00										
2.190.	Priority creditor's name and mailing address KARAGOZ, ALEXANDRA N Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$793.39</td> </tr> </table>	Total claim	\$793.39	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$340.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$453.39</td> </tr> </table>	Priority amount	\$340.00	Nonpriority amount	\$453.39
Total claim										
\$793.39										
Priority amount										
\$340.00										
Nonpriority amount										
\$453.39										
2.191.	Priority creditor's name and mailing address KATZ, KAREN S Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$2,855.77</td> </tr> </table>	Total claim	\$2,855.77	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,189.91</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$1,665.87</td> </tr> </table>	Priority amount	\$1,189.91	Nonpriority amount	\$1,665.87
Total claim										
\$2,855.77										
Priority amount										
\$1,189.91										
Nonpriority amount										
\$1,665.87										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.192.	Priority creditor's name and mailing address KEEFE, VANESSA W Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,096.75</td> </tr> </table>	Total claim	\$1,096.75	<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;">\$1,096.75</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	\$1,096.75	Nonpriority amount	\$0.00
Total claim										
\$1,096.75										
Priority amount										
\$1,096.75										
Nonpriority amount										
\$0.00										
2.193.	Priority creditor's name and mailing address KEIL, KAYLEE D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,248.08</td> </tr> </table>	Total claim	\$1,248.08	<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;">\$1,134.62</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;">\$113.46</td> </tr> </table>	Priority amount	\$1,134.62	Nonpriority amount	\$113.46
Total claim										
\$1,248.08										
Priority amount										
\$1,134.62										
Nonpriority amount										
\$113.46										
2.194.	Priority creditor's name and mailing address KELLY, HUNTER S Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$676.00</td> </tr> </table>	Total claim	\$676.00	<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;">\$650.00</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;">\$26.00</td> </tr> </table>	Priority amount	\$650.00	Nonpriority amount	\$26.00
Total claim										
\$676.00										
Priority amount										
\$650.00										
Nonpriority amount										
\$26.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.195.	Priority creditor's name and mailing address KENNEDY, CYNTHIA J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$493.45</td></tr></table>	Total claim	\$493.45	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$493.45</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$493.45	Nonpriority amount	\$0.00
Total claim										
\$493.45										
Priority amount										
\$493.45										
Nonpriority amount										
\$0.00										
2.196.	Priority creditor's name and mailing address KERR, MELISSA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$519.36</td></tr></table>	Total claim	\$519.36	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$519.36</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$519.36	Nonpriority amount	\$0.00
Total claim										
\$519.36										
Priority amount										
\$519.36										
Nonpriority amount										
\$0.00										
2.197.	Priority creditor's name and mailing address KHAZEIE, EMILY S Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$599.94</td></tr></table>	Total claim	\$599.94	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$599.94</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$599.94	Nonpriority amount	\$0.00
Total claim										
\$599.94										
Priority amount										
\$599.94										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.198.	Priority creditor's name and mailing address KING, KRISTIE E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$960.00</td></tr></table>	Total claim	\$960.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$799.92</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$160.08</td></tr></table>	Priority amount	\$799.92	Nonpriority amount	\$160.08
Total claim										
\$960.00										
Priority amount										
\$799.92										
Nonpriority amount										
\$160.08										
2.199.	Priority creditor's name and mailing address KINKEL, JANE L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,171.15</td></tr></table>	Total claim	\$1,171.15	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,115.39</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$55.77</td></tr></table>	Priority amount	\$1,115.39	Nonpriority amount	\$55.77
Total claim										
\$1,171.15										
Priority amount										
\$1,115.39										
Nonpriority amount										
\$55.77										
2.200.	Priority creditor's name and mailing address KINNEY, KATHERINE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$33.43</td></tr></table>	Total claim	\$33.43	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$33.43</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$33.43	Nonpriority amount	\$0.00
Total claim										
\$33.43										
Priority amount										
\$33.43										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.201.	Priority creditor's name and mailing address KIPP, CLAUDIA C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$985.35</td> </tr> </table>	Total claim	\$985.35	<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;">\$509.62</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;">\$475.73</td> </tr> </table>	Priority amount	\$509.62	Nonpriority amount	\$475.73
Total claim										
\$985.35										
Priority amount										
\$509.62										
Nonpriority amount										
\$475.73										
2.202.	Priority creditor's name and mailing address KNOERL, DONNA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$419.40</td> </tr> </table>	Total claim	\$419.40	<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;">\$419.40</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	\$419.40	Nonpriority amount	\$0.00
Total claim										
\$419.40										
Priority amount										
\$419.40										
Nonpriority amount										
\$0.00										
2.203.	Priority creditor's name and mailing address KOSAKOWSKI, RENEE L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$3,556.80</td> </tr> </table>	Total claim	\$3,556.80	<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;">\$2,481.49</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;">\$1,075.31</td> </tr> </table>	Priority amount	\$2,481.49	Nonpriority amount	\$1,075.31
Total claim										
\$3,556.80										
Priority amount										
\$2,481.49										
Nonpriority amount										
\$1,075.31										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.204.	Priority creditor's name and mailing address KRAUSE, JAYDA Y Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$683.27</td></tr></table>	Total claim	\$683.27	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$546.74</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$136.53</td></tr></table>	Priority amount	\$546.74	Nonpriority amount	\$136.53
Total claim										
\$683.27										
Priority amount										
\$546.74										
Nonpriority amount										
\$136.53										
2.205.	Priority creditor's name and mailing address KRIZNI, LORRAINE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$986.54</td></tr></table>	Total claim	\$986.54	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$778.85</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$207.69</td></tr></table>	Priority amount	\$778.85	Nonpriority amount	\$207.69
Total claim										
\$986.54										
Priority amount										
\$778.85										
Nonpriority amount										
\$207.69										
2.206.	Priority creditor's name and mailing address LACHANCE, MEGHAN L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.207.	Priority creditor's name and mailing address LACOURSE, ASHLEY K Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$500.00	Priority amount \$333.38 Nonpriority amount \$166.63
2.208.	Priority creditor's name and mailing address LALIBERTE, LISA R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$481.27	Priority amount \$481.27 Nonpriority amount \$0.00
2.209.	Priority creditor's name and mailing address LANG, DEBORAH I Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$1,008.00	Priority amount \$466.62 Nonpriority amount \$541.38

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.210.	Priority creditor's name and mailing address LANK, SYDNEY E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$537.39</td></tr></table>	Total claim	\$537.39	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$516.62</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$20.77</td></tr></table>	Priority amount	\$516.62	Nonpriority amount	\$20.77
Total claim										
\$537.39										
Priority amount										
\$516.62										
Nonpriority amount										
\$20.77										
2.211.	Priority creditor's name and mailing address LAPAN, SAMANTHA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.212.	Priority creditor's name and mailing address LAPOSTA, VINCENT L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,100.00</td></tr></table>	Total claim	\$1,100.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$1,100.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$1,100.00	Nonpriority amount	\$0.00
Total claim										
\$1,100.00										
Priority amount										
\$1,100.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.213.	Priority creditor's name and mailing address LARSEN, ANGELIQUE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.214.	Priority creditor's name and mailing address LAVALLEE, ALEXIS M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$224.00</td></tr></table>	Total claim	\$224.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$224.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$224.00	Nonpriority amount	\$0.00
Total claim										
\$224.00										
Priority amount										
\$224.00										
Nonpriority amount										
\$0.00										
2.215.	Priority creditor's name and mailing address LEARY, PATRICIA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$682.45</td></tr></table>	Total claim	\$682.45	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$630.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$52.45</td></tr></table>	Priority amount	\$630.00	Nonpriority amount	\$52.45
Total claim										
\$682.45										
Priority amount										
\$630.00										
Nonpriority amount										
\$52.45										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.216.	Priority creditor's name and mailing address LEBLANC, ANGEL M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$392.00</td> </tr> </table>	Total claim	\$392.00	<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;">\$392.00</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	\$392.00	Nonpriority amount	\$0.00
Total claim										
\$392.00										
Priority amount										
\$392.00										
Nonpriority amount										
\$0.00										
2.217.	Priority creditor's name and mailing address LEFEBVRE, ALICIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$892.39</td> </tr> </table>	Total claim	\$892.39	<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;">\$892.39</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	\$892.39	Nonpriority amount	\$0.00
Total claim										
\$892.39										
Priority amount										
\$892.39										
Nonpriority amount										
\$0.00										
2.218.	Priority creditor's name and mailing address LEGROS, TIMOTHY Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,269.24</td> </tr> </table>	Total claim	\$1,269.24	<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;">\$1,269.24</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	\$1,269.24	Nonpriority amount	\$0.00
Total claim										
\$1,269.24										
Priority amount										
\$1,269.24										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.219.	Priority creditor's name and mailing address LEHANE, ASHLEY B Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$775.00</td> </tr> </table>	Total claim	\$775.00	<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;">\$620.00</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;">\$155.00</td> </tr> </table>	Priority amount	\$620.00	Nonpriority amount	\$155.00
Total claim										
\$775.00										
Priority amount										
\$620.00										
Nonpriority amount										
\$155.00										
2.220.	Priority creditor's name and mailing address LEILI, ANGCELLINA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$537.39</td> </tr> </table>	Total claim	\$537.39	<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;">\$310.00</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;">\$227.39</td> </tr> </table>	Priority amount	\$310.00	Nonpriority amount	\$227.39
Total claim										
\$537.39										
Priority amount										
\$310.00										
Nonpriority amount										
\$227.39										
2.221.	Priority creditor's name and mailing address LEVESQUE, KIMBERLY M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$374.00</td> </tr> </table>	Total claim	\$374.00	<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;">\$374.00</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	\$374.00	Nonpriority amount	\$0.00
Total claim										
\$374.00										
Priority amount										
\$374.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.222.	Priority creditor's name and mailing address LILLEY, LOUIS Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$671.06</td></tr></table>	Total claim	\$671.06	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$495.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$176.06</td></tr></table>	Priority amount	\$495.00	Nonpriority amount	\$176.06
Total claim										
\$671.06										
Priority amount										
\$495.00										
Nonpriority amount										
\$176.06										
2.223.	Priority creditor's name and mailing address LILLEY, SUZANNE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,234.06</td></tr></table>	Total claim	\$1,234.06	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$705.21</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$528.85</td></tr></table>	Priority amount	\$705.21	Nonpriority amount	\$528.85
Total claim										
\$1,234.06										
Priority amount										
\$705.21										
Nonpriority amount										
\$528.85										
2.224.	Priority creditor's name and mailing address LINDBERG, KELLY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,320.00</td></tr></table>	Total claim	\$1,320.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$495.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$825.00</td></tr></table>	Priority amount	\$495.00	Nonpriority amount	\$825.00
Total claim										
\$1,320.00										
Priority amount										
\$495.00										
Nonpriority amount										
\$825.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.225.	Priority creditor's name and mailing address LINK, JESSICA C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$706.60</td> </tr> </table>	Total claim	\$706.60	<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;">\$706.60</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	\$706.60	Nonpriority amount	\$0.00
Total claim										
\$706.60										
Priority amount										
\$706.60										
Nonpriority amount										
\$0.00										
2.226.	Priority creditor's name and mailing address LIU-HORTON, STEPHANIE S Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$7,866.58</td> </tr> </table>	Total claim	\$7,866.58	<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;">\$4,290.86</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;">\$3,575.72</td> </tr> </table>	Priority amount	\$4,290.86	Nonpriority amount	\$3,575.72
Total claim										
\$7,866.58										
Priority amount										
\$4,290.86										
Nonpriority amount										
\$3,575.72										
2.227.	Priority creditor's name and mailing address LONGTIN, LISA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$696.00</td> </tr> </table>	Total claim	\$696.00	<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;">\$580.00</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;">\$116.00</td> </tr> </table>	Priority amount	\$580.00	Nonpriority amount	\$116.00
Total claim										
\$696.00										
Priority amount										
\$580.00										
Nonpriority amount										
\$116.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.228.	Priority creditor's name and mailing address LOPEZ, MELISSA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$413.39</td> </tr> </table>	Total claim	\$413.39	<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;">\$413.39</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	\$413.39	Nonpriority amount	\$0.00
Total claim										
\$413.39										
Priority amount										
\$413.39										
Nonpriority amount										
\$0.00										
2.229.	Priority creditor's name and mailing address LOZO, STACI Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.230.	Priority creditor's name and mailing address MACDONALD, TAYLOR J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$264.06</td> </tr> </table>	Total claim	\$264.06	<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;">\$264.06</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	\$264.06	Nonpriority amount	\$0.00
Total claim										
\$264.06										
Priority amount										
\$264.06										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.231.	Priority creditor's name and mailing address MACHADO, TARA A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,500.01	Priority amount \$769.33
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$730.68
	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? ☒ No ☐ Yes		
2.232.	Priority creditor's name and mailing address MADDEN, GWENDOLYN C Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$528.00	Priority amount \$480.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$48.00
	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? ☒ No ☐ Yes		
2.233.	Priority creditor's name and mailing address MADORE, HEATHER E Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$426.72	Priority amount \$426.72
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.234.	Priority creditor's name and mailing address MAES, STEPHANIE M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$466.75	Priority amount \$466.75
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.235.	Priority creditor's name and mailing address MAFFEO, MICHAEL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$960.00	Priority amount \$800.00
				Nonpriority amount \$160.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.236.	Priority creditor's name and mailing address MAHAN, ERIN E Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$245.00	Priority amount \$245.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.237.	Priority creditor's name and mailing address MANCINI, AMANDA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$537.39</td> </tr> </table>	Total claim	\$537.39	<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;">\$537.39</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	\$537.39	Nonpriority amount	\$0.00
Total claim										
\$537.39										
Priority amount										
\$537.39										
Nonpriority amount										
\$0.00										
2.238.	Priority creditor's name and mailing address MARCH, EMMA E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,057.69</td> </tr> </table>	Total claim	\$1,057.69	<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;">\$1,057.69</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	\$1,057.69	Nonpriority amount	\$0.00
Total claim										
\$1,057.69										
Priority amount										
\$1,057.69										
Nonpriority amount										
\$0.00										
2.239.	Priority creditor's name and mailing address MARCOUX, DEBORAH L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$8.54</td> </tr> </table>	Total claim	\$8.54	<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;">\$8.54</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	\$8.54	Nonpriority amount	\$0.00
Total claim										
\$8.54										
Priority amount										
\$8.54										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.240.	Priority creditor's name and mailing address MARDEN, BRENDA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,400.00	Priority amount \$400.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$1,000.00
	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? ☒ No ☐ Yes		

2.241.	Priority creditor's name and mailing address MARTIN, TERRY L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$627.00	Priority amount \$627.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.242.	Priority creditor's name and mailing address MARTINS, KAREN M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$260.10	Priority amount \$260.10
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.243.	Priority creditor's name and mailing address MASIELLO, AMANDA D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$896.00</td> </tr> </table>	Total claim	\$896.00	<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;">\$420.00</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;">\$476.00</td> </tr> </table>	Priority amount	\$420.00	Nonpriority amount	\$476.00
Total claim										
\$896.00										
Priority amount										
\$420.00										
Nonpriority amount										
\$476.00										
2.244.	Priority creditor's name and mailing address MATTSON, NICOLE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$289.04</td> </tr> </table>	Total claim	\$289.04	<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;">\$289.04</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	\$289.04	Nonpriority amount	\$0.00
Total claim										
\$289.04										
Priority amount										
\$289.04										
Nonpriority amount										
\$0.00										
2.245.	Priority creditor's name and mailing address MAYNARD, MARIA F Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$926.83</td> </tr> </table>	Total claim	\$926.83	<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;">\$926.83</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	\$926.83	Nonpriority amount	\$0.00
Total claim										
\$926.83										
Priority amount										
\$926.83										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.246.	Priority creditor's name and mailing address MCCORMACK, LYNN M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,362.05</td> </tr> </table>	Total claim	\$1,362.05	<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;">\$1,362.05</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	\$1,362.05	Nonpriority amount	\$0.00
Total claim										
\$1,362.05										
Priority amount										
\$1,362.05										
Nonpriority amount										
\$0.00										
2.247.	Priority creditor's name and mailing address MCCORMICK, BRIAN F. Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$150.00</td> </tr> </table>	Total claim	\$150.00	<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;">\$0.00</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;">\$150.00</td> </tr> </table>	Priority amount	\$0.00	Nonpriority amount	\$150.00
Total claim										
\$150.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$150.00										
2.248.	Priority creditor's name and mailing address MCEACHERN, KRISTINE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$692.31</td> </tr> </table>	Total claim	\$692.31	<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;">\$288.39</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;">\$403.92</td> </tr> </table>	Priority amount	\$288.39	Nonpriority amount	\$403.92
Total claim										
\$692.31										
Priority amount										
\$288.39										
Nonpriority amount										
\$403.92										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.249.	Priority creditor's name and mailing address MCGINTY, BRIAN J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$4,543.27</td> </tr> </table>	Total claim	\$4,543.27	<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;">\$3,245.19</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;">\$1,298.08</td> </tr> </table>	Priority amount	\$3,245.19	Nonpriority amount	\$1,298.08
Total claim										
\$4,543.27										
Priority amount										
\$3,245.19										
Nonpriority amount										
\$1,298.08										
2.250.	Priority creditor's name and mailing address MCLEAN, MICHELE E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$900.00</td> </tr> </table>	Total claim	\$900.00	<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;">\$720.00</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;">\$180.00</td> </tr> </table>	Priority amount	\$720.00	Nonpriority amount	\$180.00
Total claim										
\$900.00										
Priority amount										
\$720.00										
Nonpriority amount										
\$180.00										
2.251.	Priority creditor's name and mailing address MCLEOD, KAREN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$2,081.25</td> </tr> </table>	Total claim	\$2,081.25	<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;">\$1,734.38</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;">\$346.88</td> </tr> </table>	Priority amount	\$1,734.38	Nonpriority amount	\$346.88
Total claim										
\$2,081.25										
Priority amount										
\$1,734.38										
Nonpriority amount										
\$346.88										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.252.	Priority creditor's name and mailing address MELLO, HEATHER Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.253.	Priority creditor's name and mailing address MEOLA, KRISTINE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$817.43</td></tr></table>	Total claim	\$817.43	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$817.43</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$817.43	Nonpriority amount	\$0.00
Total claim										
\$817.43										
Priority amount										
\$817.43										
Nonpriority amount										
\$0.00										
2.254.	Priority creditor's name and mailing address MEYER, STEPHANIE N Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$957.00</td></tr></table>	Total claim	\$957.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$825.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$132.00</td></tr></table>	Priority amount	\$825.00	Nonpriority amount	\$132.00
Total claim										
\$957.00										
Priority amount										
\$825.00										
Nonpriority amount										
\$132.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.255.	Priority creditor's name and mailing address MILLWARD, TREVOR R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$2,069.72</td> </tr> </table>	Total claim	\$2,069.72	<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;">\$1,009.62</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;">\$1,060.10</td> </tr> </table>	Priority amount	\$1,009.62	Nonpriority amount	\$1,060.10
Total claim										
\$2,069.72										
Priority amount										
\$1,009.62										
Nonpriority amount										
\$1,060.10										
2.256.	Priority creditor's name and mailing address MIX, AMY L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$41.56</td> </tr> </table>	Total claim	\$41.56	<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;">\$41.56</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	\$41.56	Nonpriority amount	\$0.00
Total claim										
\$41.56										
Priority amount										
\$41.56										
Nonpriority amount										
\$0.00										
2.257.	Priority creditor's name and mailing address MOCKLER, KATHLEEN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$960.00</td> </tr> </table>	Total claim	\$960.00	<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;">\$320.00</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;">\$640.00</td> </tr> </table>	Priority amount	\$320.00	Nonpriority amount	\$640.00
Total claim										
\$960.00										
Priority amount										
\$320.00										
Nonpriority amount										
\$640.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.258.	Priority creditor's name and mailing address MONAHAN, JON R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$660.00</td> </tr> </table>	Total claim	\$660.00	<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;">\$300.00</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;">\$360.00</td> </tr> </table>	Priority amount	\$300.00	Nonpriority amount	\$360.00
Total claim										
\$660.00										
Priority amount										
\$300.00										
Nonpriority amount										
\$360.00										
2.259.	Priority creditor's name and mailing address MONGILLO, SUNDAY Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$348.00</td> </tr> </table>	Total claim	\$348.00	<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;">\$348.00</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	\$348.00	Nonpriority amount	\$0.00
Total claim										
\$348.00										
Priority amount										
\$348.00										
Nonpriority amount										
\$0.00										
2.260.	Priority creditor's name and mailing address MONROE, EILEEN M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$736.00</td> </tr> </table>	Total claim	\$736.00	<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;">\$320.00</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;">\$416.00</td> </tr> </table>	Priority amount	\$320.00	Nonpriority amount	\$416.00
Total claim										
\$736.00										
Priority amount										
\$320.00										
Nonpriority amount										
\$416.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.261.	Priority creditor's name and mailing address MONTERO, DENNISE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$18.62	Priority amount \$18.62
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.262.	Priority creditor's name and mailing address MONTMARQUET, CHELSEA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$600.00	Priority amount \$600.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.263.	Priority creditor's name and mailing address MOORE, HANNAH L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$743.94	Priority amount \$480.06
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$263.88
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.264.	Priority creditor's name and mailing address MORALES, OBNIEL Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.265.	Priority creditor's name and mailing address MORIN, JILLIAN K Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,394.23	Priority amount \$961.54
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$432.69
	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? ☒ No ☐ Yes		

2.266.	Priority creditor's name and mailing address MORRIS, THERESE S Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$264.00	Priority amount \$219.95
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$44.06
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.267.	Priority creditor's name and mailing address MORROW, BARBARA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,687.50</td> </tr> </table>	Total claim	\$1,687.50	<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;">\$937.50</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;">\$750.00</td> </tr> </table>	Priority amount	\$937.50	Nonpriority amount	\$750.00
Total claim										
\$1,687.50										
Priority amount										
\$937.50										
Nonpriority amount										
\$750.00										
2.268.	Priority creditor's name and mailing address MURPHY, SUSAN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,192.27</td> </tr> </table>	Total claim	\$1,192.27	<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;">\$365.00</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;">\$827.27</td> </tr> </table>	Priority amount	\$365.00	Nonpriority amount	\$827.27
Total claim										
\$1,192.27										
Priority amount										
\$365.00										
Nonpriority amount										
\$827.27										
2.269.	Priority creditor's name and mailing address MURRAY, JENNIFER M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.270.	Priority creditor's name and mailing address NELSON, ANGELA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Total claim</th> </tr> <tr> <td style="padding: 2px;">\$1,147.00</td> </tr> </table>	Total claim	\$1,147.00	<table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Priority amount</th> </tr> <tr> <td style="padding: 2px;">\$620.00</td> </tr> </table> <table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Nonpriority amount</th> </tr> <tr> <td style="padding: 2px;">\$527.00</td> </tr> </table>	Priority amount	\$620.00	Nonpriority amount	\$527.00
Total claim										
\$1,147.00										
Priority amount										
\$620.00										
Nonpriority amount										
\$527.00										
2.271.	Priority creditor's name and mailing address NELSON, MORGAN R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Total claim</th> </tr> <tr> <td style="padding: 2px;">\$799.95</td> </tr> </table>	Total claim	\$799.95	<table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Priority amount</th> </tr> <tr> <td style="padding: 2px;">\$300.00</td> </tr> </table> <table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Nonpriority amount</th> </tr> <tr> <td style="padding: 2px;">\$499.95</td> </tr> </table>	Priority amount	\$300.00	Nonpriority amount	\$499.95
Total claim										
\$799.95										
Priority amount										
\$300.00										
Nonpriority amount										
\$499.95										
2.272.	Priority creditor's name and mailing address NEWTON, ERICA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Total claim</th> </tr> <tr> <td style="padding: 2px;">\$980.91</td> </tr> </table>	Total claim	\$980.91	<table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Priority amount</th> </tr> <tr> <td style="padding: 2px;">\$980.91</td> </tr> </table> <table border="1" style="width: 100%; background-color: #f2f2f2;"> <tr> <th style="padding: 2px;">Nonpriority amount</th> </tr> <tr> <td style="padding: 2px;">\$0.00</td> </tr> </table>	Priority amount	\$980.91	Nonpriority amount	\$0.00
Total claim										
\$980.91										
Priority amount										
\$980.91										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****2.273. Priority creditor's name and mailing address**NICH, SARAH K
Address Intentionally Omitted**Date or dates debt was incurred**

1/15/20 TO 7/13/20

Last 4 digits of account number:**Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

ACCRUED PTO (VACATION)

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Total claim

\$440.06

Priority amount

\$330.00

Nonpriority amount

\$110.06

2.274. Priority creditor's name and mailing addressNIKANDER, ERIK
Address Intentionally Omitted**Date or dates debt was incurred**

1/15/20 TO 7/13/20

Last 4 digits of account number:**Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

ACCRUED PTO (VACATION)

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Total claim

\$599.94

Priority amount

\$599.94

Nonpriority amount

\$0.00

2.275. Priority creditor's name and mailing addressNORMANDIN, TRACI M
Address Intentionally Omitted**Date or dates debt was incurred**

1/15/20 TO 7/13/20

Last 4 digits of account number:**Specify Code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (4)**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

ACCRUED PTO (VACATION)

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Total claim

\$0.00

Priority amount

\$0.00

Nonpriority amount

\$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.276.	Priority creditor's name and mailing address OAK, EILEEN F Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.277.	Priority creditor's name and mailing address O'BRIEN, CHRISTINE H Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$796.24	Priority amount \$692.40
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$103.85
	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? ☒ No ☐ Yes		

2.278.	Priority creditor's name and mailing address O'BRIEN, LYNNE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,050.64	Priority amount \$867.92
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$182.72
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.279.	Priority creditor's name and mailing address O'DONNELL, KATELYN H Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$64.00	Priority amount \$64.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.280.	Priority creditor's name and mailing address OLSON, COURTNEY M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$290.00	Priority amount \$96.72
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$193.29
	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? ☒ No ☐ Yes		

2.281.	Priority creditor's name and mailing address ORNSTEEN, ERIN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,153.85	Priority amount \$961.66
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$192.19
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.282.	Priority creditor's name and mailing address O'TOOLE, MEGAN A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$2,038.34</td></tr></table>	Total claim	\$2,038.34	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$961.66</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$1,076.68</td></tr></table>	Priority amount	\$961.66	Nonpriority amount	\$1,076.68
Total claim										
\$2,038.34										
Priority amount										
\$961.66										
Nonpriority amount										
\$1,076.68										
2.283.	Priority creditor's name and mailing address PAGANO, MICHAEL M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,215.00</td></tr></table>	Total claim	\$1,215.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$540.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$675.00</td></tr></table>	Priority amount	\$540.00	Nonpriority amount	\$675.00
Total claim										
\$1,215.00										
Priority amount										
\$540.00										
Nonpriority amount										
\$675.00										
2.284.	Priority creditor's name and mailing address PALMARIELLO, LILIANA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.285.	Priority creditor's name and mailing address PAPPAS, TESSA C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$396.29</td> </tr> </table>	Total claim	\$396.29	<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;">\$396.29</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	\$396.29	Nonpriority amount	\$0.00
Total claim										
\$396.29										
Priority amount										
\$396.29										
Nonpriority amount										
\$0.00										
2.286.	Priority creditor's name and mailing address PARKER, HELEN D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$76.92</td> </tr> </table>	Total claim	\$76.92	<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;">\$76.92</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	\$76.92	Nonpriority amount	\$0.00
Total claim										
\$76.92										
Priority amount										
\$76.92										
Nonpriority amount										
\$0.00										
2.287.	Priority creditor's name and mailing address PAUL, ALICIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,503.85</td> </tr> </table>	Total claim	\$1,503.85	<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;">\$1,503.85</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	\$1,503.85	Nonpriority amount	\$0.00
Total claim										
\$1,503.85										
Priority amount										
\$1,503.85										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.288.	Priority creditor's name and mailing address PERAGINE, KATHY A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.289.	Priority creditor's name and mailing address PERAINO, TRACY L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,271.73	Priority amount \$700.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$571.73
	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? ☒ No ☐ Yes		

2.290.	Priority creditor's name and mailing address PERRI, DEBRA S Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$696.00	Priority amount \$580.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$116.00
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.291.	Priority creditor's name and mailing address PETERS, ANNE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$1,152.00</td></tr></table>	Total claim	\$1,152.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$720.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$432.00</td></tr></table>	Priority amount	\$720.00	Nonpriority amount	\$432.00
Total claim										
\$1,152.00										
Priority amount										
\$720.00										
Nonpriority amount										
\$432.00										
2.292.	Priority creditor's name and mailing address PETTINATO, KATHLEEN A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.293.	Priority creditor's name and mailing address PILIERE, SELENA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$576.92</td></tr></table>	Total claim	\$576.92	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$576.92</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$576.92	Nonpriority amount	\$0.00
Total claim										
\$576.92										
Priority amount										
\$576.92										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.294.	Priority creditor's name and mailing address PINDER, ROBERT Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$373.28	Priority amount \$350.00 Nonpriority amount \$23.28
2.295.	Priority creditor's name and mailing address PINSONNEAULT, ALDEN J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$3,999.37	Priority amount \$3,281.54 Nonpriority amount \$717.84
2.296.	Priority creditor's name and mailing address PISCIOTTA, ALISON Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	Total claim \$1,442.31	Priority amount \$1,201.93 Nonpriority amount \$240.39

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.297.	Priority creditor's name and mailing address PLANITZER, SHEILA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$0.00	Priority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.298.	Priority creditor's name and mailing address POMPEY, COURTNEY C Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,727.47	Priority amount \$1,057.69
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$669.78
	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? ☒ No ☐ Yes		

2.299.	Priority creditor's name and mailing address PORTER, BRENDAN R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,054.00	Priority amount \$930.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$124.00
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.300.	Priority creditor's name and mailing address POWERS, MARTHA E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$510.00</td> </tr> </table>	Total claim	\$510.00	<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;">\$424.96</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;">\$85.04</td> </tr> </table>	Priority amount	\$424.96	Nonpriority amount	\$85.04
Total claim										
\$510.00										
Priority amount										
\$424.96										
Nonpriority amount										
\$85.04										
2.301.	Priority creditor's name and mailing address PREVITE, TIFFANNIE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$709.38</td> </tr> </table>	Total claim	\$709.38	<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;">\$700.00</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;">\$9.38</td> </tr> </table>	Priority amount	\$700.00	Nonpriority amount	\$9.38
Total claim										
\$709.38										
Priority amount										
\$700.00										
Nonpriority amount										
\$9.38										
2.302.	Priority creditor's name and mailing address PROCACCINI, BENJAMIN J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.303.	Priority creditor's name and mailing address PRZYBYLSKI, CAROL ANN T Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$630.00</td> </tr> </table>	Total claim	\$630.00	<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;">\$315.00</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;">\$315.00</td> </tr> </table>	Priority amount	\$315.00	Nonpriority amount	\$315.00
Total claim										
\$630.00										
Priority amount										
\$315.00										
Nonpriority amount										
\$315.00										
2.304.	Priority creditor's name and mailing address PURVILLE, CATHERINE D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$197.40</td> </tr> </table>	Total claim	\$197.40	<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;">\$197.40</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	\$197.40	Nonpriority amount	\$0.00
Total claim										
\$197.40										
Priority amount										
\$197.40										
Nonpriority amount										
\$0.00										
2.305.	Priority creditor's name and mailing address QUINONES, JACKIE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,148.62</td> </tr> </table>	Total claim	\$1,148.62	<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;">\$1,148.62</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	\$1,148.62	Nonpriority amount	\$0.00
Total claim										
\$1,148.62										
Priority amount										
\$1,148.62										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.306.	Priority creditor's name and mailing address RAYNE, KRISTIN A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><td>Total claim</td></tr><tr><td>\$1,096.16</td></tr></table>	Total claim	\$1,096.16	<table border="1" style="width: 100%;"><tr><td>Priority amount</td></tr><tr><td>\$1,096.16</td></tr></table> <table border="1" style="width: 100%;"><tr><td>Nonpriority amount</td></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$1,096.16	Nonpriority amount	\$0.00
Total claim										
\$1,096.16										
Priority amount										
\$1,096.16										
Nonpriority amount										
\$0.00										
2.307.	Priority creditor's name and mailing address RECALDE, PATRICIA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><td>Total claim</td></tr><tr><td>\$899.00</td></tr></table>	Total claim	\$899.00	<table border="1" style="width: 100%;"><tr><td>Priority amount</td></tr><tr><td>\$465.00</td></tr></table> <table border="1" style="width: 100%;"><tr><td>Nonpriority amount</td></tr><tr><td>\$434.00</td></tr></table>	Priority amount	\$465.00	Nonpriority amount	\$434.00
Total claim										
\$899.00										
Priority amount										
\$465.00										
Nonpriority amount										
\$434.00										
2.308.	Priority creditor's name and mailing address RENAUD, ALICIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><td>Total claim</td></tr><tr><td>\$938.46</td></tr></table>	Total claim	\$938.46	<table border="1" style="width: 100%;"><tr><td>Priority amount</td></tr><tr><td>\$938.46</td></tr></table> <table border="1" style="width: 100%;"><tr><td>Nonpriority amount</td></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$938.46	Nonpriority amount	\$0.00
Total claim										
\$938.46										
Priority amount										
\$938.46										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.309.	Priority creditor's name and mailing address REPETSKY, CHERYL A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$825.00</td> </tr> </table>	Total claim	\$825.00	<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;">\$660.00</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;">\$165.00</td> </tr> </table>	Priority amount	\$660.00	Nonpriority amount	\$165.00
Total claim										
\$825.00										
Priority amount										
\$660.00										
Nonpriority amount										
\$165.00										
2.310.	Priority creditor's name and mailing address RHODES, CHRIS A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,200.00</td> </tr> </table>	Total claim	\$1,200.00	<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;">\$600.00</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;">\$600.00</td> </tr> </table>	Priority amount	\$600.00	Nonpriority amount	\$600.00
Total claim										
\$1,200.00										
Priority amount										
\$600.00										
Nonpriority amount										
\$600.00										
2.311.	Priority creditor's name and mailing address RICHER, STEPHANIE K Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,518.00</td> </tr> </table>	Total claim	\$1,518.00	<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;">\$825.00</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;">\$693.00</td> </tr> </table>	Priority amount	\$825.00	Nonpriority amount	\$693.00
Total claim										
\$1,518.00										
Priority amount										
\$825.00										
Nonpriority amount										
\$693.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.312.	Priority creditor's name and mailing address RIVERA, MARBELY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,550.00	Priority amount \$794.97
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$755.03
	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? ☒ No ☐ Yes		
2.313.	Priority creditor's name and mailing address RIVERA, NANCY J Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$756.00	Priority amount \$405.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$351.00
	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? ☒ No ☐ Yes		
2.314.	Priority creditor's name and mailing address RIVERA, RUBEN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$341.28	Priority amount \$341.28
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.315.	Priority creditor's name and mailing address RODRIGUES, KRISTEN A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$3,946.83</td> </tr> </table>	Total claim	\$3,946.83	<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;">\$2,368.10</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;">\$1,578.73</td> </tr> </table>	Priority amount	\$2,368.10	Nonpriority amount	\$1,578.73
Total claim										
\$3,946.83										
Priority amount										
\$2,368.10										
Nonpriority amount										
\$1,578.73										
2.316.	Priority creditor's name and mailing address ROSA-ALEJANDRO, BRENDA LIZ Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$187.04</td> </tr> </table>	Total claim	\$187.04	<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;">\$186.92</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;">\$0.13</td> </tr> </table>	Priority amount	\$186.92	Nonpriority amount	\$0.13
Total claim										
\$187.04										
Priority amount										
\$186.92										
Nonpriority amount										
\$0.13										
2.317.	Priority creditor's name and mailing address ROY, ERICA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$308.00</td> </tr> </table>	Total claim	\$308.00	<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;">\$308.00</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	\$308.00	Nonpriority amount	\$0.00
Total claim										
\$308.00										
Priority amount										
\$308.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.318.	Priority creditor's name and mailing address ROY, TRACY E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$553.85</td> </tr> </table>	Total claim	\$553.85	<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;">\$553.85</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	\$553.85	Nonpriority amount	\$0.00
Total claim										
\$553.85										
Priority amount										
\$553.85										
Nonpriority amount										
\$0.00										
2.319.	Priority creditor's name and mailing address RYAN, JESSICA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$744.00</td> </tr> </table>	Total claim	\$744.00	<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;">\$413.39</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;">\$330.62</td> </tr> </table>	Priority amount	\$413.39	Nonpriority amount	\$330.62
Total claim										
\$744.00										
Priority amount										
\$413.39										
Nonpriority amount										
\$330.62										
2.320.	Priority creditor's name and mailing address RYAN, KATHLEEN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,043.62</td> </tr> </table>	Total claim	\$1,043.62	<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;">\$775.00</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;">\$268.62</td> </tr> </table>	Priority amount	\$775.00	Nonpriority amount	\$268.62
Total claim										
\$1,043.62										
Priority amount										
\$775.00										
Nonpriority amount										
\$268.62										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.321.	Priority creditor's name and mailing address SABOURIN, MICHAEL P Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$44.13</td> </tr> </table>	Total claim	\$44.13	<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;">\$44.13</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	\$44.13	Nonpriority amount	\$0.00
Total claim										
\$44.13										
Priority amount										
\$44.13										
Nonpriority amount										
\$0.00										
2.322.	Priority creditor's name and mailing address SACCA, LINDA R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,530.00</td> </tr> </table>	Total claim	\$1,530.00	<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;">\$680.00</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;">\$850.00</td> </tr> </table>	Priority amount	\$680.00	Nonpriority amount	\$850.00
Total claim										
\$1,530.00										
Priority amount										
\$680.00										
Nonpriority amount										
\$850.00										
2.323.	Priority creditor's name and mailing address SALAS, EMELY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$186.00</td> </tr> </table>	Total claim	\$186.00	<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;">\$186.00</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	\$186.00	Nonpriority amount	\$0.00
Total claim										
\$186.00										
Priority amount										
\$186.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.324.	Priority creditor's name and mailing address SANBORN, MICHELLE D Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$618.72	Priority amount \$483.29
				Nonpriority amount \$135.43
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.325.	Priority creditor's name and mailing address SARNIE, ROSEMARY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,122.00	Priority amount \$680.00
				Nonpriority amount \$442.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.326.	Priority creditor's name and mailing address SARRAT, ASHLEY Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$559.95	Priority amount \$400.05
				Nonpriority amount \$159.90
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.327.	Priority creditor's name and mailing address SAUNDERS, TAYLOR R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$918.00	Priority amount \$340.00
				Nonpriority amount \$578.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.328.	Priority creditor's name and mailing address SCHAUBER, AMY K Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$987.93	Priority amount \$987.61
				Nonpriority amount \$0.32
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.329.	Priority creditor's name and mailing address SEIDENBERG, JOSHUA C Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$807.70	Priority amount \$807.70
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.330.	Priority creditor's name and mailing address SHANLEY, DEBORAH M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$5,100.00</td> </tr> </table>	Total claim	\$5,100.00	<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;">\$3,187.50</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;">\$1,912.50</td> </tr> </table>	Priority amount	\$3,187.50	Nonpriority amount	\$1,912.50
Total claim										
\$5,100.00										
Priority amount										
\$3,187.50										
Nonpriority amount										
\$1,912.50										
2.331.	Priority creditor's name and mailing address SHEEHAN, EMILY R Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$43.39</td> </tr> </table>	Total claim	\$43.39	<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;">\$43.39</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	\$43.39	Nonpriority amount	\$0.00
Total claim										
\$43.39										
Priority amount										
\$43.39										
Nonpriority amount										
\$0.00										
2.332.	Priority creditor's name and mailing address SHEEHAN, JEAN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$812.00</td> </tr> </table>	Total claim	\$812.00	<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;">\$483.29</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;">\$328.72</td> </tr> </table>	Priority amount	\$483.29	Nonpriority amount	\$328.72
Total claim										
\$812.00										
Priority amount										
\$483.29										
Nonpriority amount										
\$328.72										

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.333.	Priority creditor's name and mailing address SHIPMAN, SAMUEL T Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$787.50</td> </tr> </table>	Total claim	\$787.50	<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;">\$787.50</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	\$787.50	Nonpriority amount	\$0.00
Total claim										
\$787.50										
Priority amount										
\$787.50										
Nonpriority amount										
\$0.00										
2.334.	Priority creditor's name and mailing address SIKSAY, ANDREA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$426.72</td> </tr> </table>	Total claim	\$426.72	<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;">\$213.28</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;">\$213.44</td> </tr> </table>	Priority amount	\$213.28	Nonpriority amount	\$213.44
Total claim										
\$426.72										
Priority amount										
\$213.28										
Nonpriority amount										
\$213.44										
2.335.	Priority creditor's name and mailing address SILVA, KELLY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,551.37</td> </tr> </table>	Total claim	\$1,551.37	<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;">\$793.27</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;">\$758.10</td> </tr> </table>	Priority amount	\$793.27	Nonpriority amount	\$758.10
Total claim										
\$1,551.37										
Priority amount										
\$793.27										
Nonpriority amount										
\$758.10										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.336.	Priority creditor's name and mailing address SILVER, STEFANIE D Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,085.77</td> </tr> </table>	Total claim	\$1,085.77	<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;">\$1,085.77</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	\$1,085.77	Nonpriority amount	\$0.00
Total claim										
\$1,085.77										
Priority amount										
\$1,085.77										
Nonpriority amount										
\$0.00										
2.337.	Priority creditor's name and mailing address SIMMARANO-FLORIA, MICHELE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$3,820.50</td> </tr> </table>	Total claim	\$3,820.50	<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;">\$2,938.85</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;">\$881.65</td> </tr> </table>	Priority amount	\$2,938.85	Nonpriority amount	\$881.65
Total claim										
\$3,820.50										
Priority amount										
\$2,938.85										
Nonpriority amount										
\$881.65										
2.338.	Priority creditor's name and mailing address SIMONEAU, CHERIE A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$477.00</td> </tr> </table>	Total claim	\$477.00	<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;">\$265.00</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;">\$212.00</td> </tr> </table>	Priority amount	\$265.00	Nonpriority amount	\$212.00
Total claim										
\$477.00										
Priority amount										
\$265.00										
Nonpriority amount										
\$212.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.339.	Priority creditor's name and mailing address SIROIS, MEAGAN L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$326.62</td> </tr> </table>	Total claim	\$326.62	<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;">\$326.62</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	\$326.62	Nonpriority amount	\$0.00
Total claim										
\$326.62										
Priority amount										
\$326.62										
Nonpriority amount										
\$0.00										
2.340.	Priority creditor's name and mailing address SISTA, LISA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$2,242.44</td> </tr> </table>	Total claim	\$2,242.44	<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;">\$764.43</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;">\$1,478.02</td> </tr> </table>	Priority amount	\$764.43	Nonpriority amount	\$1,478.02
Total claim										
\$2,242.44										
Priority amount										
\$764.43										
Nonpriority amount										
\$1,478.02										
2.341.	Priority creditor's name and mailing address SKLENAR, RANDY J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$599.42</td> </tr> </table>	Total claim	\$599.42	<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;">\$599.42</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	\$599.42	Nonpriority amount	\$0.00
Total claim										
\$599.42										
Priority amount										
\$599.42										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.342.	Priority creditor's name and mailing address SNEIDER, JANET L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$484.00</td> </tr> </table>	Total claim	\$484.00	<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;">\$484.00</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	\$484.00	Nonpriority amount	\$0.00
Total claim										
\$484.00										
Priority amount										
\$484.00										
Nonpriority amount										
\$0.00										
2.343.	Priority creditor's name and mailing address SOKOLOV, LEE A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$420.00</td> </tr> </table>	Total claim	\$420.00	<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;">\$300.00</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;">\$120.00</td> </tr> </table>	Priority amount	\$300.00	Nonpriority amount	\$120.00
Total claim										
\$420.00										
Priority amount										
\$300.00										
Nonpriority amount										
\$120.00										
2.344.	Priority creditor's name and mailing address SOPER, LISAMARIE Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$0.00</td> </tr> </table>	Total claim	\$0.00	<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;">\$0.00</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	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.345.	Priority creditor's name and mailing address SORGI, ANDREA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,250.00	Priority amount \$1,250.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.346.	Priority creditor's name and mailing address SOTO PIMENTEL, VICTOR L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$840.06	Priority amount \$480.06
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$360.00
	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? ☒ No ☐ Yes		

2.347.	Priority creditor's name and mailing address SOUCY, THERESA A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,896.15	Priority amount \$1,115.39
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$780.77
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.348.	Priority creditor's name and mailing address SPILLMAN, TIFFANY L Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$864.00	Priority amount \$373.28
				Nonpriority amount \$490.72
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.349.	Priority creditor's name and mailing address SPROULS, JOANNE P Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$969.23	Priority amount \$908.66
				Nonpriority amount \$60.58
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.350.	Priority creditor's name and mailing address STAAF, DEBORAH C Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$516.62	Priority amount \$310.00
				Nonpriority amount \$206.62
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.351.	Priority creditor's name and mailing address STANKUS, WILLIAM M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$3,632.69	Priority amount \$2,794.38
				Nonpriority amount \$838.31
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.352.	Priority creditor's name and mailing address STANLEY, LORI A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$3,379.81	Priority amount \$2,668.27
				Nonpriority amount \$711.54
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.353.	Priority creditor's name and mailing address STEBER, DENISE R Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,126.74	Priority amount \$1,126.74
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.354.	Priority creditor's name and mailing address STEWART, JORDAN L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$2,487.98</td> </tr> </table>	Total claim	\$2,487.98	<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;">\$1,382.21</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;">\$1,105.77</td> </tr> </table>	Priority amount	\$1,382.21	Nonpriority amount	\$1,105.77
Total claim										
\$2,487.98										
Priority amount										
\$1,382.21										
Nonpriority amount										
\$1,105.77										
2.355.	Priority creditor's name and mailing address STOW, EDNA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$894.72</td> </tr> </table>	Total claim	\$894.72	<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;">\$610.00</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;">\$284.72</td> </tr> </table>	Priority amount	\$610.00	Nonpriority amount	\$284.72
Total claim										
\$894.72										
Priority amount										
\$610.00										
Nonpriority amount										
\$284.72										
2.356.	Priority creditor's name and mailing address SULLIVAN, JOHN E Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,745.20</td> </tr> </table>	Total claim	\$1,745.20	<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;">\$793.27</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;">\$951.93</td> </tr> </table>	Priority amount	\$793.27	Nonpriority amount	\$951.93
Total claim										
\$1,745.20										
Priority amount										
\$793.27										
Nonpriority amount										
\$951.93										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.357.	Priority creditor's name and mailing address SUTTER, MARY A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$780.00</td> </tr> </table>	Total claim	\$780.00	<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;">\$750.00</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;">\$30.00</td> </tr> </table>	Priority amount	\$750.00	Nonpriority amount	\$30.00
Total claim										
\$780.00										
Priority amount										
\$750.00										
Nonpriority amount										
\$30.00										
2.358.	Priority creditor's name and mailing address SWANKE, MELISSA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$840.00</td> </tr> </table>	Total claim	\$840.00	<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;">\$700.00</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;">\$140.00</td> </tr> </table>	Priority amount	\$700.00	Nonpriority amount	\$140.00
Total claim										
\$840.00										
Priority amount										
\$700.00										
Nonpriority amount										
\$140.00										
2.359.	Priority creditor's name and mailing address SWEENEY, JEAN F Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,330.80</td> </tr> </table>	Total claim	\$1,330.80	<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;">\$1,050.63</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;">\$280.17</td> </tr> </table>	Priority amount	\$1,050.63	Nonpriority amount	\$280.17
Total claim										
\$1,330.80										
Priority amount										
\$1,050.63										
Nonpriority amount										
\$280.17										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.360.	Priority creditor's name and mailing address TAUCHER, LINDA P Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$2,061.03</td> </tr> </table>	Total claim	\$2,061.03	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,994.71</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$66.32</td> </tr> </table>	Priority amount	\$1,994.71	Nonpriority amount	\$66.32
Total claim										
\$2,061.03										
Priority amount										
\$1,994.71										
Nonpriority amount										
\$66.32										
2.361.	Priority creditor's name and mailing address TAVAROZZI, DONALD L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$1,680.68</td> </tr> </table>	Total claim	\$1,680.68	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,096.16</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$584.52</td> </tr> </table>	Priority amount	\$1,096.16	Nonpriority amount	\$584.52
Total claim										
\$1,680.68										
Priority amount										
\$1,096.16										
Nonpriority amount										
\$584.52										
2.362.	Priority creditor's name and mailing address TELLAM, SANDRA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$739.95</td> </tr> </table>	Total claim	\$739.95	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$499.95</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$240.00</td> </tr> </table>	Priority amount	\$499.95	Nonpriority amount	\$240.00
Total claim										
\$739.95										
Priority amount										
\$499.95										
Nonpriority amount										
\$240.00										

Debtor **The Paper Store, LLC**Case number (if known) **20-40743**

2.363.	Priority creditor's name and mailing address TERVEEN, JOHN Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$744.00</td> </tr> </table>	Total claim	\$744.00	<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;">\$310.00</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;">\$434.00</td> </tr> </table>	Priority amount	\$310.00	Nonpriority amount	\$434.00
Total claim										
\$744.00										
Priority amount										
\$310.00										
Nonpriority amount										
\$434.00										
2.364.	Priority creditor's name and mailing address THATCHER, HELEN F Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$533.28</td> </tr> </table>	Total claim	\$533.28	<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;">\$533.28</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	\$533.28	Nonpriority amount	\$0.00
Total claim										
\$533.28										
Priority amount										
\$533.28										
Nonpriority amount										
\$0.00										
2.365.	Priority creditor's name and mailing address THEOS, CHRISTOPHER W Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$606.71</td> </tr> </table>	Total claim	\$606.71	<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;">\$520.00</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;">\$86.71</td> </tr> </table>	Priority amount	\$520.00	Nonpriority amount	\$86.71
Total claim										
\$606.71										
Priority amount										
\$520.00										
Nonpriority amount										
\$86.71										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.366.	Priority creditor's name and mailing address TIBBETTS, LAURA A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$2,576.94</td> </tr> </table>	Total claim	\$2,576.94	<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;">\$1,610.59</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;">\$966.35</td> </tr> </table>	Priority amount	\$1,610.59	Nonpriority amount	\$966.35
Total claim										
\$2,576.94										
Priority amount										
\$1,610.59										
Nonpriority amount										
\$966.35										
2.367.	Priority creditor's name and mailing address TOBIN, ELIZABETH A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$426.72</td> </tr> </table>	Total claim	\$426.72	<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;">\$426.72</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	\$426.72	Nonpriority amount	\$0.00
Total claim										
\$426.72										
Priority amount										
\$426.72										
Nonpriority amount										
\$0.00										
2.368.	Priority creditor's name and mailing address TOOHEY, HOLLY J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$746.72</td> </tr> </table>	Total claim	\$746.72	<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;">\$320.00</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;">\$426.72</td> </tr> </table>	Priority amount	\$320.00	Nonpriority amount	\$426.72
Total claim										
\$746.72										
Priority amount										
\$320.00										
Nonpriority amount										
\$426.72										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.369.	Priority creditor's name and mailing address TRESKA, NIKO Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$2,283.16</td> </tr> </table>	Total claim	\$2,283.16	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$1,851.21</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$431.95</td> </tr> </table>	Priority amount	\$1,851.21	Nonpriority amount	\$431.95
Total claim										
\$2,283.16										
Priority amount										
\$1,851.21										
Nonpriority amount										
\$431.95										
2.370.	Priority creditor's name and mailing address TRUMPER, SARAH M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$499.95</td> </tr> </table>	Total claim	\$499.95	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$199.95</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$300.00</td> </tr> </table>	Priority amount	\$199.95	Nonpriority amount	\$300.00
Total claim										
\$499.95										
Priority amount										
\$199.95										
Nonpriority amount										
\$300.00										
2.371.	Priority creditor's name and mailing address US TREASURY IRS OGDEN UT 84201 Date or dates debt was incurred APRIL - JUNE 2020 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> ☐ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: SOCIAL SECURITY TAXES Is the claim subject to offset? ☐ No ☒ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$117,000.00</td> </tr> </table>	Total claim	\$117,000.00	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$117,000.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$117,000.00	Nonpriority amount	\$0.00
Total claim										
\$117,000.00										
Priority amount										
\$117,000.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.372.	Priority creditor's name and mailing address VALENTINE, LAURA L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$586.31</td> </tr> </table>	Total claim	\$586.31	<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;">\$586.31</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	\$586.31	Nonpriority amount	\$0.00
Total claim										
\$586.31										
Priority amount										
\$586.31										
Nonpriority amount										
\$0.00										
2.373.	Priority creditor's name and mailing address VALERIO, JULIA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$36.08</td> </tr> </table>	Total claim	\$36.08	<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;">\$36.08</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	\$36.08	Nonpriority amount	\$0.00
Total claim										
\$36.08										
Priority amount										
\$36.08										
Nonpriority amount										
\$0.00										
2.374.	Priority creditor's name and mailing address VAN DAM, DIANE F Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$468.00</td> </tr> </table>	Total claim	\$468.00	<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;">\$468.00</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	\$468.00	Nonpriority amount	\$0.00
Total claim										
\$468.00										
Priority amount										
\$468.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.375.	Priority creditor's name and mailing address VERNAZZARO, KELLIE A Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,867.92</td> </tr> </table>	Total claim	\$1,867.92	<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;">\$1,867.92</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	\$1,867.92	Nonpriority amount	\$0.00
Total claim										
\$1,867.92										
Priority amount										
\$1,867.92										
Nonpriority amount										
\$0.00										
2.376.	Priority creditor's name and mailing address VIELE, TINA M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$173.29</td> </tr> </table>	Total claim	\$173.29	<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;">\$173.29</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	\$173.29	Nonpriority amount	\$0.00
Total claim										
\$173.29										
Priority amount										
\$173.29										
Nonpriority amount										
\$0.00										
2.377.	Priority creditor's name and mailing address WALKER, KRISTIN M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$644.23</td> </tr> </table>	Total claim	\$644.23	<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;">\$644.23</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	\$644.23	Nonpriority amount	\$0.00
Total claim										
\$644.23										
Priority amount										
\$644.23										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.378.	Priority creditor's name and mailing address WARREN, WILLIAM M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$1,705.00</td> </tr> </table>	Total claim	\$1,705.00	<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;">\$1,375.00</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;">\$330.00</td> </tr> </table>	Priority amount	\$1,375.00	Nonpriority amount	\$330.00
Total claim										
\$1,705.00										
Priority amount										
\$1,375.00										
Nonpriority amount										
\$330.00										
2.379.	Priority creditor's name and mailing address WASSERBOEHR, SHIRLEY Y Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$2,322.12</td> </tr> </table>	Total claim	\$2,322.12	<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;">\$1,741.59</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;">\$580.53</td> </tr> </table>	Priority amount	\$1,741.59	Nonpriority amount	\$580.53
Total claim										
\$2,322.12										
Priority amount										
\$1,741.59										
Nonpriority amount										
\$580.53										
2.380.	Priority creditor's name and mailing address WEEKS, HEATHER L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$658.73</td> </tr> </table>	Total claim	\$658.73	<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;">\$506.73</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;">\$152.00</td> </tr> </table>	Priority amount	\$506.73	Nonpriority amount	\$152.00
Total claim										
\$658.73										
Priority amount										
\$506.73										
Nonpriority amount										
\$152.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.381.	Priority creditor's name and mailing address WEST, WARREN M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$916.83</td> </tr> </table>	Total claim	\$916.83	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$305.61</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$611.22</td> </tr> </table>	Priority amount	\$305.61	Nonpriority amount	\$611.22
Total claim										
\$916.83										
Priority amount										
\$305.61										
Nonpriority amount										
\$611.22										
2.382.	Priority creditor's name and mailing address WHIPPLE, ADAM L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$370.19</td> </tr> </table>	Total claim	\$370.19	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$370.19</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$370.19	Nonpriority amount	\$0.00
Total claim										
\$370.19										
Priority amount										
\$370.19										
Nonpriority amount										
\$0.00										
2.383.	Priority creditor's name and mailing address WHITE, WENDY S Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$803.74</td> </tr> </table>	Total claim	\$803.74	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$803.74</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table>	Priority amount	\$803.74	Nonpriority amount	\$0.00
Total claim										
\$803.74										
Priority amount										
\$803.74										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.384.	Priority creditor's name and mailing address WILSON, CHARLENE M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><td>Total claim</td></tr><tr><td>\$0.00</td></tr></table>	Total claim	\$0.00	<table border="1" style="width: 100%;"><tr><td>Priority amount</td></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><td>Nonpriority amount</td></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$0.00	Nonpriority amount	\$0.00
Total claim										
\$0.00										
Priority amount										
\$0.00										
Nonpriority amount										
\$0.00										
2.385.	Priority creditor's name and mailing address WOODS, HEATHER M Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><td>Total claim</td></tr><tr><td>\$672.00</td></tr></table>	Total claim	\$672.00	<table border="1" style="width: 100%;"><tr><td>Priority amount</td></tr><tr><td>\$560.00</td></tr></table> <table border="1" style="width: 100%;"><tr><td>Nonpriority amount</td></tr><tr><td>\$112.00</td></tr></table>	Priority amount	\$560.00	Nonpriority amount	\$112.00
Total claim										
\$672.00										
Priority amount										
\$560.00										
Nonpriority amount										
\$112.00										
2.386.	Priority creditor's name and mailing address WORTHINGTON, LISA Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ Yes	<table border="1" style="width: 100%;"><tr><td>Total claim</td></tr><tr><td>\$2,137.49</td></tr></table>	Total claim	\$2,137.49	<table border="1" style="width: 100%;"><tr><td>Priority amount</td></tr><tr><td>\$1,370.19</td></tr></table> <table border="1" style="width: 100%;"><tr><td>Nonpriority amount</td></tr><tr><td>\$767.31</td></tr></table>	Priority amount	\$1,370.19	Nonpriority amount	\$767.31
Total claim										
\$2,137.49										
Priority amount										
\$1,370.19										
Nonpriority amount										
\$767.31										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.387.	Priority creditor's name and mailing address YANUSKEVICH, JUDY A Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$335.50	Priority amount \$335.50
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		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? ☒ No ☐ Yes		

2.388.	Priority creditor's name and mailing address YEKELCHIK, LILIA Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$2,362.49	Priority amount \$1,817.30
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$545.19
	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? ☒ No ☐ Yes		

2.389.	Priority creditor's name and mailing address YUREK, PAIGE Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$990.00	Priority amount \$440.06
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		Nonpriority amount \$549.95
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.390.	Priority creditor's name and mailing address ZACCARDI, JACQUELYN Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$115.39	Priority amount \$115.39
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.391.	Priority creditor's name and mailing address ZAPATA-TURNER, MARIA M Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,824.00	Priority amount \$1,440.00
				Nonpriority amount \$384.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

2.392.	Priority creditor's name and mailing address ZERON, MANUEL D Address Intentionally Omitted	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Total claim \$1,320.00	Priority amount \$1,320.00
				Nonpriority amount \$0.00
	Date or dates debt was incurred 1/15/20 TO 7/13/20	Basis for the claim: ACCRUED PTO (VACATION)		
	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? ☒ No ☐ Yes		

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.393.	Priority creditor's name and mailing address ZINDLE, JAN L Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$115.06</td> </tr> </table>	Total claim	\$115.06	<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;">\$115.06</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	\$115.06	Nonpriority amount	\$0.00
Total claim										
\$115.06										
Priority amount										
\$115.06										
Nonpriority amount										
\$0.00										
2.394.	Priority creditor's name and mailing address ZINK, ANGELA C Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$501.28</td> </tr> </table>	Total claim	\$501.28	<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;">\$501.28</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	\$501.28	Nonpriority amount	\$0.00
Total claim										
\$501.28										
Priority amount										
\$501.28										
Nonpriority amount										
\$0.00										
2.395.	Priority creditor's name and mailing address ZINSKY, MARALYN J Address Intentionally Omitted Date or dates debt was incurred 1/15/20 TO 7/13/20 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: ACCRUED PTO (VACATION) Is the claim subject to offset? ☒ No ☐ 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;">\$620.00</td> </tr> </table>	Total claim	\$620.00	<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;">\$620.00</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	\$620.00	Nonpriority amount	\$0.00
Total claim										
\$620.00										
Priority amount										
\$620.00										
Nonpriority amount										
\$0.00										

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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 30 WATT HOLDINGS INC 600 WASHINGTON AVE N SUITE104 MINNEAPOLIS MN 55401 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,636.00
3.2. Nonpriority creditor's name and mailing address 47 BRAND LLC PO BOX 419648 BOSTON MA 02241-9648 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$88,460.80
3.3. Nonpriority creditor's name and mailing address 4OCEAN 6560 W ROGERS CIRCLE SUITE 19 BOCA RATON FL 33431 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,710.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.4.	Nonpriority creditor's name and mailing address 933 SOUTH WILLOW STREET LLC TJ MAXX PLAZA C/O RUBICON REAL ESTATE LLC ONE WASHINGTON STREET SUITE 300 WELLESLEY MA 02481 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$54,343.16
3.5.	Nonpriority creditor's name and mailing address A L DIAMOND HOME PRODUCTS LLC 250 PASSAIC ST NEWARK NJ 01704 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,542.00
3.6.	Nonpriority creditor's name and mailing address A.C. & M. FIRE EQUIPMENT CO. PO BOX 444 STOW MA 01775 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$719.19

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.7.	Nonpriority creditor's name and mailing address A.W. FABER-CASTELL USA P.O. BOX 634500 CINCINNATI OH 45263-4500 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,928.73
3.8.	Nonpriority creditor's name and mailing address A-1 EXTERMINATORS P.O. BOX 310 LYNN MA 01903-0310 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,886.51
3.9.	Nonpriority creditor's name and mailing address ABACUS HEALTH PRODUCTS, INC 25 JOHN CUMMINGS WAY WOONSOCKET RI 02895 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,514.24

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.10.	Nonpriority creditor's name and mailing address ABOUT FACE DESIGNS, INC. 1510 OLD DEERFIELD ROAD SUITE 211 HIGHLAND PARK IL 60035 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,728.40
3.11.	Nonpriority creditor's name and mailing address ABRAHAM LICHAA CO. LLC 30 VIRGINIA AVENUE PROVIDENCE RI 02905 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,306.28
3.12.	Nonpriority creditor's name and mailing address ACCO BRANDS FOUR CORPORATE DR LAKE ZURICH IL 60047 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,154.05

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.13.	Nonpriority creditor's name and mailing address ACE AMERICAN INSURANCE CO. (CHUBB) CHUBB GLOBAL CASUALTY CHRISTOPHER MILLER ROUTING 1275-2W ONE BEAVER VLY RD WILMINGTON DE 19803 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.14.	Nonpriority creditor's name and mailing address ACLSA LLC DBA REDSMITH GRAPHIC SOLUTIONS 981 ISOM ROAD SAN ANTONIO TX 78216 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.15.	Nonpriority creditor's name and mailing address ADP KIM DIFFY 300 JEFFERSON BLVD WARWICK RI 02888 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.16.	Nonpriority creditor's name and mailing address ADT COMMERCIAL LLC PO BOX 970071 BOSTON MA 02297 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,997.10
3.17.	Nonpriority creditor's name and mailing address ADURO PRODUCTS LLC 250 LIBERTY STREET METUCHEN NJ 08840 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,517.40
3.18.	Nonpriority creditor's name and mailing address AE CLARK ENTERPRISES ROXBURY BUSINESS COMPLEX 19 ROUTE 10E BLDG 1-13 SUCCASUNNA NJ 07876 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.19.	Nonpriority creditor's name and mailing address AIRPORT PLAZA, LLC P.O BOX 62045 NEWARK NJ 07101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$75,388.77
3.20.	Nonpriority creditor's name and mailing address ALENE CANDLES 51 SCARBOROUGH LANE MILFORD NH 03055 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.60
3.21.	Nonpriority creditor's name and mailing address ALEX AND ANI 10 BRIGGS DRIVE EAST GREENWICH RI 02818 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$116,050.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.22.	Nonpriority creditor's name and mailing address ALEX BRANDS P.O. BOX 3908 BOSTON MA 02241-3908 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,129.60
3.23.	Nonpriority creditor's name and mailing address ALL AMERICAN WASTE PO BOX 630 EAST WINDSOR CT 06088 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$333.08
3.24.	Nonpriority creditor's name and mailing address ALLIED PRODUCTS INC. 1420 KANSAS AVENUE KANSAS CITY MO 64127 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,636.90

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.25.	Nonpriority creditor's name and mailing address ALPARGATAS PO BOX 419891 BOSTON MA 02241-9891 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.26.	Nonpriority creditor's name and mailing address ALPHA PENSION MARK SALAMONE 396 COMMONWEALTH AVE UNIT D2A BOSTON MA 02215 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: Is the claim subject to offset? ☐ No ☐ Yes	Amount of claim UNDETERMINED
3.27.	Nonpriority creditor's name and mailing address AMANDA BLU & CO 883 N. JAN MAR CT. OLATHE KS 66061 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$25,344.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.28.	Nonpriority creditor's name and mailing address AMAZON CAPITAL SERVICES, INC PO BOX 035184 SEATTLE WA 98124-5184 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$96.46
3.29.	Nonpriority creditor's name and mailing address AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA FLOOD SVC CENTER PO BOX 8695 KALISPELL MT 59904-8695 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.30.	Nonpriority creditor's name and mailing address AMERICAN EXPRESS PO BOX 1270 NEWARK NJ 07101-1270 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$68,611.32

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.31.	Nonpriority creditor's name and mailing address AMINCO INTERNATIONAL (USA) INC. 20571 CRESCENT BAY DRIVE LAKE FOREST CA 92630 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,396.80
3.32.	Nonpriority creditor's name and mailing address AMSCAN INC P.O. BOX 71603 CHICAGO IL 60694-1603 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,995.66
3.33.	Nonpriority creditor's name and mailing address ANGEL DEAR 2975 WHIPPLE ROAD UNION CITY CA 94587 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$13,115.76

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.34.	Nonpriority creditor's name and mailing address ANGELO, BETH Address Intentionally Omitted Date or dates debt was incurred 8/9/2019 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: PROMISSORY NOTE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$33,115.00
3.35.	Nonpriority creditor's name and mailing address APTOS, INC. DANNY ROSENOFF 945 EAST PACES FERRY RD STE 2500 ATLANTA GA 30326 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.36.	Nonpriority creditor's name and mailing address ARDENT DISPLAYS & FIXTURES 95 LEGGETT STREET EAST HARTFORD CT 016108 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,157.67

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.37.	Nonpriority creditor's name and mailing address ASHER'S P.O. BOX 95000-1875 PHILADELPHIA PA 19195-1875 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$943.69
3.38.	Nonpriority creditor's name and mailing address ASSOCIATED QUIRKS 11 EAST MAIN ST SOUTHBOROUGH MA 01772 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$255.00
3.39.	Nonpriority creditor's name and mailing address ASSOCIATION MEMBERS WC PO BOX 859222-9222 BRAINTREE MA 02185 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.40.	Nonpriority creditor's name and mailing address AT&T MOBILITY P.O. BOX 536216 ATLANTA GA 30353-6216 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,524.14
3.41.	Nonpriority creditor's name and mailing address AURORA WORLD, INC 8820 MERCURY LANE PICO RIVERA CA 90660 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,683.85
3.42.	Nonpriority creditor's name and mailing address AVALARA CHRIS GIRARDIN 255 S KING ST STE 1800 SEATTLE WA 98104 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.43.	Nonpriority creditor's name and mailing address BABY NEEDS, INC. P.O. BOX 602951 CHARLOTTE NC 28260-2951 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,872.00
3.44.	Nonpriority creditor's name and mailing address BABY PAPER 3000 DUNDEE ROAD, SUITE 210 NORTHBROOK IL 60062 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,623.60
3.45.	Nonpriority creditor's name and mailing address BACCI CHOCOLATE DESIGN 17 COLUMBIA STREET SWAMPSCOTT MA 01907 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,820.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.46.	Nonpriority creditor's name and mailing address BAGGALLINI, INC. P.O. BOX 677265 DALLAS TX 75267-7265 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,149.75
3.47.	Nonpriority creditor's name and mailing address BANDANA SUPPLY 6902 FM 2920 ROAD SUITE 006 SPRING TX 77379 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.48.	Nonpriority creditor's name and mailing address BANDED 320 PREMIER COURT, STE 216 FRANKLIN TN 37067 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,014.15

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.49.	Nonpriority creditor's name and mailing address BARLOW DESIGNS INC 20 COMMERCIAL WAY EAST PROVIDENCE RI 02914 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$40,302.22
3.50.	Nonpriority creditor's name and mailing address BC USA 101 QUINT STREET SAN FRANCISCO CA 94124 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.51.	Nonpriority creditor's name and mailing address B-D-R 7994 US ROUTE 5 WESTMINSTER VT 05158 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,486.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.52.	Nonpriority creditor's name and mailing address BEAZLEY INSURANCE COMPANY 30 BATTERSON PARK RD FARMINGTON CT 06032 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.53.	Nonpriority creditor's name and mailing address BELLA TUNNO 250 NORTH TRADE STREET SUITE 201 MATTHEWS NC 28105 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$963.40
3.54.	Nonpriority creditor's name and mailing address BELVEDERE STATIONERS PO BOX 20607 SEATTLE WA 98102 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,075.75

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.55.	Nonpriority creditor's name and mailing address BERKSHIRE GAS PO BOX 1388 PITTSFIELD MA 01202 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12.51
3.56.	Nonpriority creditor's name and mailing address BERNARD'S 333 WASHINGTON STREET #634 BOSTON MA 02108 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$74,369.59
3.57.	Nonpriority creditor's name and mailing address BEVERLY PLAZA REALTY TRUST 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$81,500.31

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.58.	Nonpriority creditor's name and mailing address BGX E-HEALTH LLC 4700 MILLENIA BOULEVARD SUITE 175 ORLANDO FL 82389 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.59.	Nonpriority creditor's name and mailing address BIGMOUTH TOYS.COM 655 WINDING BROOKS DRIVE SUITE 205 GLASTONBURY CT 06033 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,080.00
3.60.	Nonpriority creditor's name and mailing address BISHOPS CORNER (E&A), LLC PO BOX 536856 TENANT#74164 ATLANTA GA 30353-6856 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$56,989.26

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.61.	Nonpriority creditor's name and mailing address BLENDERS EYEWEAR 4683 CASS STREET SAN DIEGO CA 92109 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,240.00
3.62.	Nonpriority creditor's name and mailing address BLOWFISH LLC FACTORING AND TRADE FINANCE DIVISION PO BOX 75359 CHICAGO IL 60675-5359 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$18,157.80
3.63.	Nonpriority creditor's name and mailing address BLUE DIAMOND DISPOSAL, INC PO BOX 267 SUCCASUNNA NJ 07876 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$287.74

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.64.	Nonpriority creditor's name and mailing address BLUE MOON DIGITAL INC. C/O P2BINVESTOR, INC PO BOX 173939 DENVER CO 80217-3939 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,000.00
3.65.	Nonpriority creditor's name and mailing address BLVDCON, LLC PO BOX 823201 PHILADELPHIA PA 19182-3201 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.66.	Nonpriority creditor's name and mailing address BOELTER COMPANIES PO BOX 734296 CHICAGO IL 60673 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,013.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.67.	Nonpriority creditor's name and mailing address BOSTON WAREHOUSE TRADING CORP. 59 DAVIS AVENUE NORWOOD MA 02062-3031 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$719.20
3.68.	Nonpriority creditor's name and mailing address BOTTLEKEEPER 219 W GRAND AVE EL SEGUNDO CA 90245 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$8.00
3.69.	Nonpriority creditor's name and mailing address BOX MILL ROAD REALTY 20 MAIN ST ACTON MA 01720 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$58.49

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.70.	Nonpriority creditor's name and mailing address BR SUPPLY 9332 N 95TH WAY SUITE B109 SCOTTSDALE AZ 85288 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$47,363.10
3.71.	Nonpriority creditor's name and mailing address BRASK ENTERPRISES, INC PO BOX 93717 LAS VEGAS NV 89193 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$832.00
3.72.	Nonpriority creditor's name and mailing address BRASK ENTERPRISES, INC. P.O. BOX 800335 HOUSTON TX 77280 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,119.89

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.73.	Nonpriority creditor's name and mailing address BRIXMOR SPE 4, LP PO BOX 645349 CINCINNATI OH 45264-5349 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$25,488.32
3.74.	Nonpriority creditor's name and mailing address BROADWAY COMMONS PO BOX 28706 NEW YORK NY 10087 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.75.	Nonpriority creditor's name and mailing address BROWNLOW CORPORATION 6309 AIRPORT FREEWAY FORT WORTH TX 76117 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,238.40

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.76.	Nonpriority creditor's name and mailing address BRUMATE LLC 2061 YORK ST DENVER CO 80205 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$14,011.22
3.77.	Nonpriority creditor's name and mailing address BRYAN ANTHONYS 11212 METRIC BLVD SUITE 100 AUSTIN TX 78758 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$30,765.24
3.78.	Nonpriority creditor's name and mailing address BUCKLAND ROAD RETAIL LLC PO BOX 2044 DEPARTMENT 7000 MEMPHIS TN 38101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$91,210.67

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.79.	Nonpriority creditor's name and mailing address BUFFALO GAMES 220 JAMES E. CASEY DRIVE BUFFALO NY 14206 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,022.80
3.80.	Nonpriority creditor's name and mailing address BULBS.COM 243 STAFFORD STREET WORCESTER MA 01603 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,270.53
3.81.	Nonpriority creditor's name and mailing address BUNGALOW LLC PO BOX 25685 WASHINGTON DC 20027 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$85,720.10

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.82.	Nonpriority creditor's name and mailing address BURTON + BURTON 325 CLEVELAND ROAD BOGART GA 30622 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$79.68
3.83.	Nonpriority creditor's name and mailing address BUYER'S DIRECT, INC P.O. BOX 818 ELM CITY NC 27822 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$30,470.00
3.84.	Nonpriority creditor's name and mailing address C.R. GIBSON COMPANY PO BOX 734373 CHICAGO IL 60673-4373 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,447.92

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.85.	Nonpriority creditor's name and mailing address CAFFEINATE LABS/ZOOTILITY TOOLS 170 ANDERSON STREET PORTLAND ME 04101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$96,696.00
3.86.	Nonpriority creditor's name and mailing address CAJOLE 77650 ENFIELD LANE PALM DESERT CA 92211 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,162.20
3.87.	Nonpriority creditor's name and mailing address CALLA PRODUCTS LLC PO BOX 926 DIABLO CA 94528 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$378.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.88.	Nonpriority creditor's name and mailing address CAMELBAK PRODUCTS, LLC P.O. BOX 734148 CHICAGO IL 60673-4148 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,179.50
3.89.	Nonpriority creditor's name and mailing address CANDLEWOOD LAKE ROAD, LLC 7248 MORGAN ROAD P.O. BOX 220 LIVERPOOL NY 13088 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$61,034.36
3.90.	Nonpriority creditor's name and mailing address CANDY CLUB 5855 GREEN VALLEY CIRCLE SUITE 101 CULVER CITY CA 90230 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,420.66

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.91.	Nonpriority creditor's name and mailing address CANVAS 203 E JONES AVE, STE 114 SAN ANTONIO TX 78215 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$17,576.32
3.92.	Nonpriority creditor's name and mailing address CAPE COD CHOKERS 68 PILOTES WAY WEST BARNSTABLE MA 02668 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$914.40
3.93.	Nonpriority creditor's name and mailing address CAPE TOWN PLAZA LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$17,951.12

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.94.	Nonpriority creditor's name and mailing address CAPITAL AUGUSTA PROPERTIES LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$32,023.77
3.95.	Nonpriority creditor's name and mailing address CARLAND COMPANY INC 154 WARREN AVE EAST PROVIDENCE RI 02914 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,652.50
3.96.	Nonpriority creditor's name and mailing address CARRIAGETOWN STATION LLC 33340 COLLECTION CENTER DRIVE CHICAGO IL 60693-0333 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$41,633.25

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.97.	Nonpriority creditor's name and mailing address CARSON INDUSTRIES, INC. 189 FOREMAN ROAD FREEPORT PA 16229-1799 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,833.20
3.98.	Nonpriority creditor's name and mailing address CASPARI 99 COGWHEEL LANE SEYMOUR CT 06483 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,983.96
3.99.	Nonpriority creditor's name and mailing address CATHEDRAL ART METAL COMPANY P.O. BOX 6146 PROVIDENCE RI 02940-6146 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$13,337.52

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.100.	Nonpriority creditor's name and mailing address CENTER COURT 1153 NORTHSIDE BLVD. SOUTH BEND IN 46615 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$58,631.25
3.101.	Nonpriority creditor's name and mailing address CENTER OF HUDSON (E&A), LLC PO BOX 536856 TENANT 26298 ATLANTA GA 30353-6856 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$71,398.45
3.102.	Nonpriority creditor's name and mailing address CENTRAL MAINE POWER PO BOX 11752 NEWARK NJ 07101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,458.76

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.103.	Nonpriority creditor's name and mailing address CENTRAL SIGNAL CORP. 607 NORTH AVENUE DOOR 18, 2ND FLOOR WAKEFIELD MA 01880 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$132.00
3.104.	Nonpriority creditor's name and mailing address CENTRIC SOCKS LLC PO BOX 37998 CHARLOTTE NC 28237-7998 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,881.20
3.105.	Nonpriority creditor's name and mailing address CES LIMITED 100 W. KIRBY ST. SUITE 101 DETROIT MI 48202 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,000.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.106.	Nonpriority creditor's name and mailing address CHAMILIA ONE KENNEY DRIVE CRANSTON RI 02920-4403 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.107.	Nonpriority creditor's name and mailing address CHARLES GEORGE COMPANIES., INC. P.O. BOX 857 LONDONDERRY NH 03053 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,376.42
3.108.	Nonpriority creditor's name and mailing address CHARLES RIVER BELLINGHAM LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$15,251.68

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.109.	Nonpriority creditor's name and mailing address CHEVEUX CORP 1061 SLOCUM AVE RIDGEFIELD NJ 07657 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$146,308.50
3.110.	Nonpriority creditor's name and mailing address CHEX FINER FOODS 71 HAMPDEN ROAD STE 100 MANSFIELD MA 02048 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,813.77
3.111.	Nonpriority creditor's name and mailing address CHOWDAHEADZ 185 NEW BOSTON STREET WOBBURN MA 01801 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$18,841.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.112.	Nonpriority creditor's name and mailing address CITI CARD 6520 PO BOX 6004 SIOUX FALLS SD 57117 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.113.	Nonpriority creditor's name and mailing address CITY CARTING & RECYCLING PO BOX 412574 BOSTON MA 02241-2574 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$264.04
3.114.	Nonpriority creditor's name and mailing address CITY ELECTRIC SUPPLY PO BOX 1006 WILBRAHAM MA 01095 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,263.97

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.115.	Nonpriority creditor's name and mailing address CITY OF FRAMINGHAM 150 CONCORD ST # 111 FRAMINGHAM MA 01702 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$542.36
3.116.	Nonpriority creditor's name and mailing address CITY OF QUINCY 440 EAST SQUANTUM ST. QUINCY MA 02171 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$116.81
3.117.	Nonpriority creditor's name and mailing address CLARITAS LLC PO BOX 851360 MINNEAPOLIS MN 55485-1360 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,772.64

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.118.	Nonpriority creditor's name and mailing address CLEANLIFE ENERGY LLC 114 BARRINGTOWN SQUARE SUITE 229 AURORA OH 44202 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,000.00
3.119.	Nonpriority creditor's name and mailing address CLOCK IT TO YA EARTHANGEL 195 BUCKTHORN DRIVE BREA CA 92823 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$98,402.85
3.120.	Nonpriority creditor's name and mailing address CODE RED TRAIDING LLC 1928 KINGS HIWAY BROOKLYN NY 11230 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,537.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.121.	Nonpriority creditor's name and mailing address COLONIAL CANDIES 47 SUGAR ROAD BOLTON MA 01740 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,314.00
3.122.	Nonpriority creditor's name and mailing address COLUMBIA GAS OF MASSACHUSETTS PO 742514 CINCINNATI OH 45274 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$127.34
3.123.	Nonpriority creditor's name and mailing address COMMONWEALTH OF MASSACHUSETTS ONE ASHBURTON PLACE BOSTON MA 02108 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.124.	Nonpriority creditor's name and mailing address COMMONWEALTH SOAP & TOILETRIES 537 QUEQUEHAN STREET FALL RIVER MA 02721 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$268.80
3.125.	Nonpriority creditor's name and mailing address COMPENDIUM INCORPORATED 2100 N. PACIFIC ST SEATTLE WA 98103 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.126.	Nonpriority creditor's name and mailing address CONNECTICUT NATURAL GAS CORP PO BOX 9245 CHELSEA MA 02150-9245 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$806.99

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.127.	Nonpriority creditor's name and mailing address CONNECTION FINANCIAL SERVICES PO BOX 5066 HARTFORD CT 06102-5066 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$357.00
3.128.	Nonpriority creditor's name and mailing address CONTINUUM GAMES 221 S FRANKLIN RD. BLDG C, STE 780 INDIANAPOLIS IN 46219 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,154.25
3.129.	Nonpriority creditor's name and mailing address CORKCICLE PO BOX 547965 ORLANDO FL 32854 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,220.40

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.130.	Nonpriority creditor's name and mailing address CORPORATE SERVICES CONSULTANTS,LLC PO BOX 1048 DANDRIDGE TN 37725 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$660.00
3.131.	Nonpriority creditor's name and mailing address CORPORATION SERVICE COMPANY PO BOX 13397 PHILADELPHIA PA 19101-3397 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.132.	Nonpriority creditor's name and mailing address CRANE & CO.,INC. P.O. BOX 258 DALTON MA 01227-0258 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$523.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.133.	Nonpriority creditor's name and mailing address CRAYOLA, LLC PO BOX 93210 CHICAGO IL 60673-3210 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$8,164.08
3.134.	Nonpriority creditor's name and mailing address CRAZY AARON ENTERPRISES 11302 BROADWAY ST. ALDEN NY 14004 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$20,826.72
3.135.	Nonpriority creditor's name and mailing address CREATIVE CONVERTING P.O. BOX 790051 ST LOUIS MO 63179-0051 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,591.28

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.136.	Nonpriority creditor's name and mailing address CREATIVE EDUCATION OF CANADA 326 GRISWOLD STREET PORT HURON MI 48060 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$987.84
3.137.	Nonpriority creditor's name and mailing address CRESCENT, INC. P.O. BOX 669 NIOTA TN 37826 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.138.	Nonpriority creditor's name and mailing address CRESTAR LTD 8463 CHEMIN DARNLEY MONT-RAYAL QC H4T 1X2 CANADA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,062.90

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.139.	Nonpriority creditor's name and mailing address CRITEO CORP PO BOX 392422 PITTSBURGH PA 15251-9422 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,151.20
3.140.	Nonpriority creditor's name and mailing address CROCS INC. P.O. BOX 644601 PITTSBURGH PA 15264-4601 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,936.38
3.141.	Nonpriority creditor's name and mailing address CROSS INSURANCE WAKEFIELD INC. ELIZABETH TARRICONE SVP RISK MANAGEMENT 401 EDGEWATER PL STE 220 WAKEFIELD MA 01880 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.142.	Nonpriority creditor's name and mailing address CROSSROADS ORIGINAL DESIGNS 115 CROSSROADS BLVD. PO BOX 149 BUCYRUS OH 44820 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$16,299.18
3.143.	Nonpriority creditor's name and mailing address CWPM, LLC PO BOX 415 PLAINVILLE CT 06062 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,181.77
3.144.	Nonpriority creditor's name and mailing address D.M. MERCHANDISING, INC. 835 N. CHURCH COURT ELMHURST IL 60176 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$46,313.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.145.	Nonpriority creditor's name and mailing address DAME PRODUCTS 101 N 10TH STREET STE 308 BROOKLYN NY 11249 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.146.	Nonpriority creditor's name and mailing address DDR MDT SHOPPERS WORLD LLC DEPT #105209 21422 55233 PO BOX 92472 CLEVELAND OH 44193 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$114,786.75
3.147.	Nonpriority creditor's name and mailing address DELTA MB LLC 11501 NORTHLAKE DR CINCINNATI OH 45249 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.148.	Nonpriority creditor's name and mailing address DEMDACO P.O. BOX 803314 KANSAS CITY MO 64180-3314 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$271,662.60
3.149.	Nonpriority creditor's name and mailing address DEMOULAS SUPER MARKETS INC. 875 EAST STREET TEWKSBURY MA 01876 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$62,706.04
3.150.	Nonpriority creditor's name and mailing address DENNIS EAST INTERNATIONAL, INC 13 WILLOW ST YARMOUTH PORT MA 02675 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$31,832.90

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.151.	Nonpriority creditor's name and mailing address DFT SECURITY 75 REMITTANCE DRIVE DEPT 6012 CHICAGO IL 60675-6012	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$130.40
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.152.	Nonpriority creditor's name and mailing address DGL GROUP LTD 195 RARITAN CENTER PARKWAY EDISON NJ 08837	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$252.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.153.	Nonpriority creditor's name and mailing address DHL EXPRESS 16592 COLLECTIONS CENTER DR CHICAGO IL 60693	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$12,170.82
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.154.	Nonpriority creditor's name and mailing address DIGGIN ACTIVE, INC PO BOX 99708 EMERYVILLE CA 94662 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$486.00
3.155.	Nonpriority creditor's name and mailing address DIRECT ENERGY PO BOX 70220 PHILADELPHIA PA 19176-0220 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,210.70
3.156.	Nonpriority creditor's name and mailing address DMD PRODUCTS LLC 9973 FM 521 ROAD ROSHARON TX 77583 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$398.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.157.	Nonpriority creditor's name and mailing address DMX, INC. P.O. BOX 602777 CHARLOTTE NC 28260 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.158.	Nonpriority creditor's name and mailing address DONA BELA SHREDS 1251 73RD STREET, STE A WINDSOR HEIGHTS IA 50324 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,520.00
3.159.	Nonpriority creditor's name and mailing address DOUGLAS COMPANY, INC. BOX D 69 KRIF ROAD KEENE NH 03431-1248 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$32,064.44

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.160.	Nonpriority creditor's name and mailing address DOWNEAST BICYCLES SPESIALISTS 64 HOBBS STREET CONWAY NH 03818 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,359.00
3.161.	Nonpriority creditor's name and mailing address DREW DEROSE, INC 53 E. SPRINGFIELD STREET BOSTON MA 02118 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.162.	Nonpriority creditor's name and mailing address DRUM HILL ASSOCIATES 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$69,457.83

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.163.	Nonpriority creditor's name and mailing address DUDLEY TRADING ASSOCIATES LIMITED PARTNERSHIP PO BOX 41 WORCESTER MA 01614-0041 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$17,314.22
3.164.	Nonpriority creditor's name and mailing address DUKE CANNON SUPPLY COMPANY 123 N 3RD STREET SUITE 104 MINNEAPOLIS MN 55401 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,922.30
3.165.	Nonpriority creditor's name and mailing address DUNE JEWELRY 1 WESTINGHOUSE PLAZA A301 HYDE PARK MA 02136 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,401.75

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.166.	Nonpriority creditor's name and mailing address DV MANAGEMENT COMPANY 2001 WEST MAIN ST, SUITE 248 STAMFORD CT 06702 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$40,058.23
3.167.	Nonpriority creditor's name and mailing address E&A NORTHEAST LIMITED PARTNERSHIP PO BOX 536856 TENANT#59745 ATLANTA GA 30353-6856 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$51,290.32
3.168.	Nonpriority creditor's name and mailing address E&A NORTHEAST LIMITED PARTNERSHIP P.O. BOX 536856 TENANT#69297 ATLANTA GA 30353-6856 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$112,953.26

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.169.	Nonpriority creditor's name and mailing address E&S IMPORTS INC 725 BROADWAY HOLLBROOK NY 11741 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,172.12
3.170.	Nonpriority creditor's name and mailing address EAGLE LEASING 291 GREAT RD BEDFORD MA 01730 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.171.	Nonpriority creditor's name and mailing address EAGLE LEASING 291 GREAT RD BEDFORD MA 01730 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.172.	Nonpriority creditor's name and mailing address EAGLE LEASING COMPANY PO BOX 923 ORANGE CT 06477 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.173.	Nonpriority creditor's name and mailing address EAGLE LEASING COMPANY PO BOX 923 ORANGE CT 06477 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.174.	Nonpriority creditor's name and mailing address EAGLE LEASING COMPANY PO BOX 923 ORANGE CT 06477 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.175.	Nonpriority creditor's name and mailing address EAGLE LEASING COMPANY PO BOX 923 ORANGE CT 06477 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.176.	Nonpriority creditor's name and mailing address EAGLE LEASING COMPANY PO BOX 923 ORANGE CT 06477 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.177.	Nonpriority creditor's name and mailing address EAN SERVICES, LLC KATIE MARQUARDT HOFFMASTER GROUP INC 2920 N MAIN ST OSHKOSH WI 54901 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.178.	Nonpriority creditor's name and mailing address EARTH SUN MOON TRADING COMPANY 111 NORTH CENTER STREET GROVE CITY PA 16127 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,734.00
3.179.	Nonpriority creditor's name and mailing address EARTHLY BODY, INC 21900 PLUMMER ST. CHATSWORTH CA 91311 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$844.20
3.180.	Nonpriority creditor's name and mailing address EC DESIGN 201 W HOWARD LANE AUSTIN TX 78753 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$18,058.68

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.181.	Nonpriority creditor's name and mailing address EC SCOTT GROUP 1 THORNDAL CIRCLE DARIEN CT 06820 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.182.	Nonpriority creditor's name and mailing address ECCOLO LTD P.O. BOX 842932 BOSTON MA 02284-2932 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,621.09
3.183.	Nonpriority creditor's name and mailing address ECUTOPIA INC. PO BOX 913314 DENVER CO 80291-3314 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.184.	Nonpriority creditor's name and mailing address EDDY PLAZA ASSOCIATES LLC C/O SOUTH MIAMI PROPERTIES, INC. P.O. BOX 41468 PROVIDENCE RI 02940 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,905.55
3.185.	Nonpriority creditor's name and mailing address EDUCATIONAL DEVELOPMENT CORP. P.O. BOX 258871 OKLAHOMA CITY OK 73125-8871 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,109.34
3.186.	Nonpriority creditor's name and mailing address ELK BRISTOL COMMONS LLC 489 FIFTH AVENUE, 7TH FLOOR NEW YORK NY 10017 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$43,889.96

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.187.	Nonpriority creditor's name and mailing address EM BRANDS LLC 6155 W 80TH ST INDIANAPOLIS IN 46278 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$13,405.37
3.188.	Nonpriority creditor's name and mailing address EMMA'S CLOSET 1100 S.SAN PEDRO ST. STE B-6 LOS ANGELES CA 90015 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$50,486.00
3.189.	Nonpriority creditor's name and mailing address EMPLOYMENT SCREENING SERVICES DEPT. K, PO BOX 830520 BIRMINGHAM AL 35283 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$347.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.190.	Nonpriority creditor's name and mailing address ENESCO GROUP, INC. P.O. BOX 249 ITASCA IL 60143-0249 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$73,792.62
3.191.	Nonpriority creditor's name and mailing address ENTERPRISE RENT-A-CAR 10 2ND AVE BURLINGTON MA 01803-4408 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,889.62
3.192.	Nonpriority creditor's name and mailing address EPSILON TARGETING 3788 MOMENTUM PLACE CHICAGO IL 60689-5337 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$17,503.87

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.193.	Nonpriority creditor's name and mailing address EQUITY ONE JV SUB NORTHBOROUGH LLC P.O. BOX 538414 ATLANTA GA 30353-8414 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$68,417.00
3.194.	Nonpriority creditor's name and mailing address ESP SOLUTION SERVICES, LLC 580 MYLES STANDISH BLVD TAUNTON MA 02780 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$14,317.46
3.195.	Nonpriority creditor's name and mailing address ESSENCE COLLECTION 535 EIGHTH AVENUE 7TH FLOOR NEW YORK NY 10018 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,250.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.196.	Nonpriority creditor's name and mailing address EUROGRAPHICS 9105 SALLEY MONTREAL QC H8R2C8 CANADA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,591.20
3.197.	Nonpriority creditor's name and mailing address EVEREST 1430 CORMORANT RD ANCASTER ON L9G 4V5 CANADA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,538.00
3.198.	Nonpriority creditor's name and mailing address EVERSOURCE ELECTRIC 107 SELDEN ST BERLIN CT 06037 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$36,188.52

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.199.	Nonpriority creditor's name and mailing address EVERSOURCE GAS 247 STATION DR WESTWOOD MA 02090 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$875.61
3.200.	Nonpriority creditor's name and mailing address EXPERT PEST CONTROL 967 SOUTH STREET FITCHBURG MA 01420 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$75.00
3.201.	Nonpriority creditor's name and mailing address EXPERT STAFFING 120 STRATFORD STREET WORCESTER MA 01603 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,178.09

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.202.	Nonpriority creditor's name and mailing address EXTRA STORAGE SPACE 122 ALLIED DR DEDHAM MA 02026 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.203.	Nonpriority creditor's name and mailing address EXTREME TIME LLC 413 FLORENCE AVE HILLSIDE NJ 07205 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,400.00
3.204.	Nonpriority creditor's name and mailing address FANTASY FILES 557 JESSIE ST SAN FERNADO CA 91340 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,320.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.205.	Nonpriority creditor's name and mailing address FANTASY GIFTS 18 FORD PRODUCTS RD VELLEY COTTAGE NY 10989 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$999.60
3.206.	Nonpriority creditor's name and mailing address FELLSWAY ASSOCIATES, LLC PO BOX 842368 BOSTON MA 02284-2368 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$75,615.47
3.207.	Nonpriority creditor's name and mailing address FIA CARD SERVICES P.O. BOX 15019 WILMINGTON DE 15019 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.208.	Nonpriority creditor's name and mailing address FIG DESIGNS 1412 DUNN DR. CARROLLTON TX 75006 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$937.20
3.209.	Nonpriority creditor's name and mailing address FIREFLY STORE SOLUTIONS 4500 S HOLDEN RD GREENSBORO NC 27406 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,414.20
3.210.	Nonpriority creditor's name and mailing address FISH OF LEOMINSTER P.O. BOX 1403 LEOMINSTER MA 01453 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,006.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.211.	Nonpriority creditor's name and mailing address FISH OF WOBURN P.O. BOX 242 WOBURN MA 01801 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,571.00
3.212.	Nonpriority creditor's name and mailing address FISH WINDOW P.O. BOX 302 RIVERDALE NJ 07457 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$303.60
3.213.	Nonpriority creditor's name and mailing address FISH WINDOW P.O. BOX 188 WHARTON NJ 07885 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$366.35

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.214.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING P.O. BOX 286 AMESBURY MA 01913 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$261.00
3.215.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING 594 FEDERAL RD, BLDG 1, UNIT 1A BROOKFIELD CT 06804 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$298.21
3.216.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING P.O. BOX 261 HOPEDALE MA 01747 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$139.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.217.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING 649 EAST INDUSTRIAL PARK SUITE 16 MANCHESTER NH 03109 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$166.00
3.218.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING P.O. BOX 515 SOMERSET MA 02726 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$311.00
3.219.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING 167 WASHINGTON SUITE 47 NORWELL MA 02061 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$115.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.220.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING P.O. BOX 934 PORT CHESTER NY 10573 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$387.11
3.221.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING P.O. BOX 1738 SACO ME 04072 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$100.00
3.222.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING P.O. BOX 475 WALLINGFORD CT 06492 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$793.38

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.223.	Nonpriority creditor's name and mailing address FISH WINDOW CLEANING P.O. BOX 870 WINDSOR LOCKS CT 06096 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$352.93
3.224.	Nonpriority creditor's name and mailing address FJALLRAVEN NORTH AMERICA 1900 TAYLOR AVENUE LOUISVILLE CO 80027 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,616.24
3.225.	Nonpriority creditor's name and mailing address FK PARTNERS AHOLD FINANCIAL SERVICES AHOLD DELHAIZE; DAVID HOUGH 1385 HANCOCK ST QUINCY MA 02169 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.226.	Nonpriority creditor's name and mailing address FLASH SALES 4401 NW 167TH ST MIAMI FL 33055 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,410.00
3.227.	Nonpriority creditor's name and mailing address FLOSS & ROCK 7 OLYMPIC COURT WHITE HILLS BUSINESS PARK BLACKPOOL FY4 5GU 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,154.88
3.228.	Nonpriority creditor's name and mailing address FORD MOTOR CREDIT LEGAL DEPARTMENT BANKRUPTCY GROUP 1 AMERICAN RD DEARBORN MI 48126-2701 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.229.	Nonpriority creditor's name and mailing address FOREVER COLLECTIBLES 11 ELKINS RD. E. BRUNSWICK NJ 08816 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.230.	Nonpriority creditor's name and mailing address FOREVER SWEET PO BOX 86 WALNUT CREEK OH 44687 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,780.00
3.231.	Nonpriority creditor's name and mailing address FORMATION BRANDS LLC FORMATION BRANDS, LLC P.O. BOX 505361 ST. LOUIS MO 63150-5361 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,493.60

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.232.	Nonpriority creditor's name and mailing address FOTO ELECTRIC SUPPLY COMP 1 REWE ST BROOKLYN NY 11211 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,979.00
3.233.	Nonpriority creditor's name and mailing address FOUNDER INVESTOR CO., INC. ATTENTION: TOM ANDERSON 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred 8/9/2019 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: PROMISSORY NOTE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,980,000.00
3.234.	Nonpriority creditor's name and mailing address FOUNDER INVESTOR CO., INC. ATTENTION: TOM ANDERSON 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred 9/29/2014 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: PROMISSORY NOTE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$42,158,874.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.235.	Nonpriority creditor's name and mailing address FRAGRANCES OF IRELAND 668 N. COAST HIGHWAY SUITE 1207 LAGUNA BEACH CA 92651 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$13,094.16
3.236.	Nonpriority creditor's name and mailing address FRANKLIN SPORTS INC. P.O. BOX 4808 BOSTON MA 02212-4808 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,448.19
3.237.	Nonpriority creditor's name and mailing address FRED CH 17745 PALATINE IL 60055-7745 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,391.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.238.	Nonpriority creditor's name and mailing address FRENZY JEWELS INC 305 NORTHERN BLVD SUITE 105 GREAT NECK NY 11021 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,112.00
3.239.	Nonpriority creditor's name and mailing address FRINGE STUDIO, LLC P.O. BOX 3663 CULVER CITY CA 90231-3663 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,073.60
3.240.	Nonpriority creditor's name and mailing address FUN CLUB LLC 2122 MYRTLE AVE MONROVIA CA 91016 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,720.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.241.	Nonpriority creditor's name and mailing address G&H STAFFING COMPANIES, LLC 225 VISCOLOID AVE LEOMINSTER MA 01453 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,790.96
3.242.	Nonpriority creditor's name and mailing address G.W. SHAW & SON, INC. 124 OLD WILTON ROAD GREENVILLE NH 03048 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$439.40
3.243.	Nonpriority creditor's name and mailing address GANZ 140 COLONY CENTER DRIVE SUITE 100 WOODSTOCK GA 30188 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$36,380.32

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.244.	Nonpriority creditor's name and mailing address GAR2ART COSMETICS 1516 CENTRAL AVE COLUMBUS IN 47201 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.245.	Nonpriority creditor's name and mailing address GARDEN CITY OWNER LLC PO BOX 845254 BOSTON MA 02284-5254 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$37,165.46
3.246.	Nonpriority creditor's name and mailing address GENWORTH LIFE INSURANCE COMPANY 3100 ALBERT LANKFORD DR LYNCHBURG VA 24501 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.247. Nonpriority creditor's name and mailing address GEOCENTRAL 6049 HI-TEK COURT MASON OH 45040-2603	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$3,580.74
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.248. Nonpriority creditor's name and mailing address GERSON COMPANY P.O. BOX 1209 OLATHE KS 66051-1209	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$8,595.84
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.249. Nonpriority creditor's name and mailing address GERTEX USA INC 9 DENSLEY AVE TORONTO ON M6M2P5 CANADA	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$972.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.250.	Nonpriority creditor's name and mailing address GET-A-CAN 278-282 WEST RAILWAY AVENUE PATERSON NJ 07503 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$70.21
3.251.	Nonpriority creditor's name and mailing address GGP-MAINE MALL LLC 364 MAINE MALL ROAD GENERAL GROWTH MGMT OFFICE SOUTH PORTLAND ME 04106 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$60,280.93
3.252.	Nonpriority creditor's name and mailing address G-III SPORTS PO BOX 29242 NEW YORK NY 10087-9242 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,820.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.253.	Nonpriority creditor's name and mailing address GILLI CLOTHING DEPT LA 24406 PASADENA CA 91185-4406 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$106,596.50
3.254.	Nonpriority creditor's name and mailing address GLASTONBURY MZL LLC C/O KATZ PROPERTIES A/R 254 WEST 31ST STREET 4TH FLOOR NEW YORK NY 10001 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,473.53
3.255.	Nonpriority creditor's name and mailing address GLY INC PO BOX 741084 LOS ANGELES CA 90074-1084 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,100.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.256.	Nonpriority creditor's name and mailing address GMC PO BOX 78143 PHOENIX AZ 85034-9700 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.257.	Nonpriority creditor's name and mailing address GODIVA CHOCOLATIER, INC. P.O. BOX 74008044 CHICAGO IL 60674-8044 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$99,186.28
3.258.	Nonpriority creditor's name and mailing address GOOGLE DEPT. 33654 PO BOX 39000 SAN FRANCISCO CA 94139 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$104,732.49

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.259.	Nonpriority creditor's name and mailing address GRACE HARVEST& ASSOCIATES LLC 221 AW 41ST STREET RENTON WA 98057 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,641.60
3.260.	Nonpriority creditor's name and mailing address GRAND FUSION HOUSEWARES, INC 12 PARTRIDGE IRVINE CA 92612 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$22,675.50
3.261.	Nonpriority creditor's name and mailing address GRAPHIQUE DE FRANCE P.O. BOX 845846 BOSTON MA 02284-5846 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,303.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.262.	Nonpriority creditor's name and mailing address GREAT BROOK REAL ESTATE 40 GREAT BOROK PATH CARLISLE MA 01741 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,100.00
3.263.	Nonpriority creditor's name and mailing address GREAT FINDS, INC. 32286 3RD STREET HOLMESVILLE NE 68310 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,206.90
3.264.	Nonpriority creditor's name and mailing address GREAT ROAD SHOPPING CTR. 144 GOULD STREET SUITE 206 NEEDHAM MA 02494 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$63,876.44

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.265.	Nonpriority creditor's name and mailing address GREENWICH BAY TRADING CO 5809 TRIANGLE DR RALEIGH NC 27617 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,742.20
3.266.	Nonpriority creditor's name and mailing address HACHETTE BOOK GROUP P.O. BOX 8828 BOSTON MA 02114-8828 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$31,802.31
3.267.	Nonpriority creditor's name and mailing address HALLMARK CARDS, INC. P.O. BOX 73642 CHICAGO IL 60673-7642 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$910,486.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.268.	Nonpriority creditor's name and mailing address HALLMARK RETAIL, LLC 2501 MCGEE PO BOX 419580 MD 851 KANSAS CITY MO 64141-6580 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$15,825.56
3.269.	Nonpriority creditor's name and mailing address HALLMARK RETAIL, LLC 2501 MCGEE PO BOX 419580 MD 851 KANSAS CITY MO 64141-6580 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,934.38
3.270.	Nonpriority creditor's name and mailing address HALLMARK RETAIL, LLC 2501 MCGEE PO BOX 419580 MD 851 KANSAS CITY MO 64141-6580 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$39,455.01

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.271. Nonpriority creditor's name and mailing address HALLMARK RETAIL, LLC 2501 MCGEE PO BOX 419580 MD 851 KANSAS CITY MO 64141-6580 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$45,823.00
3.272. Nonpriority creditor's name and mailing address HALLMARK RETAIL, LLC 2501 MCGEE PO BOX 419580 MD 851 KANSAS CITY MO 64141-6580 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$49,865.59
3.273. Nonpriority creditor's name and mailing address HALLMARK RETAIL, LLC 2501 MCGEE PO BOX 419580 MD 851 KANSAS CITY MO 64141-6580 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$79,273.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.274. Nonpriority creditor's name and mailing address HAMILTON, BROOK, SMITH & REYNOLDS, P.C. 530 VIRGINIA ROAD CONCORD MA 01742 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,627.00
3.275. Nonpriority creditor's name and mailing address HANESBRANDS INC 1000 EAST HANES MILL ROAD WINSTON-SALEM NC 27105 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,008.22
3.276. Nonpriority creditor's name and mailing address HANGZHOU QIANXIANG IMPORT&EXPORT CO., LTD NO.1 XINSHI ROAD, TONGLU HANGZHOU 311504 CHINA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.277. Nonpriority creditor's name and mailing address HANNAFORD BROS. CO., LLC C/O RETAIL BUSINESS SERVICES P.O. BOX 744587 ATLANTA GA 30374-4587 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,509.46
3.278. Nonpriority creditor's name and mailing address HANOVER INSURANCE P.O. BOX 580045 CHARLOTTE NC 28258-0045 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$400.00
3.279. Nonpriority creditor's name and mailing address HARBOURVEST/NYSTRS CO-INVEST FUND II, L.P. HARVOURVEST PARTNERS, LLC MICHAEL GUINNESS VICE PRESIDENT 1 FINANCIAL CTR STE 4401 BOSTON MA 02111 Date or dates debt was incurred 8/9/2019 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: PROMISSORY NOTE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$331,148.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.280.	Nonpriority creditor's name and mailing address HARMAN INTERNATIONAL INDUSTRIES, INC P.O. BOX 4424 CHURCH STREET STATION NEW YORK NY 10261-4424 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.281.	Nonpriority creditor's name and mailing address HARPER COLLINS PUBLISHERS P.O. BOX 360846 PITTSBURGH PA 15251-6846 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$68.41
3.282.	Nonpriority creditor's name and mailing address HEM AND THREAD PO BOX 847172 LOS ANGELES CA 90084 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$33,377.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.283.	Nonpriority creditor's name and mailing address HERSCHEL SUPPLY COMPANY LTD. #327-611 ALEXANDER ST. VANCOUVER BC V6A 1E1 CANADA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$15,156.37
3.284.	Nonpriority creditor's name and mailing address HEYSON 1218 S. BOYLE AVE LOS ANGELES CA 90023 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,399.00
3.285.	Nonpriority creditor's name and mailing address HINGHAM LIGHT P.O. BOX 4132 WOBURN MA 01888-4132 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,181.22

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.286.	Nonpriority creditor's name and mailing address HOG WILD, INC. 10145 SE JENNIFER ST CLACKAMAS OR 97015 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.287.	Nonpriority creditor's name and mailing address HOLLIS HAYES JEWELRY 11 WILLIAMS STREET QUINCY MA 02171 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,223.00
3.288.	Nonpriority creditor's name and mailing address HOME FIRST LLC 55 SE SECOND AVE STE 409 DELRAY BEACH FL 33444 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.289.	Nonpriority creditor's name and mailing address HORIZON GROUP USA PO BOX 5467 CAROL STREAM IL 60197 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$670.68
3.290.	Nonpriority creditor's name and mailing address HOT FOCUS INC 510 S. MAGNOLIA AVE ONTARIO CA 91762-4015 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.291.	Nonpriority creditor's name and mailing address HOUGHTON MIFFLIN HARCOURT HM RECEIVABLES CO LLC 14046 COLLECTIONS CENTER DRIVE CHICAGO IL 60693 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,079.03

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.292.	Nonpriority creditor's name and mailing address HUDSON LIGHT AND POWER PO BOX 844568 BOSTON MA 02284 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,509.62
3.293.	Nonpriority creditor's name and mailing address HYDRO FLASK PO BOX 741037 LOS ANGELES CA 90074-1037 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$20,838.00
3.294.	Nonpriority creditor's name and mailing address HYGGE GAMES C/O KYLSKAPSPONESI OLAIGATAN 19 OREBRO 70361 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,667.92

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.295.	Nonpriority creditor's name and mailing address I LUV CREATIVE TECHNOLOGY 2 HARBOR PARK DR. PORT WASHINGTON NY 11050 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.296.	Nonpriority creditor's name and mailing address IDECOZ PO BOX 716, MIDTOWN STATION NEW YORK NY 10018-0716 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,183.95
3.297.	Nonpriority creditor's name and mailing address IDNA SERIES LLC 2510 E.CENTER ST WARSAW IN 46580 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,764.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.298.	Nonpriority creditor's name and mailing address INDEPENDENT PUBLISHERS GROUP PO BOX 2154 BEDFORD PARK IL 60499-2154 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,621.00
3.299.	Nonpriority creditor's name and mailing address INGRAM PUBLISHER SERVICES INC 15636 COLLECTION CENTER DRIVE CHICAGO IL 60693 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$480.55
3.300.	Nonpriority creditor's name and mailing address INLAND COMMERCIAL REAL ESTATE SERVICES 62903 COLLECTION CENTER DRIVE CHICAGO IL 60693-0629 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$40,661.36

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.301. Nonpriority creditor's name and mailing address INLAND NATIONAL REAL ESTATE SERVICES LLC 62903 COLLECTION CENTER DRIVE BLDG # 75051 CHICAGO IL 60693-0629 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$63,383.21
3.302. Nonpriority creditor's name and mailing address INLAND TIOL REAL ESTATE SERVICES, LLC 62903 COLLECTION CTR DR BLDG #75051 CHICAGO IL 60693-0629 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.303. Nonpriority creditor's name and mailing address INTELEX USA 105 PRARIE LAKE ROAD UNIT D EAST 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$20,466.91

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.304.	Nonpriority creditor's name and mailing address INTELLIGENT CHANGE INC 510-1121 STEELES AVE WEST TORONTO ON M2R3W7 CANADA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,704.34
3.305.	Nonpriority creditor's name and mailing address INTERNATIONAL GREETINGS USA DEPT. 3698 PO BOX 123698 DALLAS TX 75312-3698 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,213.05
3.306.	Nonpriority creditor's name and mailing address INTEX ENTERTAINMENT 100 CHURCH STREET MILLERSBURG PA 17061 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,192.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.307. Nonpriority creditor's name and mailing address IREIT SHREWSBURY WHITE CITY LLC 62903 COLLECTION CENTER DRIVE BUILDING 75043 CHICAGO IL 60693-0629	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$103,794.58
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.308. Nonpriority creditor's name and mailing address ISTORAGE 62903 COLLECTION CENTER DR CHICAGO IL 60693-0629	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$0.00
Date or dates debt was incurred _____	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.309. Nonpriority creditor's name and mailing address IVORY ELLA LLC 89 TOM HARVEY RD WESTERLY RI 02891	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$55,142.35
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.310.	Nonpriority creditor's name and mailing address IWINE HK LIMITED RM 1605 HO KING COMM CTR 2-16 FAYUEN ST MONGKOK KLN HONG KONG 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.311.	Nonpriority creditor's name and mailing address J&D BRUSH COMPANY LLC 5 ADAMS AVE HAUPPAUGE NY 11788 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,350.40
3.312.	Nonpriority creditor's name and mailing address JANE MARIE JEWERLY 3172 HIGHWAY 167 DUBACH LA 71235 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,331.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.313.	Nonpriority creditor's name and mailing address JASMINE TRADING CORP 17-10 FLUSHING AVE #2 RIDGEWOOD NY 11385 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$24,450.50
3.314.	Nonpriority creditor's name and mailing address JELLY BELLY CANDY COMPANY P.O. BOX 742799 LOS ANGELES CA 90074-2799 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,133.87
3.315.	Nonpriority creditor's name and mailing address JELLYCAT, INC. 800 WASHINGTON AVE. N. SUITE 303 MINNEAPOLIS MN 55401 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$50,896.57

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.316. Nonpriority creditor's name and mailing address JER REALTY LLC 70 HASTINGS STREET WELLESLEY HILLS MA 02481	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$113,366.56
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.317. Nonpriority creditor's name and mailing address JERSEY CENTRAL POWER AND LIGHT PO BOX 3687 AKRON OH 44309	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,009.51
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.318. Nonpriority creditor's name and mailing address JET SANITATION SERVICE CORP 228 BLYDENBURGH RD ISLANDIA NY 11749	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,410.88
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.319.	Nonpriority creditor's name and mailing address JOHN N. HANSEN CO., INC. 369 ADRIAN ROAD MILLBRAE CA 94030-3104 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,488.00
3.320.	Nonpriority creditor's name and mailing address JOHN'S SEWER & PIPE CLEANING, INC. 4 BREED AVENUE WOBURN MA 01801 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$264.00
3.321.	Nonpriority creditor's name and mailing address JOHNSON & JOHNSON LEGAL DEPARTMENT BANKRUPTCY GROUP 1 JOHNSON AND JOHNSON PLZ NEW BRUNSWICK NJ 08933 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.322. Nonpriority creditor's name and mailing address JOHNSON CONTROLS FIRE PROTECTION LP DEPT. CH 10320 PALATINE IL 60055-0320	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$124.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.323. Nonpriority creditor's name and mailing address JOLIE 1100 S.SAN PEDRO ST # D3 LOS ANGELES CA 90015	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$226,527.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.324. Nonpriority creditor's name and mailing address JON BARGAINS INC 11 DINEV RD UNIT 303 MONROE NY 10950	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,720.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.325.	Nonpriority creditor's name and mailing address JONES' RUSTIC SIGN CO. 2758 VIKING LANE DAYTON OH 45439 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,762.80
3.326.	Nonpriority creditor's name and mailing address JOSEPH D'AREZZO 2900 E. 11TH STREET LOS ANGELES CA 90023 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,000.00
3.327.	Nonpriority creditor's name and mailing address JOSEPH'S LOCK & SAFE COMPANY 55 GREEN STREET WORCESTER MA 01604-4109 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$117.88

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.328.	Nonpriority creditor's name and mailing address JOYFUL JEWELRY, INC 175 BERGEN BLVD., SUITE2 FAIRVIEW NJ 07022 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,700.00
3.329.	Nonpriority creditor's name and mailing address JPMORGAN CHASE BANK PO BOX 15918 WILMINGTON DE 19850 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$15,787.28
3.330.	Nonpriority creditor's name and mailing address JUKA INNOVATIONS CORPORATION 40 GAZZA BLVD. FARMINGDALE NY 11735 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$879.84

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.331.	Nonpriority creditor's name and mailing address JUSTDO INDUSTRIAL CO., LTD UNIT 04, 7/F BRIGHT WAY TOWER, NO 33 MONG KOK ROAD KOWLOON HONG KONG 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$35,318.60
3.332.	Nonpriority creditor's name and mailing address KAHOOTZ TOYS 772 AIRPORT BLVD, STE 1 ANN ARBOR MI 48108 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.333.	Nonpriority creditor's name and mailing address KAN JAM LLC PO BOX 864 GETZVILLE NY 14068 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,780.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.334.	Nonpriority creditor's name and mailing address KARMA GIFTS 4302 IRONTON AVE LUBBOCK TX 79407 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.335.	Nonpriority creditor's name and mailing address KAY BERRY 6301 NORTH NOAH DRIVE SAXONBURG PA 16056 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,313.68
3.336.	Nonpriority creditor's name and mailing address KAY DEE DESIGNS P.O. BOX 845171 BOSTON MA 02284-5171 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$24,911.55

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.337. Nonpriority creditor's name and mailing address KEAVENEY, JANE Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: WORKERS COMPENSATION CLAIM Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED
3.338. Nonpriority creditor's name and mailing address KELLYTOY 4811 S ALAMEDA STREET LOS ANGELES CA 90058 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,804.00
3.339. Nonpriority creditor's name and mailing address KENDRA SCOTT DESIGN LOCKBOX 840838 1950 N. STEMMONS FREEWAY, SUITE 5010 DALLAS TX 75207 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$18,081.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.340.	Nonpriority creditor's name and mailing address KEREN HART, LTD 821 E. MONROE STREET PO BOX 493 HERRIN IL 62948 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$56,173.83
3.341.	Nonpriority creditor's name and mailing address KETER ENVIRONMENTAL PO BOX 417468 BOSTON MA 02241-7468 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,087.90
3.342.	Nonpriority creditor's name and mailing address KIDS PREFERRED, LLC. P.O. BOX 150290 OGDEN UT 84415-0290 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,573.40

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.343. Nonpriority creditor's name and mailing address KIKKERLAND DESIGN INC. C/O JP MORGAN CHASE P.O. BOX 30892 NEW YORK NY 10087-0892	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$3,296.64
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.344. Nonpriority creditor's name and mailing address KIOP BRANFORD, LLC PO BOX 62045 NEWARK NJ 07101	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$0.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.345. Nonpriority creditor's name and mailing address KLUTZ P.O. BOX 416851 BOSTON MA 02241-6851	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$14,801.96
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.346.	Nonpriority creditor's name and mailing address KNOCK KNOCK 11111 JEFFERSON BLVD. #5167 CULVER CITY CA 90231 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.347.	Nonpriority creditor's name and mailing address KR STRATFORD LLC C/O BRIXMOR PROPERTY GROUP PO BOX 645324 CINCINNATI OH 45264-5324 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$22,856.83
3.348.	Nonpriority creditor's name and mailing address KRINGLE CANDLE COMPANY 31 KRINGLE DRIVE BERNARDSTON MA 01337 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$49,652.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.349.	Nonpriority creditor's name and mailing address KRONOS INCORPORATED PO BOX 743208 ATLANTA GA 30374-3208 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,844.00
3.350.	Nonpriority creditor's name and mailing address KYNC DESIGNS, LLC 201 PENHORN AVE SUITE 1 SECAUCUS NJ 07074 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.351.	Nonpriority creditor's name and mailing address LANE TANNER DESIGNS LLC DBA FOTERRA JEWELRY 962 SPENCER STREET HONOLULU HI 96822 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$16,095.24

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.352.	Nonpriority creditor's name and mailing address LANI CORP. 1015 S.CROCKER ST. #Q-8 LOS ANGELES CA 90021 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.353.	Nonpriority creditor's name and mailing address LANTERN ENTERPRISES 1401 CEDAR STREET, STE. C ONTARIO CA 91761 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$145,322.40
3.354.	Nonpriority creditor's name and mailing address LAON FASHION CORP 450 MURRAY HILL PARKWAY UNIT E, EAST RUTHERFORD NJ 07073 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,400.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.355.	Nonpriority creditor's name and mailing address LAX GADGET GROUP INC 32-10 57TH STREET WOODSIDE NY 11377 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,435.60
3.356.	Nonpriority creditor's name and mailing address LAZY ONE 2885 NORTH 200 WEST NORTH LOGAN UT 84341 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,695.14
3.357.	Nonpriority creditor's name and mailing address LEASE QUERY ALANA BERLIN 3 RAVINIA DRIVE NE STE P7 ATLANTA GA 30346 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.358. Nonpriority creditor's name and mailing address LEAVE ITTO ME EVENT PLANNING 23 FIELDSTONE DRIVE HOLLIS NH 03049 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$672.00
3.359. Nonpriority creditor's name and mailing address LED COSMETICS INC 556 NORTH DIAMOND BAR BLVD UNIT #101 DIAMOND BAR CA 91765 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.360. Nonpriority creditor's name and mailing address LEE PUBLICATIONS 1100 W. BROADWAY P.O. BOX 32120 LOUISVILLE KY 40232-2120 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,909.81

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.361.	Nonpriority creditor's name and mailing address LEEMODE INTERNATIONAL INC. 60 COMMERCE WAY HACKENSACK NJ 07601 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$18,114.50
3.362.	Nonpriority creditor's name and mailing address LEGACY PLACE PROPERTIES LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$94,043.26
3.363.	Nonpriority creditor's name and mailing address LEGO SYSTEMS, INC. 555 TYLOR RD ENFIELD CT 06082 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.364.	Nonpriority creditor's name and mailing address LEMON & LIMES UNIT 2342 SPORTSMEN HILL CHESTERFIELD MO 63017 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.365.	Nonpriority creditor's name and mailing address LENOX CORPORATION PO BOX 781075 PHILADELPHIA PA 19178-1075 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.366.	Nonpriority creditor's name and mailing address LIBERTY UTILITIES GAS 75 REMITTANCE DRIVE, SUITE 1032 CHICAGO IL 60675 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$282.35

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.367.	Nonpriority creditor's name and mailing address LIFE IS GOOD, INC. 15 HUDSON PARK DRIVE HUDSON NH 03051 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$138,217.12
3.368.	Nonpriority creditor's name and mailing address LIFEGUARD PRESS 134 BEECH BEND RD. BOWLING GREEN KY 42101-2609 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$248,489.46
3.369.	Nonpriority creditor's name and mailing address LIFETIME BRANDS 1000 STEWART AVENUE GARDEN CITY NY 11530 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,320.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.370.	Nonpriority creditor's name and mailing address LILLIAN ROSE P.O. BOX 250 MUKWONAGO WI 53149-0250 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.02
3.371.	Nonpriority creditor's name and mailing address LITTLE KIDS 1015 NEWMAN AVENUE SEEKONK MA 02771 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,456.60
3.372.	Nonpriority creditor's name and mailing address LOGICAL POSITION, LLC 4350 GALEWOOD ST LAKE OSWEGO OR 97035 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,834.72

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.373.	Nonpriority creditor's name and mailing address LOKAI 180 VARICK STREET, SUITE 504 NEW YORK NY 10016 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.374.	Nonpriority creditor's name and mailing address LOOK ABOVE LLC 4 BARBARA PLACE WILMINGTON DE 19808 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.375.	Nonpriority creditor's name and mailing address LOOMIS DEPT. CH 10500 PALATINE IL 60055-0500 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$408.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.376.	Nonpriority creditor's name and mailing address LOPRESTI & SONS CARTING, INC. PO BOX 108 WEST REDDING CT 06896 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$690.58
3.377.	Nonpriority creditor's name and mailing address LOTUS AND LUNA 1552 GARNET AVE SAN DIEGO CA 92109 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$219,525.25
3.378.	Nonpriority creditor's name and mailing address LOTUS LIGHT DISTRIBUTING PO BOX 1008 SILVER LAKE WI 53170 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,980.10

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.379.	Nonpriority creditor's name and mailing address LP INNOVATIONS INC. PO BOX 269078 OKLAHOMA CITY OK 73126-9078	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$21,156.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.380.	Nonpriority creditor's name and mailing address LTV WHOLESALE & IMPORTER, LLC 101 AGENCY AVENUE RICHMOND VA 23225	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,091.30
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.381.	Nonpriority creditor's name and mailing address LUCA+DANNI, LLC 838 DYER AVENUE CRANSTON RI 02920	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$18,162.05
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.382.	Nonpriority creditor's name and mailing address LUCKIES OF LONDON UNITS 24/25, THE TAY BUILDING 2A WRENTHAM AVENUE LONDON NW103HA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$756.00
3.383.	Nonpriority creditor's name and mailing address M&S ACCESSORY NETWORK PO BOX 1036 CHARLOTTE NC 28201 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$661.50
3.384.	Nonpriority creditor's name and mailing address MA RETAIL MERCHANTS WC GROUP INC. PO BOX 859222-9222 BRAINTREE MA 02185 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.385.	Nonpriority creditor's name and mailing address MAGINATION PRESS 750 FIRST STREET NE WASHINGTON DC 20002 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$183.74
3.386.	Nonpriority creditor's name and mailing address MAGNET WORKS, LTD PO BOX 790372 ST. LOUIS MO 63179-0372 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$13,887.00
3.387.	Nonpriority creditor's name and mailing address MALDEN INTERNATIONAL DESIGNS 19 COWAN DRIVE MIDDLEBORO MA 02346 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$143,865.06

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.388.	Nonpriority creditor's name and mailing address MANSFIELD MUNICIPAL ELECTRIC PO BOX 9192 CHELSEA MA 02150-9192 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,448.46
3.389.	Nonpriority creditor's name and mailing address MANTRABAND LLC 14 MONARCH BAY PLAZA # 395 MONARCH BEACH CA 92629 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$68,382.00
3.390.	Nonpriority creditor's name and mailing address MAR COMPANY DISTRIBUTOS 1800 NW 79TH AVE DORAL FL 33126 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,480.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.391.	Nonpriority creditor's name and mailing address MARIPOSA 5 ELM STREET MANCHESTER MA 01944 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$32,863.83
3.392.	Nonpriority creditor's name and mailing address MARKEL AMERICAN INSURANCE CO. LEGAL DEPARTMENT BANKRUPTCY GROUP 10275 W HIGGINS RD STE 750 ROSEMONT IL 60018 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.393.	Nonpriority creditor's name and mailing address MARKET STREET RETAIL SOUTH LLC PO BOX 842375 BOSTON MA 02284-2375 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$61,917.71

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.394.	Nonpriority creditor's name and mailing address MARKETING RESULTS, INC 3985 GROVES RD. COLUMBUS OH 43232 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.395.	Nonpriority creditor's name and mailing address MARSH & MCLENNAN AGENCY LLC 100 FRONT STREET, SUITE 800 WORCESTER MA 01608 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$15,900.00
3.396.	Nonpriority creditor's name and mailing address MARTIN, PATRICK Address Intentionally Omitted Date or dates debt was incurred MARCH 2017 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☒ Disputed Basis for the claim: LITIGATION Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.397.	Nonpriority creditor's name and mailing address MARY MEYER CORP. ROUTE 30 P.O. BOX 275 TOWNSHEND VT 05353 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$25,812.54
3.398.	Nonpriority creditor's name and mailing address MARY SQUARE LLC 2045 E. HIGHWAY 380 SUITE 500 DECTUR TX 76234 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$33,594.40
3.399.	Nonpriority creditor's name and mailing address MARYLAND BRAND MANAGEMENT 6500 QUAD AVE. BALTIMORE MD 21205 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,922.79

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.400.	Nonpriority creditor's name and mailing address MASTERPIECES PUZZLE COMPANY, INC. 39313 TREASURY CENTER CHICAGO IL 60694-9300 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,678.80
3.401.	Nonpriority creditor's name and mailing address MATCH UP PROMOTIONS 975 FLORIDA CENTRAL PARKWAY # 1900 LOGWOOD FL 32750 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,000.32
3.402.	Nonpriority creditor's name and mailing address MATTHEWS TRUCK SERVICE & TOWING 29 LEGATE HILL ROAD STERLING MA 01564 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,867.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.403.	Nonpriority creditor's name and mailing address MAVI BANDZ 803 DIAMOND HEAD DR. W SHOREWOOD IL 60404 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$23,102.50
3.404.	Nonpriority creditor's name and mailing address MAX SALES 15240 EAST NELSON AVE 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$603.00
3.405.	Nonpriority creditor's name and mailing address MAYER, MAYER & MAYER, LP 325 S SIERRA AVE #40 SOLANA BEACH CA 92075 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.406.	Nonpriority creditor's name and mailing address MAYFLOWER DISTRIBUTING CO., INC. 1155 MEDALLION DRIVE MENDOTA HEIGHTS MN 55120 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,649.96
3.407.	Nonpriority creditor's name and mailing address MAYFLOWER SOLOMON POND 14199 COLLECTIONS CENTER DRIVE CHICAGO IL 60693 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$66,553.91
3.408.	Nonpriority creditor's name and mailing address MAYNARD SUPPLY CO., INC. 145 POWDERMILL ROAD MAYNARD MA 01754 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,205.74

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.409.	Nonpriority creditor's name and mailing address MCCC SPORTSWEAR 9944 PRINCETON-GLENDALE ROAD CINCINNATI OH 45246 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,600.00
3.410.	Nonpriority creditor's name and mailing address MCCUBBIN HOSIERY, LLC P.O. BOX 677062 DALLAS TX 75267-7062 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$26,643.17
3.411.	Nonpriority creditor's name and mailing address MELISSA & DOUG, LLC P.O. BOX 590 WESTPORT CT 06881 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,620.08

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.412.	Nonpriority creditor's name and mailing address MEMIC INDEMNITY COMPANY P.O. BOX 9500 LEWISTON ME 04243 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$17,312.50
3.413.	Nonpriority creditor's name and mailing address MG PARTNERS LLP/FASHION ANGELS 306 N. MILWAUKEE STREET MILWAUKEE WI 53202 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,530.40
3.414.	Nonpriority creditor's name and mailing address MICHEL DESIGN WORKS PO BOX 1227 OCALA FL 34478 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$44,154.65

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.415. Nonpriority creditor's name and mailing address MICROSOFT ONLINE 6100 NEIL ROAD STE 100 RENO NV 89511	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$22,842.97
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.416. Nonpriority creditor's name and mailing address MIDWEST TRADING GROUP INC. 1400 CENTRE CIRCLE DOWNERS GROVE IL 60515	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,632.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.417. Nonpriority creditor's name and mailing address MILA WHOLESALE 5818 W SPRING MOUNTAIN RD., SUITE 216 LAS VEGAS NV 89146	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$540.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.418.	Nonpriority creditor's name and mailing address MINDWARE WHOLESALE DIVISION PO BOX 310482 DES MONIES IA 50331-0482 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,778.40
3.419.	Nonpriority creditor's name and mailing address MINES PRESS/ISCREAM 231 CROTON AVENUE CORTLANDT MANOR NY 10568 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$28,588.00
3.420.	Nonpriority creditor's name and mailing address MISIA PO BOX 741084 LOS ANGELES CA 90074-1084 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$32,341.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.421.	Nonpriority creditor's name and mailing address MIVA INC. 16745 WEST BERNARDO DRIVE SUITE 400 SAN DIEGO CA 92127 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,625.00
3.422.	Nonpriority creditor's name and mailing address MJC CONFECTIONS, LLC 225 W. 35TH STREET NEW YORK NY 10001 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,516.40
3.423.	Nonpriority creditor's name and mailing address MMS TRADING INC 6259 BANDINI BLVD COMMERCE CA 90040 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.424.	Nonpriority creditor's name and mailing address MOA MOA, INC. DBA OCALM 1215 WEST WALNUT STREET COMPTON CA 90220 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$70.00
3.425.	Nonpriority creditor's name and mailing address MODERN SPROUT 2010 W FULTON ST, F-313 CHICAGO IL 60612 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,037.13
3.426.	Nonpriority creditor's name and mailing address MOLE HOLLOW CANDLES PO BOX 223 STURBRIDGE MA 01566 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,692.40

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.427. Nonpriority creditor's name and mailing address MOONGLOW JEWELRY 5183 NW 74TH AVE MIAMI FL 33166	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$36,548.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.428. Nonpriority creditor's name and mailing address MPS 16365 JAMES MADISON HWY GORDONSVILLE VA 22942	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim UNKNOWN
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.429. Nonpriority creditor's name and mailing address MRS. GROSSMAN'S PAPER CO. 3810 CYPRESS DRIVE PETALUMA CA 94954	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,179.12
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.430.	Nonpriority creditor's name and mailing address MTS ADVISORY LLC MICHAEL T SULLIVAN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.431.	Nonpriority creditor's name and mailing address MUD PIE/ FLEUR DE LIS 4893 LEWIS RD SUITE A STONE MOUNTAIN GA 30083 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$91,193.18
3.432.	Nonpriority creditor's name and mailing address MUKIKIM, LLC 6812 W CALUMET ROAD MILWAUKEE WI 53223 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.433.	Nonpriority creditor's name and mailing address MULBERRY STUDIOS P.O. BOX 969 TYRONE GA 30290 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$8,633.06
3.434.	Nonpriority creditor's name and mailing address MUSEE BATH LLC 350 INDUSTRIAL DRIVE MADISON MS 39110 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,386.00
3.435.	Nonpriority creditor's name and mailing address MUTUAL SALES INC 2 CORPORATE PARK DRIVE DERRY NH 03038 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.436.	Nonpriority creditor's name and mailing address MY BELOVED 1015 S.CROCKER ST #S04 LOS ANGELES CA 90021 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,007.25
3.437.	Nonpriority creditor's name and mailing address MY SAINT MY HERO 2515 S.WESTERN AVE., SUITE 210B SAN PEDRO CA 90732 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$16,226.63
3.438.	Nonpriority creditor's name and mailing address MY WORD! PLEASANT STREET DESIGNS 1 AEGEAN DRIVE METHUEN MA 01844 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$16,102.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.439.	Nonpriority creditor's name and mailing address MYSTIC KNOTWORK LLC 25 COTTRELL ST MYSTIC CT 06355 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,200.00
3.440.	Nonpriority creditor's name and mailing address NAKED BEE PO BOX 33449 SAN DIEGO CA 92163-3449 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$32,981.40
3.441.	Nonpriority creditor's name and mailing address NAME BADGE PRODUCTIONS 3220 DEMING WAY MIDDLETON WI 53562 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.442.	Nonpriority creditor's name and mailing address NARRAGANSETT RUBBISH REMOVAL INC. 11 WALT'S WAY NARRAGANSETT RI 02882 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$84.01
3.443.	Nonpriority creditor's name and mailing address NASSAU CANDY 530 W JOHN STREET HICKSVILLE NY 11801 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,973.84
3.444.	Nonpriority creditor's name and mailing address NATIONAL BOOK NETWORK, INC P.O. BOX 536139 PITTSBURGH PA 15253-5903 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,163.08

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.445.	Nonpriority creditor's name and mailing address NATIONAL FUEL 6363 MAIN ST WILLIAMSVILLE NY 14221	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$40.67
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.446.	Nonpriority creditor's name and mailing address NATIONAL GRID P.O. BOX 11735 NEWARK NJ 07101-4735	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,003.70
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.447.	Nonpriority creditor's name and mailing address NATIONALGRID PO BOX 11737 NEWARK NJ 07101-4737	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$28,931.78
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.448.	Nonpriority creditor's name and mailing address NATIVE CANADA FOOTWEAR LTD 225 WEST 35TH STREET NEW YORK NY 10001 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,810.00
3.449.	Nonpriority creditor's name and mailing address NATURAL LIFE COLLECTIONS P.O. BOX 116817 ATLANTA GA 30368-6817 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$124,974.34
3.450.	Nonpriority creditor's name and mailing address NEW CREEK II, LLC P.O. BOX 842989 BOSTON MA 02284-2989 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$60,020.49

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.451.	Nonpriority creditor's name and mailing address NEW ENGLAND FINANCIAL 501 BOYLSTON ST BOSTON MA 02116 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.452.	Nonpriority creditor's name and mailing address NEW HORIZON COMMUNICATIONS 200 BAKER AVE CONCORD MA 01742 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.453.	Nonpriority creditor's name and mailing address NEW JERSEY AMERICAN WATER PO BOX 371331 PITTSBURGH PA 15250-7331 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$22.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.454.	Nonpriority creditor's name and mailing address NEW JERSEY NATURAL GAS 1415 WYCKOFF ROAD PO BOX 1464 WALL NJ 07719 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6.40
3.455.	Nonpriority creditor's name and mailing address NEW NASON STREET REALTY TRUST 36A NASON STREET MAYNARD MA 01754 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> ☒ Contingent ☒ Unliquidated ☒ Disputed Basis for the claim: LEASE TERMINATION Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED
3.456.	Nonpriority creditor's name and mailing address NINGBO YEKEA HOME ARTICLES CO, LTD 5/F, BLDG #7, SMART PARK NO. 99 XIANGYUN NORTH ROAD YINZHOU DISTRICT, ZHEJIANG 315103 CHINA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,104.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.457. Nonpriority creditor's name and mailing address NMR DISTRIBUTION AMERICA, INC 2891 AVENUE PAINE VALENCIA CA 91355	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$4,662.13
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.458. Nonpriority creditor's name and mailing address NOELLE ENTERPRISES, INC. PO BOX 804 BUFFALO NY 14240	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$98,078.80
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.459. Nonpriority creditor's name and mailing address NOMAD SOLUTIONS LLC 981 ISOM ROAD SAN ANTONIO TX 78216	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim UNKNOWN
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.460.	Nonpriority creditor's name and mailing address NORA FLEMING 3 GRANT SQUARE, # 104 HINSDALE IL 60521 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$69,808.60
3.461.	Nonpriority creditor's name and mailing address NORTH SHORE SELF STORAGE 38 SWAMPSCOTT RD SALEM MA 01970 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$391.60
3.462.	Nonpriority creditor's name and mailing address NORTHPOINT TRADING INC 347 5-TH AVENUE SUITE 201 NEW YORK NY 10016 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,929.60

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.463.	Nonpriority creditor's name and mailing address NP ROYAL RIDGE, LLC THE WILDER COMPANIES PO BOX 412278 BOSTON MA 02241-2278 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.464.	Nonpriority creditor's name and mailing address NPW USA 1101 ST. GREGORY ST. SUITE 200 CINCINNATI OH 45202 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,062.00
3.465.	Nonpriority creditor's name and mailing address OCCASIONALLY MADE LLC 8001 FRANKLIN FARMS DRIVE SUITE 100 RICHMOND VA 23229 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,241.90

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.466. Nonpriority creditor's name and mailing address OCEANAIR 186A LEE BURBANK HIGHWAY REVERE MA 02151	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$16,477.30
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.467. Nonpriority creditor's name and mailing address OCW RETAIL - CANTON, LLC PO BOX 392331 PITTSBURGH PA 15251-9331	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$5,121.82
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.468. Nonpriority creditor's name and mailing address OHIO NATIONAL LIFE INSURANCE LEGAL DEPARTMENT BANKRUPTCY GROUP 1 FINANCIAL WAY CINCINNATI OH 45242	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$0.00
Date or dates debt was incurred _____	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.469.	Nonpriority creditor's name and mailing address OLD DOMINION FREIGHT LINE, INC P.O. BOX 415202 BOSTON MA 02241-5202 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$211.31
3.470.	Nonpriority creditor's name and mailing address OMC, INC 244 REDDING RD EASTON CT 06612 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.471.	Nonpriority creditor's name and mailing address ONBRAND24, LLC 100 CUMMINGS CTR STE 306L BEVERLY MA 01915 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.472.	Nonpriority creditor's name and mailing address OPEN ROAD BRANDS 1425 E DOUGLAS AVE WICHITA KS 67211 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,166.64
3.473.	Nonpriority creditor's name and mailing address OPPORTUNITIES, INC. 25648 680TH AVENUE COLO IA 50056 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$49,036.32
3.474.	Nonpriority creditor's name and mailing address ORANGE CIRCLE STUDIO P.O. BOX 50244 IRVINE CA 92618 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$14,832.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.475. Nonpriority creditor's name and mailing address OUTERSTUFF ACCESSORIES P.O. BOX 842683 BOSTON MA 02284-2683	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$16,693.20
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.476. Nonpriority creditor's name and mailing address OUTSET MEDIA GAMES 106-4226 COMMERCE CIRCLE VICTORIA BC V8Z6N6 CANADA	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$30,115.80
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.477. Nonpriority creditor's name and mailing address P.GRAHAM DUNN 630 HENRY STREET DALTON OH 44618	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$3,976.37
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.478.	Nonpriority creditor's name and mailing address PACIFIC PACKAGING PRODUCTS, INC P.O. BOX 697 WILMINGTON MA 01887 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$29,990.35
3.479.	Nonpriority creditor's name and mailing address PACKAGING SPECIALTIES INC. 3 OPPORTUNITY WAY NEWBURYPORT MA 01950 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,480.29
3.480.	Nonpriority creditor's name and mailing address PALADONE PRODUCTS 2034 ARMACOST AVE. 2ND FLOOR LOS ANGELES CA 90025 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,339.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.481.	Nonpriority creditor's name and mailing address PALMER MARKETING 878 N. JAN MAR CT. OLATHE KS 66061 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$14,603.25
3.482.	Nonpriority creditor's name and mailing address PAPER CRANE DEPT LA 24406 PASADENA CA 91185-4406 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,813.75
3.483.	Nonpriority creditor's name and mailing address PAPERMOON INC DBA CRESCENT 1700 E. WASHINGTON BLVD LOS ANGELES CA 90021 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,041.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.484.	Nonpriority creditor's name and mailing address PARAMUS PARK SHOPPING CENTER LP PARAMUS PARK PO BOX 776184 CHICAGO IL 60677-6184 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$99,821.64
3.485.	Nonpriority creditor's name and mailing address PARODY PRODUCTIONS P.O. BOX 43408 CINCINNATI OH 45243 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,217.60
3.486.	Nonpriority creditor's name and mailing address PASSAIC VALLEY WATER COMMISSION PO BOX 11393 NEWARK NJ 07101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$297.42

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.487.	Nonpriority creditor's name and mailing address PASTORE ASSOCIATES PO BOX 19064 JOHNSTON RI 02919 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,821.32
3.488.	Nonpriority creditor's name and mailing address PAVILION GIFT CO. 8210 BUFFALO ROAD BERGEN NY 14416 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,402.50
3.489.	Nonpriority creditor's name and mailing address PAYNE PUBLISHERS 8707 EAST QUARRY ROAD MANASSAS VA 22110 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$25,852.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.490.	Nonpriority creditor's name and mailing address PAYPAL JASON JOHNSON SR DIRECTOR 2211 N 1ST ST SAN JOSE CA 95131 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.491.	Nonpriority creditor's name and mailing address PC CONNECTION SALES CORPORATION DAVE THOMAS 730 MILFORD RD MERRIMACK NH 03054 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.492.	Nonpriority creditor's name and mailing address PCL FIXTURES, INC. 275 FERRIS AVENUE EAST PROVIDENCE RI 02916 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.493.	Nonpriority creditor's name and mailing address PEABODY MUNICIPAL LIGHTING PLANT 201 WARREN ST EXT PEABODY MA 01960 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$876.97
3.494.	Nonpriority creditor's name and mailing address PEARHEAD, INC. 20 JAY STREET UNIT 301 BROOKLYN NY 11201 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,099.44
3.495.	Nonpriority creditor's name and mailing address PEKING HANDICRAFT, INC. 1388 SAN MATEO AVE. SOUTH SAN FRANCISCO CA 94080 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,369.50

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.496.	Nonpriority creditor's name and mailing address PEPPERELL BRAIDING COMPANY 22 LOWELL STREET PEPPERELL MA 01463 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,312.00
3.497.	Nonpriority creditor's name and mailing address PEPPERJAM PO BOX 787432 PHILADELPHIA PA 19178-7432 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$29,314.47
3.498.	Nonpriority creditor's name and mailing address PERFECT TIMING, INC. DEPT CH 10832 CHICAGO IL 60055-0832 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$54,604.80

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.499.	Nonpriority creditor's name and mailing address PET BENEFIT SOLUTIONS 415 CEDAR BRIDGE AVENUE LAKEWOOD NJ 08701 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$134.54
3.500.	Nonpriority creditor's name and mailing address PETER PAUPER PRESS, INC. 202 MAMARONECK AVENUE WHITE PLAINS NY 10601 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$99,310.41
3.501.	Nonpriority creditor's name and mailing address PEZ CANDY, INC. P.O. BOX 30087 NEW YORK NY 10087-0087 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$518.40

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.502.	Nonpriority creditor's name and mailing address PHEASANT LANE REALTY TRUST 13205 COLLECTIONS CENTER DRIVE CHICAGO IL 60693 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$25,645.16
3.503.	Nonpriority creditor's name and mailing address PHOENIX INSURANCE COMPANY (TRAVELER) LEGAL DEPARTMENT BANKRUPTCY GROUP 1 AMERICAN ROW HARTFORD CT 06103 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.504.	Nonpriority creditor's name and mailing address PIERRE BELVEDERE 2555 RUE DOLLARD LASALLE QC H8N1S2 CANADA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.505.	Nonpriority creditor's name and mailing address PINARD WASTE SYSTEMS PO BOX 5048 MANCHESTER NH 03108 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$572.55
3.506.	Nonpriority creditor's name and mailing address PINCH PROVISIONS 1515 CARMEN DRIVE ELK GROVE VILLAGE IL 60007 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,240.00
3.507.	Nonpriority creditor's name and mailing address PKWY, LLC 193 AVENIDA LA PATA SAN CLEMENTE CA 92673 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,536.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.508.	Nonpriority creditor's name and mailing address PLAY VISIONS 19180-144TH AVE. NE WOODINVILLE WA 98072 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.509.	Nonpriority creditor's name and mailing address PLAYTEK TOYS LLC 148 MADISON AVE, 8TH FLOOR NEW YORK NY 10016 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.510.	Nonpriority creditor's name and mailing address PLEASANT SHOPS (EDENS), LLC PO BOX 536856 TENANT # 66521 ATLANTA GA 30353-6856 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$57,656.82

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.511. Nonpriority creditor's name and mailing address PLUS-PLUS USA 1801 RUTHERFORD ROAD GREENVILLE SC 29609	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$8,432.80
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.512. Nonpriority creditor's name and mailing address POCKET PLUS LLC 3260 SOUTHGATE PLACE SW SUITE 2 CEDAR RAPIDS IA 52404	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$3,645.60
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.513. Nonpriority creditor's name and mailing address POINT-LC1, LLC C/O BERKSHIRE BANK PO BOX 185-C WORCESTER MA 01614	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$52,446.06
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.514.	Nonpriority creditor's name and mailing address POMCHIES LLC 4900 E ARROYO VERDE DR PARADASE VALLEY AZ 85253 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.515.	Nonpriority creditor's name and mailing address POOF-SLINKY, INC. P.O. BOX 74008423 CHICAGO IL 60674-8423 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,710.00
3.516.	Nonpriority creditor's name and mailing address POO-POURRI BY SCENTSIBLE, LLC P.O. BOX 577520 CHICAGO IL 60657 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$13,500.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.517.	Nonpriority creditor's name and mailing address POPSOCKETS LLC 5757 CENTRAL AVENUE BOULDER CO 80301 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$28,396.55
3.518.	Nonpriority creditor's name and mailing address PREMIER ACCESSORY GROUP 21 COMMERCE DR CRANBURY NJ 08512 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$530.88
3.519.	Nonpriority creditor's name and mailing address PRIME BRANDS GROUP PO BOX 88926 CHICAGO IL 60695-1926 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.520.	Nonpriority creditor's name and mailing address PRIME STORAGE 38 SWAMPSCOTT RD SALEM MA 01970 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.521.	Nonpriority creditor's name and mailing address PRIMITIVES BY KATHY 1817 WILLIAM PENN WAY LANCASTER PA 17601 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$58,243.92
3.522.	Nonpriority creditor's name and mailing address PROFESSOR PUZZLE USA INC 4809 N RAVENSWOOD SUITE 213 CHICAGO IL 60640 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,012.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.523.	Nonpriority creditor's name and mailing address PROSEUR SECURITY INTEGRATION 755 NW 17TH AVENUE SUITE #101 DELRAY BEACH FL 33445 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,525.41
3.524.	Nonpriority creditor's name and mailing address PRUDENTIAL FINANCIAL LEGAL DEPARTMENT BANKRUPTCY GROUP 802 PRUDENTIAL PLZ NEWARK NJ 07102 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.525.	Nonpriority creditor's name and mailing address PSE&G CO PO BOX 14444 NEW BRUNSWICK NJ 08906 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$49.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.526.	Nonpriority creditor's name and mailing address PSEG LONG ISLAND PO BOX 9039 HICKSVILLE NY 11802-9039 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,729.00
3.527.	Nonpriority creditor's name and mailing address PUPPY DOGS & ICE CREAM 3570 CARMEL MOUNTAIN RD STE 205 SAN DIEGO CA 92130 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.528.	Nonpriority creditor's name and mailing address PURA VIDA BRACELETS 12420 STONEBRIDGE ROAD ROANOKE IN 46783 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$129,329.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.529.	Nonpriority creditor's name and mailing address PURCHASE POWER P.O. BOX 371874 PITTSBURGH PA 15250-7874 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,520.99
3.530.	Nonpriority creditor's name and mailing address PUSHNAMI LLC 7421 BURNETT ROAD SUITE 184 AUSTIN TX 78757 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,750.00
3.531.	Nonpriority creditor's name and mailing address QBE SPECIALTY INSURANCE CO. LEGAL DEPARTMENT BANKRUPTCY GROUP 1QBE WAY SUN PRAIRIE WI 53596-0002 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.532.	Nonpriority creditor's name and mailing address QUAD/GRAPHICS, INC. PO BOX 644840 PITTSBURGH PA 15264-4840 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$80,800.00
3.533.	Nonpriority creditor's name and mailing address QUEST BASICS CORP PO BOX 1036 CHARLOTTE NC 28201 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$576.00
3.534.	Nonpriority creditor's name and mailing address QUINTESSENTIAL TOTS DBA ITZY RITZY PO BOX 1057 AURORA IL 60507 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.535.	Nonpriority creditor's name and mailing address QUOTABLECARDS 611 BROADWAY #615 NEW YORK CITY NY 10012 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,034.50
3.536.	Nonpriority creditor's name and mailing address RAINBOW SANDALS 900 CALLE NEGOCIO SAN CLEMENTE CA 92673 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$33,298.00
3.537.	Nonpriority creditor's name and mailing address RAINER COLONY PLACE ACQUISITIONS, LLC PO BOX 8121-J WORCESTER MA 01614 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$72,202.17

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.538.	Nonpriority creditor's name and mailing address RAMSEY BOARD OF PUBLIC WORKS 33 NORTH CENTRAL AVE. RAMSEY NJ 07446 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$153.87
3.539.	Nonpriority creditor's name and mailing address RAMSEY INTERSTATE CENTER LLC 95 NORTH STATE ROUTE 17 SUITE 100 PARAMUS NJ 07652 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$78,581.24
3.540.	Nonpriority creditor's name and mailing address RAMSEY INTERSTATE CENTER LLC C/O CYNTHIA SANTOMAURO, ESQ. 3 UNIVERSITY PLAZA SUITE 207 HACKENSACK NJ 07601 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> ☒ Contingent ☒ Unliquidated ☒ Disputed Basis for the claim: LITIGATION Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.541.	Nonpriority creditor's name and mailing address RANDOM HOUSE BOX 223384 PITTSBURGH PA 15251-2384 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$70,658.42
3.542.	Nonpriority creditor's name and mailing address RAREESSENCE, LLC 7625 GOLDEN TRIANGLE DRIVE SUITE E EDEN PRAIRIE MN 55344 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$561.00
3.543.	Nonpriority creditor's name and mailing address RAVENSBURGER/FX SCHMID USA, INC. P O BOX 845233 BOSTON MA 02284-5233 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,460.62

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.544.	Nonpriority creditor's name and mailing address RAYKO 6F JINZHOU MANSION ECONOMIC CENTER YONGKANG CITY CHINA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.545.	Nonpriority creditor's name and mailing address RBI MANAGEMENT & LOGISTICS 300 MILL STREET SUITE 235 MOORESTOWN NJ 08057 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,957.78
3.546.	Nonpriority creditor's name and mailing address RD MANAGEMENT LLC 810 SEVENTH AVENUE 10TH FLOOR NEW YORK NY 10019 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.547. Nonpriority creditor's name and mailing address REACH COMPANIES 6401 W 106TH ST BLOOMINGTON MN 55438	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim UNKNOWN
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.548. Nonpriority creditor's name and mailing address READING MUNICIPAL LIGHT DEPT P.O. BOX 30 READING MA 01867-0030	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$1,391.60
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.549. Nonpriority creditor's name and mailing address READY REFRESH P.O. BOX 856192 LOUISVILLE KY 40285-6192	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$8,860.79
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.550.	Nonpriority creditor's name and mailing address RED WHEEL/WEISER 65 PARKER ST UNIT 7 NEWBURYPORT MA 01950 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$569.70
3.551.	Nonpriority creditor's name and mailing address REDPOINT GLOBAL 36 WASHINGTON ST. SUITE 120 WELLESLEY HILLS MA 02481 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,825.00
3.552.	Nonpriority creditor's name and mailing address REDSTONE OPERATING LTD. PTSHIP 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$55,947.12

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.553. Nonpriority creditor's name and mailing address REGAL MANUFACTURING COMPANY PO BOX 31 CAMBRIDGE CITY IN 47327	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$10,812.22
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.554. Nonpriority creditor's name and mailing address REPUBLIC SERVICES #094 P.O. BOX 9001099 LOUISVILLE KY 40290-1099	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$940.29
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.555. Nonpriority creditor's name and mailing address REPUBLIC SERVICES #095 P.O. BOX 9001099 LOUISVILLE KY 40290-1099	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$9,436.05
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.556.	Nonpriority creditor's name and mailing address REPUBLIC SERVICES #096 P.O. BOX 9001099 LOUISVILLE KY 40290-1099 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$726.30
3.557.	Nonpriority creditor's name and mailing address REPUBLIC SERVICES 097 PO BOX 9001099 LOUISVILLE KY 40290 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,108.70
3.558.	Nonpriority creditor's name and mailing address REPUBLIC SERVICES 956 PO BOX 9001099 LOUISVILLE KY 40290 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$510.54

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.559.	Nonpriority creditor's name and mailing address RETALON INC. 2727 STEELES AVE W STE 202 TORONTO ON M3J 3G9 CANADA Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.560.	Nonpriority creditor's name and mailing address REUZBL 212 L TECHNOLOGY DR IRVINE CA 92618 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,256.00
3.561.	Nonpriority creditor's name and mailing address RIBA RETAIL INC. RICK BORETSKY 5950 WESTBURY AVE MONTREAL QC H3W 2W9 CANADA Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.562.	Nonpriority creditor's name and mailing address RICOH USA, INC. 300 EAGLEVIEW BLVD STE 200 EXTON PA 19341 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$80,892.00
3.563.	Nonpriority creditor's name and mailing address R-K BLACK ROCK I, LLC CL400018 PO BOX 5046 NEW BRITAIN CT 06050-5046 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$74,798.39
3.564.	Nonpriority creditor's name and mailing address RK MIDDLETOWN VILLAGE LLC 50 CABOT STREET NEEDHAM MA 02494 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.565.	Nonpriority creditor's name and mailing address RK TAUNTON CROSSING LLC 50 CABOT ST NEEDHAM MA 02494 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$225.39
3.566.	Nonpriority creditor's name and mailing address ROCKAWAY CENTER ASSOCIATES ROCKAWAY TOWNSQUARE P.O. BOX 772829 CHICAGO IL 60677-2829 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$66,110.87
3.567.	Nonpriority creditor's name and mailing address ROKOKO PO BOX 741084 LOS ANGELES CA 90074-1084 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,286.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.568.	Nonpriority creditor's name and mailing address ROMAN, INC. 8027 SOLUTIONS CENTER CHICAGO IL 60677-8000 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$16,730.19
3.569.	Nonpriority creditor's name and mailing address ROMAN, KENNETH M, DIANE B ROMAN TIMOTHY A ROMAN AND DEBORAH B ROMAN ATTN KENNETH ROMAN Address Intentionally Omitted Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED
3.570.	Nonpriority creditor's name and mailing address ROSELLE, LOUIS T. Address Intentionally Omitted 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$80.73

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.571.	Nonpriority creditor's name and mailing address ROSS EXPRESS PO BOX 8908 PENACOOK NH 03303 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$61.88
3.572.	Nonpriority creditor's name and mailing address ROSS P ANDERSON 10 MAIN STREET APT #13 MAYNARD MA 01754 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$500.00
3.573.	Nonpriority creditor's name and mailing address ROUTE 140 SCHOOL STREET LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$91,941.16

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.574.	Nonpriority creditor's name and mailing address ROUTE 146 MILLBURY LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$77,216.49
3.575.	Nonpriority creditor's name and mailing address ROXVILLE ASSOCIATES P.O. BOX 48 GREEN VILLAGE NJ 07935-0048 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$35,246.47
3.576.	Nonpriority creditor's name and mailing address ROYAL DELUXE ACCESSORIES PO BOX 100895 ATLANTA GA 30384-4174 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.577. Nonpriority creditor's name and mailing address RSM US LLP 5155 PAYSPHERE CIRCLE CHICAGO IL 60674	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$40,000.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.578. Nonpriority creditor's name and mailing address RWS FACILITY SERVICES DEPT#40299 PO BOX 740209 ATLANTA GA 30374	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$836.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.579. Nonpriority creditor's name and mailing address SCHOLASTIC INC. PO BOX 416851 BOSTON MA 02241-6851	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$8,844.04
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.580.	Nonpriority creditor's name and mailing address SCHYLLING ASSOCIATES, INC. PO BOX 842358 BOSTON MA 02284-2358 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$34,350.60
3.581.	Nonpriority creditor's name and mailing address SCOTT GRIFFIN ARCHITECTS 880 MAIN STREET 5TH FLOOR WALTHAM MA 02451 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,728.64
3.582.	Nonpriority creditor's name and mailing address SCS DIRECT INC. ATTN: ACCOUNTS RECEIVABLE 9 TREFOIL DRIVE TRUMBULL CT 06611 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,967.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.583.	Nonpriority creditor's name and mailing address SDC CLIFTON COMMONS, INC P.O. BOX 209267 AUSTIN TX 78720-9267 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$73,624.94
3.584.	Nonpriority creditor's name and mailing address SEA BAGS 25 CUSTOM HOUSE WHARF PORTLAND ME 04101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$930.00
3.585.	Nonpriority creditor's name and mailing address SEA LARK ENT 40 ORCHARD ROAD WOODBIDGE CT 06525 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,000.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.586.	Nonpriority creditor's name and mailing address SHIPYARD WASTE SOLUTIONS, LLC PO BOX 546 ELIOT ME 03903-0546 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$300.00
3.587.	Nonpriority creditor's name and mailing address SHOPPERS WORLD LLC P.O. BOX 92472 DEPT #105209 21422 55233 CLEVELAND OH 44193 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.588.	Nonpriority creditor's name and mailing address SHOW ME GLOBAL LOGISTICS LLC 2625 N. NEERGARD AVENUE, SUITE 100 SPRINGFIELD MO 65803 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,685.70

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.589.	Nonpriority creditor's name and mailing address SIGNATURE MKTG & MFG, INC 301 WAGARAW RD HAWTHORNE NJ 07506 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$18,750.00
3.590.	Nonpriority creditor's name and mailing address SILVER BUFFALO 141 WEST 36TH STREET 4TH FLOOR NEW YORK NY 10016 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,080.00
3.591.	Nonpriority creditor's name and mailing address SILVER CIRCLE PRODUCTS PO BOX 1798 HALLANDALE FL 33008 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$912.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.592.	Nonpriority creditor's name and mailing address SILVER FOREST OF VERMONT, INC. 40 INDUSTRIAL DRIVE BELLOWS FALLS VT 05101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$38,301.25
3.593.	Nonpriority creditor's name and mailing address SIMON AND SCHUSTER INC. PO BOX 70660 CHICAGO IL 60673-0660 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$29,754.71
3.594.	Nonpriority creditor's name and mailing address SIMPLEX JANITORIAL SUPPLIES 6 COMMERCIAL STREET SHARON MA 02067 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$861.58

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.595.	Nonpriority creditor's name and mailing address SINCERE SURROUNDINGS 408 N 2ND AVE E ROCK RAPIDS IA 51246 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,132.95
3.596.	Nonpriority creditor's name and mailing address SISTERS PO BOX 100895 ATLANTA GA 30384-4174 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.597.	Nonpriority creditor's name and mailing address SKILLSURVEY STACY SHIPP 1235 WEST LAKES DR STE 330 BERYN PA 19312 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.598.	Nonpriority creditor's name and mailing address SMARTWOOL CORPORATION 32842 COLLECTIONS CENTER DRIVE CHICAGO IL 60693 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,450.52
3.599.	Nonpriority creditor's name and mailing address SMARTYPITS 20609 SANTA LUCIA ST. STE C TEHACHAPI CA 93561 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,570.34
3.600.	Nonpriority creditor's name and mailing address SMD TECHNOLOGIES 465 OGDEN AVE TEANECK NJ 07666 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$16.30

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.601.	Nonpriority creditor's name and mailing address SMITH HAVEN MALL 313 SMITH HAVEN MALL LAKE GROVE NY 11755 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,750.00
3.602.	Nonpriority creditor's name and mailing address SNIFTY 1401 PARL AVE SOUTH LINDEN NJ 07036 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,468.40
3.603.	Nonpriority creditor's name and mailing address SODANO, CATHERINE JASON STONE INJURY LAWYERS SCOTT R. GILMOND 225 FRIEND STREET SUITE 102 BOSTON MA 02114 Date or dates debt was incurred NOVEMBER 2018 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☒ Disputed Basis for the claim: LITIGATION Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.604.	Nonpriority creditor's name and mailing address SOFT AS A GRAPE 328 MARION ROAD WAREHAM MA 02571 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,080.00
3.605.	Nonpriority creditor's name and mailing address SOURCEBOOKS, INC. PO BOX 4410 NAPERVILLE IL 60567-4410 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$17,461.20
3.606.	Nonpriority creditor's name and mailing address SOUTH HUNTINGTON WATER DISTRICT PO BOX 71458 PHILADELPHIA PA 19176-9903 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$8.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.607.	Nonpriority creditor's name and mailing address SOUTHERN CONNECTICUT GAS PO BOX 9112 CHELSEA MA 02150 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$397.96
3.608.	Nonpriority creditor's name and mailing address SOUTHAHAVEN ASSOCIATES, LLC 100 MAIN STREET NORTH SUITE 203 SOUTHBURY CT 06488 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$52,077.29
3.609.	Nonpriority creditor's name and mailing address SPARTINA 449 LLC 10 BUCK ISLAND ROAD BLUFFTON SC 29910 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$130,134.09

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.610.	Nonpriority creditor's name and mailing address SPIN COPTER 834 SAINT ANDREWS CIRCLE PASO ROBLES CA 93446 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,244.16
3.611.	Nonpriority creditor's name and mailing address SPIN MASTER LTD PMB10053 300 INTERNATIONAL DRIVE, SUITE 100 WILLIAMSVILLE NY 14221 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$28,615.89
3.612.	Nonpriority creditor's name and mailing address SPRINGBOARD, INC DBA BLOOM DAILY PLANNERS 500 CREEK VIEW ROAD SUITE 302 NEWARK DE 19711 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$713.17

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.613.	Nonpriority creditor's name and mailing address STACCATO 2040 HAWKINS CIRCLE LOS ANGELES CA 90001 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,547.25
3.614.	Nonpriority creditor's name and mailing address STANCE PO BOX 845082 LOS ANGELES CA 90084-5082 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,618.00
3.615.	Nonpriority creditor's name and mailing address STATE OF NEW JERSEY P.O. BOX 269 TRENTON NJ 08695-0269 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.616.	Nonpriority creditor's name and mailing address STICKERGIANT.COM INC 880 WEAVER PARK ROAD LONGMONT CO 80501 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$96.39
3.617.	Nonpriority creditor's name and mailing address STREAMLINE, INC. 229 NORTH ROUTE 303 SUITE 107 CONGERS NY 10920 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,954.80
3.618.	Nonpriority creditor's name and mailing address STYLE ACCESSORIES, INC. 3 ACORN STREET PROVIDENCE RI 02903 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.619.	Nonpriority creditor's name and mailing address SUDBURY CROSSING STATION PO BOX 645414 PITTSBURGH PA 15264-5414 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$69,656.36
3.620.	Nonpriority creditor's name and mailing address SUEZ WATER RHODE ISLAND PAYMENT CENTER PO BOX 371804 PITTSBURGH PA 15250-7804 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$41.34
3.621.	Nonpriority creditor's name and mailing address SUGARFINA, INC PO BOX 101865 PASADENA CA 91189-1865 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,888.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.622.	Nonpriority creditor's name and mailing address SUN LIFE ASSURANCE COMPANY OF CANADA ONE SUN LIFE EXECUTIVE PK WELLESLEY HILLS MA 02481 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,308.95
3.623.	Nonpriority creditor's name and mailing address SUNBELT RENTALS PO BOX 409211 ALANTA GA 30384-9211 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,275.18
3.624.	Nonpriority creditor's name and mailing address SUNFLOWER FOOD & SPICE, LTD 7921 NIEMAN RD LENEXA KS 66214 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,120.35

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.625.	Nonpriority creditor's name and mailing address SUNRISE PROMENADE ASSOCIATES SPIEGEL ASSOCIATES ATTN: PRESIDENT 375 N BROADWAY PENTHOUSE JERICHO NY 11753	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$0.00
	Date or dates debt was incurred _____	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.626.	Nonpriority creditor's name and mailing address SUNTECK TRANSPORT CO.,INC PO BOX 536665 PITTSBURGH PA 15253-5908	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$4,774.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.627.	Nonpriority creditor's name and mailing address SWEET IQ DEPT LA 24650 PASADENA CA 91185-4650	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$12,527.50
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.628.	Nonpriority creditor's name and mailing address SWEET JUBILEE GOURMET 19 BALA AVE. BALA CYNWYD PA 19004 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,693.60
3.629.	Nonpriority creditor's name and mailing address TACTIC USA, INC 8820 EAST AVE MENTOR OH 44060 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,106.50
3.630.	Nonpriority creditor's name and mailing address TAK MING TRADING COMPANY 709 WAN LANHOUSE WAN TAU TONG ESTATE TAI PO NT HK HONG KONG HONG KONG 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.631.	Nonpriority creditor's name and mailing address TALENT REEF, INC DEPT CH 19769 PALATINE IL 60055-9769 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,187.50
3.632.	Nonpriority creditor's name and mailing address TAN'S CLUB 470-C CLOVERLEAF DRIVE SUITE C BALDWIN PARK CA 91706 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.633.	Nonpriority creditor's name and mailing address TAUNTON MUNICIPAL LIGHT PLANT PO BOX 870 TAUNTON MA 02780-0870 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,329.77

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.634.	Nonpriority creditor's name and mailing address TAUNTON WATER DIVISION PO BOX 844508 BOSTON MA 02284-4508 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$103.93
3.635.	Nonpriority creditor's name and mailing address TDC GAMES, INC. 444 E. GARDENA BLVD. BUILDING A GARDENA CA 90248 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,398.00
3.636.	Nonpriority creditor's name and mailing address TEAM GOLF PO BOX 3586 HOUSTON TX 77253-3586 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,304.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.637.	Nonpriority creditor's name and mailing address TEMP-TATIONS, LLC 260 BALLARD ROAD UNIT 2 MIDDLTOWN NY 10941 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,330.56
3.638.	Nonpriority creditor's name and mailing address TERVIS TUMBLER PO BOX 734907 CHICAGO IL 60673 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,916.00
3.639.	Nonpriority creditor's name and mailing address THE ANTIGUA GROUP, INC. 16651 N. 84TH AVENUE PEORIA AZ 85382 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$24,160.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.640.	Nonpriority creditor's name and mailing address THE BOSTON SPORTS APPAREL COMPANY C/O FAN FAVORITE DBA BOSTON SPORTS APPAREL PO BOX 724051 ATLANTA GA 31139-4051 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,326.00
3.641.	Nonpriority creditor's name and mailing address THE CREME SHOP 819 GLADYS AVENUE LOS ANGELES CA 90021 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,435.04
3.642.	Nonpriority creditor's name and mailing address THE DESIGN HOUSE LLC 2005 CROMWELL DRIVE NASHVILLE TN 37215 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.643.	Nonpriority creditor's name and mailing address THE DMC CORPORATION PO BOX 823279 PHILADELPHIA PA 19182-3279 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.644.	Nonpriority creditor's name and mailing address THE EAST WIND SILVER CO. PO BOX 750 CHATHAM MA 02633 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$500.00
3.645.	Nonpriority creditor's name and mailing address THE PETTING ZOO 7222 PARKWAY DRIVE HANOVER MD 21076 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$17,952.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.646.	Nonpriority creditor's name and mailing address THE STOP & SHOP SUPERMARKET COMPANY LLC PO BOX 3797 BOSTON MA 02241-3797 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.647.	Nonpriority creditor's name and mailing address THE STOP & SHOP SUPERMARKET COMPANY LLC PO BOX 3797 BOSTON MA 02241-3797 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$28,039.43
3.648.	Nonpriority creditor's name and mailing address THE STOP & SHOP SUPERMARKET COMPANY LLC PO BOX 3797 BOSTON MA 02241 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$42,921.86

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.649.	Nonpriority creditor's name and mailing address THE VANILLA MONKEY PO BOX 233 SCITUATE MA 02066 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,510.00
3.650.	Nonpriority creditor's name and mailing address THINKFUN 1321 CAMERON STREET ALEXANDRIA VA 22314 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.651.	Nonpriority creditor's name and mailing address THREAD AND SUPPLY 5524 ALCOA AVE VERNON CA 90068 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$167,399.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.652.	Nonpriority creditor's name and mailing address THREE SEASONS HEALTHCARE LLC ONE NORTH CLEMATIS STREET SUITE 110 WEST PALM BEACH FL 33401-5551 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$11,496.00
3.653.	Nonpriority creditor's name and mailing address THYMES THE THYMES LLC P.O. BOX 6444 CAROL STREAM IL 60197-6444 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.654.	Nonpriority creditor's name and mailing address TIMOTHY SWEETMAN 25 PARKER ST ENFIELD CT 06082 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$316.56

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.655.	Nonpriority creditor's name and mailing address TINTE COSMETICS PO BOX 110694 LAKEWOOD RANCH FL 34211 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,326.00
3.656.	Nonpriority creditor's name and mailing address TOMS PO BOX 505286 ST. LOUIS MO 63150-5286 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$42,756.00
3.657.	Nonpriority creditor's name and mailing address TOMY INTERNATIONAL, INC. 39792 TREASURY CENTER CHICAGO IL 60694-9700 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$21,539.12

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.658.	Nonpriority creditor's name and mailing address TONYMOLY USA LLC 53 BRIDGE ST. SUITE 712 BROOKLYN NY 11201	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$43,848.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.659.	Nonpriority creditor's name and mailing address TOP TRENZ 66 S. 2-ND STREET E BAYSHORE NY 11706	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$41,702.92
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.660.	Nonpriority creditor's name and mailing address TOP TRUMPS 4449 EASTON WAY, 2ND FLOOR COLUMBUS OH 43219	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$600.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.661.	Nonpriority creditor's name and mailing address TORCHED PRODUCTS 217 HOBBS ST #107 TAMPA FL 33619 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,285.20
3.662.	Nonpriority creditor's name and mailing address TOTALLY BAMBOO 1880 DIAMOND STREET SAN MARCOS CA 92078 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,300.00
3.663.	Nonpriority creditor's name and mailing address TOYSMITH 3101 WEST VALLEY HWY EAST SUMNER WA 98390 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$8,980.56

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.664.	Nonpriority creditor's name and mailing address TPS HOLDINGS, LLC 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED
3.665.	Nonpriority creditor's name and mailing address TPS HOLDINGS, LLC 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED
3.666.	Nonpriority creditor's name and mailing address TPS HOLDINGS, LLC 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.667.	Nonpriority creditor's name and mailing address TPS HOLDINGS, LLC 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED
3.668.	Nonpriority creditor's name and mailing address TPS HOLDINGS, LLC 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED
3.669.	Nonpriority creditor's name and mailing address TPS HOLDINGS, LLC 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☐ Disputed Basis for the claim: REAL PROPERTY LEASE GUARANTEE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.670. **Nonpriority creditor's name and mailing address**

TPS HOLDINGS, LLC
20 MAIN ST
ACTON MA 01720

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

REAL PROPERTY LEASE GUARANTEE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.671. **Nonpriority creditor's name and mailing address**

TPS HOLDINGS, LLC
20 MAIN ST
ACTON MA 01720

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

REAL PROPERTY LEASE GUARANTEE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.672. **Nonpriority creditor's name and mailing address**

TPS HOLDINGS, LLC
20 MAIN ST
ACTON MA 01720

Date or dates debt was incurred

Last 4 digits of account number:

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim:

REAL PROPERTY LEASE GUARANTEE

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.673.	Nonpriority creditor's name and mailing address TPS, LLC 20 MAIN ST ACTON MA 01720 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$26,209.68
3.674.	Nonpriority creditor's name and mailing address TPS, LLC 20 MAIN ST ACTON MA 01720 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: INTERCOMPANY PAYABLE TO AFFILIATE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$88,709.68
3.675.	Nonpriority creditor's name and mailing address TRANSPAC IMPORTS, INC. 1050 AVIATOR DRIVE VACAVILLE CA 95688 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$21,672.72

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.676.	Nonpriority creditor's name and mailing address TRAVELERS PROPERTY CASUALTY CO OF AMERICA LEGAL DEPARTMENT BANKRUPTCY GROUP ONE TOWER SQUARE HARTFORD CT 06183 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.677.	Nonpriority creditor's name and mailing address TREND LAB 477 S DEAN STREET ENGLEWOOD NJ 07631 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.678.	Nonpriority creditor's name and mailing address TRENDS INTERNATIONAL 5188 WEST 74TH ST INDIANAPOLIS IN 46268 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.679.	Nonpriority creditor's name and mailing address TRENDZ MART CORP 9979 MONROE DR. DALLAS TX 75220 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10,105.50
3.680.	Nonpriority creditor's name and mailing address TRES BIEN CLOTHING, INC PO BOX 740952 LOS ANGELES CA 90074-0952 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,481.00
3.681.	Nonpriority creditor's name and mailing address TREVCO, INC 32450 N AVIS DRIVE MADISON HEIGHTS MI 48071 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,800.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.682.	Nonpriority creditor's name and mailing address TRT BRAINTREE II LLC PO BOX 809144 CHICAGO IL 60680-9144 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.683.	Nonpriority creditor's name and mailing address TUFTS BANKRUPTCY GROUP CASH EL SCANLON 705 MOUNT AUBURN ST WATERTOWN MA 02472-1508 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.684.	Nonpriority creditor's name and mailing address TWO WALKERS BROOK CROSSING, LLC C/O THE WILDER COMPANIES 800 BOYLSTON ST., SUITE 1300 BOSTON MA 02199 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$86,225.30

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.685.	Nonpriority creditor's name and mailing address TWO'S COMPANY, INC. P.O. BOX 5302 NEW YORK NY 10087-5302 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$12,954.24
3.686.	Nonpriority creditor's name and mailing address TY, INC P.O. BOX 5934 CHICAGO IL 60680 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,344.00
3.687.	Nonpriority creditor's name and mailing address U BRANDS LLC 27121 CALLE ARROYO SUITE 2220 SAN JUAN CAPISTRANO CA 92675 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,488.96

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.688.	Nonpriority creditor's name and mailing address U&I IMPORT, INS 33 NEW BRIDGE ROAD BERRGENFIELD NJ 07621 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.689.	Nonpriority creditor's name and mailing address U.S.A.OPOLY, INC. 5999 AVENIDA ENCINAS STE 150 CARLSBAD CA 92008 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$810.00
3.690.	Nonpriority creditor's name and mailing address UB POMPTON LAKES I, LLC P.O. BOX 371328 PITTSBURG PA 15250-7328 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$33,933.68

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.691.	Nonpriority creditor's name and mailing address UB STAMFORD, LP 321 RAILROAD AVENUE GREENWICH CT 06830 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$98,446.71
3.692.	Nonpriority creditor's name and mailing address UBER MOM LLC 899 STATEROAD 540 WEST WINTER HAVEN FL 33880 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,630.00
3.693.	Nonpriority creditor's name and mailing address UCC DISTRIBUTING INC 2580 PIONEER AVE, SUITE A VISTA CA 92081 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$5,040.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.694.	Nonpriority creditor's name and mailing address ULINE ATTN: ACCOUNTS RECEIVABLE 2200 S. LAKESIDE DRIVE WAUKEGAN IL 60085 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,952.50
3.695.	Nonpriority creditor's name and mailing address UMASS MEMORIAL HEALTH CARE PO BOX 419591 BOSTON MA 02241-9591 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$200.00
3.696.	Nonpriority creditor's name and mailing address UNEMPLOYED PHILOSOPHERS GUILD 105 ATLANTIC AVE BROOKLYN NY 11201 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$408.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.697.	Nonpriority creditor's name and mailing address UNION SECURITY INSURANCE COMPANY LEGAL DEPARTMENT BANKRUPTCY GROUP 2323 GRAND BLVD KANSAS CITY MO 64108-2670 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.698.	Nonpriority creditor's name and mailing address UNITED ILLUMINATING CO PO BOX 9230 CHELSEA MA 02150-9230 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,157.53
3.699.	Nonpriority creditor's name and mailing address UNITED STATES CUSTOMS SERVICES AUTOMATED COMMERCIAL SYSTEM CLIENT BRANCH 10 1300 PENNSYLVANIA AVE NW WASHINGTON DC 20229 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$105.02

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.700.	Nonpriority creditor's name and mailing address UNITED STATES TREASURY INTERNAL REVENUE SERVICE OGDEN UT 84201 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$10.46
3.701.	Nonpriority creditor's name and mailing address UNITIL PO BOX 981010 BOSTON MA 02298 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,116.09
3.702.	Nonpriority creditor's name and mailing address UNIVERSITY GAMES 2030 HARRISON ST SAN FRANCISCO CA 94110 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$741.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.703.	Nonpriority creditor's name and mailing address UPS FREIGHT PO BOX 650690 DALLAS TX 75265-0690 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$3,620.43
3.704.	Nonpriority creditor's name and mailing address URBAN EDGE/HANOVER UE LLC P.O. BOX 645755 PITTSBURGH PA 15264-5255 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$65,276.51
3.705.	Nonpriority creditor's name and mailing address URSTADT BIDDLE PROPERTIES INC PO BOX 371328 PITTSBURGH PA 15250 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$389.01

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.706.	Nonpriority creditor's name and mailing address USA WASTE & RECYCLING PO BOX 1000 EAST WINDSOR CT 06088 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$260.56
3.707.	Nonpriority creditor's name and mailing address UT BRANDS 85 ENTERPRISE SUITE 310 ALISO VIEJO CA 92656 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.708.	Nonpriority creditor's name and mailing address VARIOUS CUSTOMERS 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: OUTSTANDING GIFT CARDS Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,089,256.69

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.709.	Nonpriority creditor's name and mailing address VERA BRADLEY DESIGNS, INC. 12420 STONEBRIDGE ROAD ROANOKE IN 46783 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$748,891.00
3.710.	Nonpriority creditor's name and mailing address VERIETY DISTRIBUTORS PO BOX 874169 KANSAS CITY MO 64187-4169 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$677.45
3.711.	Nonpriority creditor's name and mailing address VERIZON P.O. BOX 1 WORCESTER MA 01654-0001 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,642.30

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.712.	Nonpriority creditor's name and mailing address VERIZON WIRELESS P.O. BOX 15041 WORCESTER MA 01615-0041 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,100.32
3.713.	Nonpriority creditor's name and mailing address VERONICA M WHOLESALE INC 1113 E 11TH ST UNIT A LOS ANGELES CA 90023 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.714.	Nonpriority creditor's name and mailing address VINEYARD VINES 37 BROWN HOUSE ROAD STAMFORD CT 06902 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$15,641.25

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.715.	Nonpriority creditor's name and mailing address VINTAGE GOODS APPAREL LLC 1330 SPECIALITY DR. SUITE C VISTA CA 92081 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$2,965.14
3.716.	Nonpriority creditor's name and mailing address VOYA MARY FALCO ONE ORANGE WAY WINDSOR CT 06095 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.717.	Nonpriority creditor's name and mailing address W W NORTON 500 FIFTH AVENUE NEW YORK NY 10110 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.718.	Nonpriority creditor's name and mailing address W.B.MASON PO BOX 55840 BOSTON MA 02205 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,856.62
3.719.	Nonpriority creditor's name and mailing address W/S HADLEY PROPERTIES II LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$35,293.86
3.720.	Nonpriority creditor's name and mailing address W/S LEBANON LLC 33 BOYSLTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$40,242.22

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.721.	Nonpriority creditor's name and mailing address W/S PEAK CANTON PROPERTIES LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,856.49
3.722.	Nonpriority creditor's name and mailing address W/S SMITHFIELD ASSOCIATES LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$19,377.27
3.723.	Nonpriority creditor's name and mailing address W/S WAREHAM PROPERTIES LLC 33 BOYSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$69,494.82

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.724. Nonpriority creditor's name and mailing address W/S/K SEEKONK ASSOCIATES LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$8,331.61
3.725. Nonpriority creditor's name and mailing address W/S/M HINGHAM PROPERTIES LLC 33 BOYLSTON STREET SUITE 3000 CHESTNUT HILL MA 02467 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$149,209.47
3.726. Nonpriority creditor's name and mailing address WAKEFIELD MALL, LLC CHARLES RIVER TOWERS 151 COOLIDGE AVE, UNIT 104 WATERTOWN MA 02472-2865 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$32,368.88

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.727. Nonpriority creditor's name and mailing address WAL LEX LLC C/O MELLON TRUST OF NE PO BOX 55865 BOSTON MA 02205 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$69,045.32
3.728. Nonpriority creditor's name and mailing address WALMART 702 SW 8TH ST BENTONVILLE AR 72716-8611 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$199.47
3.729. Nonpriority creditor's name and mailing address WALNUT ASSOCIATES LP 208 BROADWAY SAUGUS MA 01906 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$83,717.71

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.730.	Nonpriority creditor's name and mailing address WALT WHITMAN MALL, LLC PO BOX 776405 CHICAGO IL 60677-6405 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.731.	Nonpriority creditor's name and mailing address WALTHAM SERVICES, INC P.O. BOX 540538 WALTHAM MA 02454-0538 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$350.59
3.732.	Nonpriority creditor's name and mailing address WARWICK MALL OWNER LLC P.O. BOX 75893 BALTIMORE MD 21275-5893 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$52,715.07

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.733.	Nonpriority creditor's name and mailing address WARWICK UTILITY BILLING PO BOX 981076 BOSTON MA 02298-1076 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$95.50
3.734.	Nonpriority creditor's name and mailing address WASTE MANAGEMENT PO BOX 13648 PHILADELPHIA PA 19101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,315.88
3.735.	Nonpriority creditor's name and mailing address WATCHITUDE 99 PARK AVENUE NEW YORK NY 10016 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$18,048.00

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.736.	Nonpriority creditor's name and mailing address WATER SUPPLY DISTRICT OF ACTON P.O. BOX 953 ACTON MA 01720 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$72.00
3.737.	Nonpriority creditor's name and mailing address WATERSTONE RETAIL EPPING GROUND TENANT, LLC PO BOX 392389 PITTSBURGH PA 15251-9389 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$30,958.13
3.738.	Nonpriority creditor's name and mailing address WATERSTONE ROCHESTER GROUND TENANT LLC 117 KENDRICK STREET SUITE 325 NEEDHAM MA 02494 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,416.19

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.739.	Nonpriority creditor's name and mailing address WATERVIEW MARKETPLACE OWNER 810 SEVENTH AVE 10TH FL NEW YORK NY 10019 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.740.	Nonpriority creditor's name and mailing address WAYNE PSC, LLC 505 MAIN STREET PO BOX 667 HACKENSACK NJ 07602 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$35,299.37
3.741.	Nonpriority creditor's name and mailing address WEBSTAUANTSTORE 40 CITATION LN LITITZ PA 17543 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.742.	Nonpriority creditor's name and mailing address WEDGEWOOD REALTY TRUST 20 MAIN ST ACTON MA 01720 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$13,798.16
3.743.	Nonpriority creditor's name and mailing address WELLY HEALTH PBC 729 N WASHINGTON AVE MINNEAPOLIS MN 55401 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$41,250.00
3.744.	Nonpriority creditor's name and mailing address WESTAFF PO BOX 116834 ATLANTA GA 30368-6834 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$4,881.62

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.745.	Nonpriority creditor's name and mailing address WESTFORD VALLEY MARKETPLACE, INC C/O THE WILDER COMPANIES, LTD PO BOX 412776 BOSTON MA 02241-2776 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$59,389.37
3.746.	Nonpriority creditor's name and mailing address WESTVIEW CAPITAL PARTNERS III, L.P. WESTVIEW CAPITAL MANAGEMENT CO INC CARLO VON SCHROETER MANAGING PARTNER 125 HIGH ST 26TH FL BOSTON MA 02110 Date or dates debt was incurred 8/9/2019 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: PROMISSORY NOTE Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$1,655,738.00
3.747.	Nonpriority creditor's name and mailing address WHITE MOUNTAIN PUZZLES P.O. BOX 818 JACKSON FALLS MARKETPLACE JACKSON NH 03846 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$24,523.20

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.748.	Nonpriority creditor's name and mailing address WILD AND WOLF INC 432 PARK AVENUE SOUTH, 15TH FLOOR NEW YORK NY 10016 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$8,654.70
3.749.	Nonpriority creditor's name and mailing address WILD REPUBLIC PO BOX 76065 CLEVELAND OH 44101-4755 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.750.	Nonpriority creditor's name and mailing address WILLIAMS, PAMELA STEIN SAKS, PLLC DAVID PAUL FORCE 285 PASSAIC STREET HACKENSACK NJ 07601 Date or dates debt was incurred MARCH 2020 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☒ Contingent ☒ Unliquidated ☒ Disputed Basis for the claim: LITIGATION Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNDETERMINED

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.751. Nonpriority creditor's name and mailing address WINTHROP RESOURCES CORPORATION 11100 WAYZATA BLVD STE 801 MINNETONKA MN 55305	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$36,494.00
Date or dates debt was incurred _____	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.752. Nonpriority creditor's name and mailing address WIRELESS EXPRESS DBA TREND TECH BRANDS 57 NORTH MALL PLAINVIEW NY 11803	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$2,700.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.753. Nonpriority creditor's name and mailing address WJG REALTY TRUST C/O STOP & SHOP SUPERMARKET COMPANY LLC PO BOX 3797 BOSTON MA 02241	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$0.00
Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.754.	Nonpriority creditor's name and mailing address WNY WINDOW CLEANING 190 HOYT ST #2 BUFFALO NY 14213 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$141.38
3.755.	Nonpriority creditor's name and mailing address WOODWICK P.O. BOX 934101 ATLANTA GA 31193-4101 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.756.	Nonpriority creditor's name and mailing address WOONSOCKET URGENT CARE 1210 BOSTON PROVIDENCE TPKE NORWOOD MA 02062-5061 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$317.61

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.757.	Nonpriority creditor's name and mailing address WORKMAN PUBLISHING CO, INC PO BOX 21142 NEW YORK NY 10087-1142	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$19,621.92
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.758.	Nonpriority creditor's name and mailing address WORLDLINK INTEGRATION GROUP 21076 BAKE PARKWAY STE 106 LAKE FOREST CA 92630	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$540.00
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	
3.759.	Nonpriority creditor's name and mailing address WORTHY PROMOTIONAL PRODUCTS PO BOX 240490 ECLECTIC AL 36024	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed	Amount of claim \$6,483.75
	Date or dates debt was incurred VARIOUS	Basis for the claim: TRADE PAYABLES	
	Last 4 digits of account number:	Is the claim subject to offset? ☒ No ☐ Yes	

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.760.	Nonpriority creditor's name and mailing address XIAMEN FURTUNE-ADD ARTS CO., LTD ROOM A-E, 7/F, GUOTAI BUILDING, #392 JIAHE ROAD XIAMEN CHINA 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN
3.761.	Nonpriority creditor's name and mailing address XL SPECIALTY INSURANCE CO. 100 CONSTITUTION PLZ 17TH FL HARTFORD CT 06103 Date or dates debt was incurred Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$0.00
3.762.	Nonpriority creditor's name and mailing address YANKEE CANDLE COMPANY P.O. BOX 31804 HARTFORD CT 06150-1804 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim UNKNOWN

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

3.763.	Nonpriority creditor's name and mailing address YOUNG'S INC. P.O. BOX 145 DUNDEE MI 48131 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$6,563.42
3.764.	Nonpriority creditor's name and mailing address ZADE ASSOCIATESLLC 140 BEACH STREET BOSTON MA 02111 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$9,000.00
3.765.	Nonpriority creditor's name and mailing address ZORBITZ, INC. 5948 LINDENHURST AVENUE LOS ANGELES CA 90036 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> ☐ Contingent ☐ Unliquidated ☐ Disputed Basis for the claim: TRADE PAYABLES Is the claim subject to offset? ☒ No ☐ Yes	Amount of claim \$7,549.70

Debtor **The Paper Store, LLC**Case number (if known) **20-40743****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
DEBEVOISE AND PLIMPTON, LLC KEVIN R GRONDAHL 919 THIRD AVE NEW YORK NY 10022	Part 2 line 3.279	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.719	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.720	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.724	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.725	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.552	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.573	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.574	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.162	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.393	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.94	_____
GOULSTON & STORRS PC VANESSA P MOODY,ESQ 400 ATLANTIC AVE BOSTON MA 02110-3333	Part 2 line 3.362	_____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.245

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.108

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.732

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.4

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.467

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.510

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.101

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.168

GOULSTON & STORRS PC
VANESSA P MOODY,ESQ
400 ATLANTIC AVE
BOSTON MA 02110-3333

Part 2 line 3.60

HONOR S HEATH,ESQ
LEGAL DEPT
107 SELDEN ST
BERLIN CT 06037

Part 2 line 3.198

HONOR S HEATH,ESQ
LEGAL DEPT
107 SELDEN ST
BERLIN CT 06037

Part 2 line 3.199

HUNTON ANDREWS KURTH LLP
CHRISTOPHER M PARDO;ANNA L ROTHSCHILD
60 STATE ST.,STE 2400
BOSTON MA 02109

Part 2 line 3.753

HUNTON ANDREWS KURTH LLP
CHRISTOPHER M PARDO;ANNA L ROTHSCHILD
60 STATE ST.,STE 2400
BOSTON MA 02109

Part 2 line 3.647

HUNTON ANDREWS KURTH LLP
CHRISTOPHER M PARDO;ANNA L ROTHSCHILD
60 STATE ST.,STE 2400
BOSTON MA 02109

Part 2 line 3.646

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

HUNTON ANDREWS KURTH LLP
CHRISTOPHER M PARDO;ANNA L ROTHSCHILD
60 STATE ST.,STE 2400
BOSTON MA 02109

Part 2 line 3.648

HUNTON ANDREWS KURTH LLP
CHRISTOPHER M PARDO;ANNA L ROTHSCHILD
60 STATE ST.,STE 2400
BOSTON MA 02109

Part 2 line 3.277

HUNTON ANDREWS KURTH LLP
GREGORY G HESSE
1445 ROSS AVE.,STE 3700
DALLAS TX 75202-2799

Part 2 line 3.753

HUNTON ANDREWS KURTH LLP
GREGORY G HESSE
1445 ROSS AVE.,STE 3700
DALLAS TX 75202-2799

Part 2 line 3.647

HUNTON ANDREWS KURTH LLP
GREGORY G HESSE
1445 ROSS AVE.,STE 3700
DALLAS TX 75202-2799

Part 2 line 3.646

HUNTON ANDREWS KURTH LLP
GREGORY G HESSE
1445 ROSS AVE.,STE 3700
DALLAS TX 75202-2799

Part 2 line 3.648

HUNTON ANDREWS KURTH LLP
GREGORY G HESSE
1445 ROSS AVE.,STE 3700
DALLAS TX 75202-2799

Part 2 line 3.277

INTERNAL REVENUE SVC
2970 MARKET ST
MAIL STOP 5Q30133
PHILADELPHIA PA 19104-5016

Part 1 line 2.371

INTERNAL REVENUE SVC
PO BOX 7346
PHILADELPHIA PA 19101-7345

Part 1 line 2.371

KROKIDAS & BLUESTEIN LLP
VINCENT J PISEGNA,ESQ
600 ATLANTIC AVE.,19TH FLOOR
BOSTON MA 02210

Part 2 line 3.684

LAW OFFICE OF HOWARD M. KAHALAS
RICHARD M. WELSH JR.
6 BEACON STREET
SUITE 1020
BOSTON MA 02108

Part 2 line 3.396

SAUL EWING ARNSTEIN & LEHR LLP
MONIQUE B DISABATINO,ESQ
1201 NORTH MARKET ST.,STE 2300
P O BOX 1266
WILMINGTON DE 19899

Part 2 line 3.619

SAUL EWING ARNSTEIN & LEHR LLP
MONIQUE B DISABATINO,ESQ
1201 NORTH MARKET ST.,STE 2300
P O BOX 1266
WILMINGTON DE 19899

Part 2 line 3.96

SAUL EWING ARNSTEIN & LEHR LLP
STEVEN C REINGOLD
131 DARTMOUTH ST
BOSTON MA 02116

Part 2 line 3.619

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

SAUL EWING ARNSTEIN & LEHR LLP
STEVEN C REINGOLD
131 DARTMOUTH ST
BOSTON MA 02116

Part 2 line 3.96

STEIN SAKS, PLLC
KENNETH WILLARD
285 PASSAIC STREET
HACKENSACK NJ 07601

Part 2 line 3.750

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

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.		\$506,306.45
5b. Total claims from Part 2	5b.	+	\$63,237,191.03
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		\$63,743,497.48

Fill in this information to identify the case:

Debtor name: The Paper Store, LLC

United States Bankruptcy Court for the: District of Massachusetts

Case number (if known): 20-40743

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

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

2. List all contracts and unexpired leases

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

2.1. Title of contract

State what the contract or lease is for

OCCUPANCY LEASE

Nature of debtor's interest

LESSEE

State the term remaining

5/31/2035

List the contract number of any government contract

910 HAMBURG TURNPIKE, LLC
601 HAMBURG TURNPIKE
WAYNE NJ 07470

2.2. Title of contract

State what the contract or lease is for

OCCUPANCY LEASE

Nature of debtor's interest

LESSEE

State the term remaining

5/31/2024

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

933 SOUTH WILLOW STREET LLC
TJ MAXX PLAZA C/O RUBICON REAL ESTATE LLC
ONE WASHINGTON STREET
SUITE 300
WELLESLEY MA 02481

2.3. Title of contract

State what the contract or lease is for

FOREIGN PACKAGE POLICY

Nature of debtor's interest

State the term remaining

7/1/21

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

ACE AMERICAN INSURANCE CO.
(CHUBB)
CHUBB GLOBAL CASUALTY
CHRISTOPHER MILLER
ROUTING 1275-2W
ONE BEAVER VLY RD
WILMINGTON DE 19803

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.4. **Title of contract** PAYROLL PROCESSING 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** _____
- Nature of debtor's interest** CONTRACT PARTY **ADP**
- State the term remaining** _____ **300 JEFFERSON BLVD.**
- List the contract number of any government contract** _____ **WARWICK RI 02888**
- 2.5. **Title of contract** SUBLEASE **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** STORE NO. 87 - FARMINGDALE, NY - AIRPORAT PLAZA LLC
- Nature of debtor's interest** LESSOR **AIRPORT PLAZA LLC**
- State the term remaining** 2/28/2021 **3333 NEW HYDE PARK ROAD SUITE 100**
- List the contract number of any government contract** _____ **P.O. BOX 5020**
- NEW HYDE PARK NY 11042-0020**
- 2.6. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **AIRPORT PLAZA LLC**
- State the term remaining** 2/28/2021 **PO BOX 62045**
- List the contract number of any government contract** _____ **NEWARK NJ 07101**
- 2.7. **Title of contract** SHOP-IN-SHOP LETTER OF 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** AUTHORIZED RETAILER APPOINTMENT
- Nature of debtor's interest** _____ **ALEX AND ANI, LLC**
- State the term remaining** _____ **COLLEEN FUGERE**
- List the contract number of any government contract** _____ **2000 CHAPEL VIEW BLVD.**
- SUITE 360**
- CRANSTON, RI 02920**
- 2.8. **Title of 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** _____
- Nature of debtor's interest** CONTRACT PARTY **ALPHA PENSION**
- State the term remaining** _____ **396 COMMONWEALTH AVE.**
- List the contract number of any government contract** _____ **UNIT D-2A**
- BOSTON MA 02215**

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.9. **Title of contract** FLOOD POLICY **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** _____
- Nature of debtor's interest** _____ AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA
11222 QUAIL ROOST DRIVE
MIAMI FL 33157
- State the term remaining** 12/16/20
- List the contract number of any government contract** _____
- 2.10. **Title of contract** AMENDMENT TO MASTER 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** MODIFIES THE PARTIES' SERVICE MASTER AGREEMENT
- Nature of debtor's interest** _____ APTOS, INC.
DANNY ROSENOFF
945 EAST PACES FERRY RD
SUITE 2500
ATLANTA GA 30326
- State the term remaining** JULY 31, 2023
- List the contract number of any government contract** _____
- 2.11. **Title of contract** WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY **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** WORKERS COMPENSATION (NH)
- Nature of debtor's interest** _____ ASSOCIATION MEMBERS WC
PO BOX 859222-9222
BRAINTREE MA 02185
- State the term remaining** 1/1/21
- List the contract number of any government contract** _____
- 2.12. **Title of 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** _____
- Nature of debtor's interest** CONTRACT PARTY AVALARA
225 S. KING STREET
STE 1800
SEATTLE WA 98104
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.13. **Title of contract** CYBER LIABILITY POLICY **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** _____
- Nature of debtor's interest** _____ BEAZLEY INSURANCE COMPANY
30 BATTERSON PARK RD
FARMINGTON CT 06032
- State the term remaining** 3/31/21
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.14. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE BEVERLY PLAZA REALTY TRUST
33 BOYLSTON STREET
CHESTNUT HILL MA 02467
- State the term remaining** 2/28/2021
- List the contract number of any government contract** _____
- 2.15. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE BISHOPS CORNER (E&A), LLC
PO BOX 536856
ATLANTA GA 30353-6856
- State the term remaining** 5/31/2027
- List the contract number of any government contract** _____
- 2.16. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE BLVDCON, LLC
PO BOX 823201
PHILADELPHIA PA 19182-3201
- State the term remaining** 5/31/2027
- List the contract number of any government contract** _____
- 2.17. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE BRE DDR SHOPPERS WORLD LLC
P.O. BOX 92472
CLEVELAND OH 44193
- State the term remaining** 2/28/2021
- List the contract number of any government contract** _____
- 2.18. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE BRIXMOR SPE 4, LP
PO BOX 645349
CINCINNATI OH 45264-5349
- State the term remaining** 5/31/2021
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.19. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE BROADWAY COMMONS
KRE BROADWAY OWNER LLC
PO BOX 28706
NEW YORK NY 10087
- State the term remaining** 2/28/2024
- List the contract number of any government contract** _____
- 2.20. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE BUCKLAND ROAD RETAIL LLC
PO BOX 2044
DEPARTMENT 7000
MEMPHIS TN 38101
- State the term remaining** 5/31/2027
- List the contract number of any government contract** _____
- 2.21. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE CANDLEWOOD LAKE ROAD LLC
R&F DANBURY, LLC
7248 MORGAN RD
PO BOX 220
LIVERPOOL NY 13088
- State the term remaining** 1/2/2025
- List the contract number of any government contract** _____
- 2.22. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE CAPE TOWN PLAZA LLC
33 BOYLSTON STREET
SUITE 3000
CHESTNUT HILL MA 02467
- State the term remaining** 8/31/2024
- List the contract number of any government contract** _____
- 2.23. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE CAPITAL AUGUSTA PROPERTIES
LLC
33 BOYLSTON STREET
SUITE 3000
CHESTNUT HILL MA 02467
- State the term remaining** 2/28/2024
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.24. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE CENTER OF HUDSON (E&A), LLC
PO BOX 536856
ATLANTA GA 30353-6856
- State the term remaining** 2/28/2022
- List the contract number of any government contract** _____
- 2.25. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE CHARLES RIVER BELLINGHAM LLC
33 BOYLSTON STREET
CHESTNUT HILL MA 02467
- State the term remaining** 2/28/2025
- List the contract number of any government contract** _____
- 2.26. **Title of 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** _____
- Nature of debtor's interest** CONTRACT PARTY CROSS INSURANCE WAKEFIELD INC.
401 EDGEWATER PL
STE 220
WAKEFIELD MA 01880
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.27. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE DELTA MB LLC
875 EAST STREET
TEWKSBURY MA 01876
- State the term remaining** 5/1/2026
- List the contract number of any government contract** _____
- 2.28. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE DEMOULAS SUPER MARKETS INC.
875 EAST STREET
TEWKSBURY MA 01876
- State the term remaining** 2/28/2025
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.29.	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 	MOOD MEDIA MULTI TERRITORY ACCOUNT SERVICE AGREEMENT SUBSCRIPTION 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease DMX, LLC D/B/A MOOD MEDIA DAVID HOODIS 2100 S IH FRONTAGE RD SUITE 200 AUSTIN TX 78704
2.30.	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 	OCCUPANCY LEASE LESSEE 2/28/2023 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease DRUM HILL ASSOCIATES 33 BOYLSTON STREET CHESTNUT HILL MA 02467
2.31.	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 	OCCUPANCY LEASE LESSEE 12/31/2021 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease DUDLEY TRADING ASSOCIATES LIMITED PARTNERSHIP PO BOX 41 WORCESTER MA 01614-0041
2.32.	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 	OCCUPANCY LEASE LESSEE 4/30/2022 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease E&A NORTHEAST LIMITED PARTNERSHIP PO BOX 536856 TENT#59745 ATLANTA GA 30353-6856
2.33.	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 	OCCUPANCY LEASE LESSEE 7/31/2025 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease E&A NORTHEAST LIMITED PARTNERSHIP PO BOX 536856 TENT#59745 ATLANTA GA 30353-6856

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.34. **Title of contract** STORAGE 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** STORAGE - BEDFORD, MA (PLACEHOLDER RECORD)
- Nature of debtor's interest** LESSEE EAGLE LEASING
291 GREAT ROAD
BEDFORD MA 01730
- State the term remaining** MONTH-TO-MONTH UNTIL TERMINATED
- List the contract number of any government contract** _____
- 2.35. **Title of contract** STORAGE 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** STORAGE - READING, MA (PLACEHOLDER RECORD)
- Nature of debtor's interest** LESSEE EAGLE LEASING
30 WALKERS BROOK DRIVE
READING MA 01867
- State the term remaining** MONTH-TO-MONTH UNTIL TERMINATED
- List the contract number of any government contract** _____
- 2.36. **Title of contract** RENTAL ORDER **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** CONTAINER & CONTAINER LOCKS - 30 FORT EDDY ROAD, CONCORD, NH 03391
- Nature of debtor's interest** LESSEE EAGLE LEASING COMPANY
P.O. BOX 923
ORANGE CT 06477
- State the term remaining** 12/11/2017 - WAS THIS RENEWED OR CONTINUED MONTH TO MONTH
- List the contract number of any government contract** _____
- 2.37. **Title of contract** RENTAL ORDER **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** CONTAINER & CONTAINER LOCKS - 14 CANDLEWOOD LAKE ROAD, BROOKFIELD, MA
- Nature of debtor's interest** LESSEE EAGLE LEASING COMPANY
P.O. BOX 923
ORANGE CT 06477
- State the term remaining** 5/18/2017 - WAS THIS RENEWED OR CONTINUED MONTH TO MONTH
- List the contract number of any government contract** _____
- 2.38. **Title of contract** RENTAL ORDER **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** CONTAINER & CONTAINER LOCKS - STORE - 11 BRICKYARD SQUARE, EPPING, NH 03042
- Nature of debtor's interest** LESSEE EAGLE LEASING COMPANY
P.O. BOX 923
ORANGE CT 06477
- State the term remaining** 8/13/2016 - WAS THIS RENEWED OR CONTINUED MONTH TO MONTH
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.39. **Title of contract** RENTAL ORDER **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** CONTAINER & CONTAINER LOCKS - (STORE) 652 MAIN ST, NORWALK, CT
- Nature of debtor's interest** LESSEE EAGLE LEASING COMPANY
P.O. BOX 923
ORANGE CT 06477
- State the term remaining** 1/10/2015 - WAS THIS RENEWED OR CONTINUED MONTH TO MONTH
- List the contract number of any government contract** _____
- 2.40. **Title of contract** RENTAL ORDER **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** CONTAINER & CONTAINER LOCKS - (STORE) 120 MARKET PLACE, ROCHESTER, NH 03839
- Nature of debtor's interest** LESSEE EAGLE LEASING COMPANY
P.O. BOX 923
ORANGE CT 06477
- State the term remaining** 5/19/2018 - WAS THIS RENEWED OR CONTINUED MONTH TO MONTH
- List the contract number of any government contract** _____
- 2.41. **Title of 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** _____
- Nature of debtor's interest** CONTRACT PARTY EAN SERVICES, LLC
10 2ND AVENUE
BURLINGTON MA 01803
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.42. **Title of contract** CORPORATE PARTNER PROGRAM SERVICE 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** ACCESS TO CAR RENTALS
- Nature of debtor's interest** _____ EAN SERVICES, LLC
KIMBERLY H. RODRIGUEZ
600 CORPORATE PARK DRIVE
ST. LOUIS MO 63105
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.43. **Title of contract** ULINK SERVICE PRICING/MASTER 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** EDI (ELECTRONIC DATA INTERCHANGE)
- Nature of debtor's interest** _____ ECUTOPIA
9089 CLAIRMONT MEES BLVD
STE 210
SAN DIEGO CA 92123
- State the term remaining** _____
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.44. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 3/31/2024
- List the contract number of any government contract** _____
- EDDY PLAZA ASSOCIATES LLC
C/O SOUTH MIAMI PROPERTIES, INC.
P.O. BOX 41468
PROVIDENCE RI 02940
- 2.45. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/31/2025
- List the contract number of any government contract** _____
- ELK BRISTOL COMMONS LLC
489 FIFTH AVENUE, 7TH FLOOR
NEW YORK NY 10017
- 2.46. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 2/28/2022
- List the contract number of any government contract** _____
- EQUITY ONE JV SUB
NORTHBOROUGH LLC
P.O. BOX 538414
ATLANTA GA 30353-8414
- 2.47. **Title of contract** STORAGE 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** STORAGE FACILITY - DEDHAM, MA, ACCOUNT NO. 1001509841
- Nature of debtor's interest** LESSEE
- State the term remaining** NOT STATED
- List the contract number of any government contract** _____
- EXTRA STORAGE SPACE
122 ALLIED DRIVE
DEDHAM MA 02026
- 2.48. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/31/2026
- List the contract number of any government contract** _____
- FELLSWAY ASSOCIATE, LLC
P.O. BOX 842368
BOSTON MA 02284-2368

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.49. **Title of contract** SUBLEASE **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** STORE NO. 90 - E. ISLIP, NY - ARC EAST ISLIP LLC
- Nature of debtor's interest** LESSOR **FK PARTNERS**
- State the term remaining** 2/29/2020 **C/O AHOLD FINANCIAL SERVICES**
- List the contract number of any government contract** _____ **AHOLD DELHAIZE DAVID HOUGH**
1385 HANCOCK STREET
QUINCY MA 02169
- 2.50. **Title of contract** VEHICLE 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** 2018 FORD EXPEDITION, VIN NO. 1726
- Nature of debtor's interest** LESSEE **FORD MOTOR CREDIT**
- State the term remaining** 3/25/2022 **ATTN LEGAL DEPARTMENT**
- List the contract number of any government contract** _____ **BANKRUPTCY GROUP**
1 AMERICAN RD
DEARBORN MI 48126-2701
- 2.51. **Title of contract** SECOND AMENDMENT TO ENGAGEMENT LETTER DATED MAY 29, 2020 **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** CRO RESTRUCTURING SERVICES
- Nature of debtor's interest** _____ **G2 CAPITAL ADVISORS, LLC**
- State the term remaining** _____ **JEFFREY UNGER, CEO**
- List the contract number of any government contract** _____ **535 BOYLSTON STREET**
11TH FLOOR
BOSTON MA 02116
- 2.52. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **GATEWAY WOODSIDE INC.**
- State the term remaining** 2/28/2023 **GATEWAYWOODSIDE**
- List the contract number of any government contract** _____ **PO BOX 845254**
FILE#55770
LOS ANGELES CA 02284-5254
- 2.53. **Title of contract** LONG TERM CARE INSURANCE CERTIFICATE **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** JAMES ANDERSON
- Nature of debtor's interest** _____ **GENWORTH LIFE INSURANCE**
- State the term remaining** _____ **COMPANY**
- List the contract number of any government contract** _____ **ATTN LEGAL DEPARTMENT**
BANKRUPTCY GROUP
6620 WEST BROAD STREET
RICHMOND VA 23230

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.54.	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	LONG TERM CARE INSURANCE CERTIFICATE JOHN ANDERSON _____ _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.55.	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	LONG TERM CARE INSURANCE CERTIFICATE JOHN CAROLAN _____ _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.56.	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	LONG TERM CARE INSURANCE CERTIFICATE ROBERT E. ANDERSON _____ _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.57.	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	LONG TERM CARE INSURANCE CERTIFICATE THOMAS ANDERSON _____ _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.58.	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	LONG TERM CARE INSURANCE CERTIFICATE CHERYL L. ANDERSON _____ _____ _____	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

2.59.	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	LONG TERM CARE INSURANCE CERTIFICATE LAURA CAROLAN 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.60.	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	LONG TERM CARE INSURANCE CERTIFICATE MARGARET LAVOI 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.61.	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	LONG TERM CARE INSURANCE CERTIFICATE MARGUERITE ANDERSON 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.62.	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	LONG TERM CARE INSURANCE CERTIFICATE MICHELLE ANDERSON 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GENWORTH LIFE INSURANCE COMPANY ATTN LEGAL DEPARTMENT BANKRUPTCY GROUP 6620 WEST BROAD STREET RICHMOND VA 23230
2.63.	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	 OCCUPANCY LEASE LESSEE 6/30/2022 	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease GGP-MAINE MALL LLC 7846 SOLUTION CENTER CHICAGO IL 60677-7008

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.64. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE GLASTONBURY MZL LLC
KATZ PROPERTIES A/R
GLA THE REALTY ASSOCIATES
FUND IX, LP
254 WEST 31ST ST 4TH FL
NEW YORK NY 10001
- State the term remaining** 7/31/2026
- List the contract number of any government contract** _____
- 2.65. **Title of contract** CLOSED END MOTOR VEHICLE 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** LEASE OF GMC YUKON, VIN NO. 5253
- Nature of debtor's interest** LESSEE GMC
PO BOX 78143
PHOENIX AZ 85034-9700
- State the term remaining** 8/30/2019 - NEED TO CONFIRM DATE - LEASE NOT LEGIBLE
- List the contract number of any government contract** _____
- 2.66. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE GREAT ROAD SHOPPING CTR.
144 GOULD STREET SUITE 206
NEEDHAM MA 02494
- State the term remaining** 5/31/2022
- List the contract number of any government contract** _____
- 2.67. **Title of contract** HALLMARK CROWN REWARDS PROGRAM AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- CARD/SPECIALTY DISTRIBUTION AGREEMENT
- GOLD CROWN SUBLICENSE AGREEMENT
- State what the contract or lease is for** DEBTOR SELLING HALLMARK MERCHANDISE AND ACCEPTING HALLMARK REWARDS CARDS HALLMARK MARKETING COMPANY, LLC
JOHN CHASE
2501 MCGEE
KANSAS CITY MO 64141-6580
- Nature of debtor's interest** _____
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.68. **Title of 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** SUBLEASE
- Nature of debtor's interest** SUBLESSOR HALLMARK RETAIL, LLC
2501 MCGEE RD 851
PO BOX 419580
KANSAS CITY MO 64141-6580
- State the term remaining** _____
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.69. **Title of 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** SUBLEASE
- Nature of debtor's interest** SUBLESSOR
- State the term remaining** _____
- List the contract number of any government contract** _____
- HALLMARK RETAIL, LLC
PO BOX 643200
PITTSBURGH PA 15264-3200
- 2.70. **Title of contract** SUBLEASE **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** STORE NO. 88 - HICKSVILLE, NY - KRE BROADWAY OWNER, LLC
- Nature of debtor's interest** SUBLESSEE
- State the term remaining** 2/28/2024
- List the contract number of any government contract** _____
- HALLMARK RETAIL, LLC,
ATTN RETAIL RENT ESTATE
MD # 163
2501 MCGEE
KANSAS CITY MO 64108
- 2.71. **Title of contract** SUBLEASE **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** STORE 91 - SMITH HAVEN/LAKE GROVE, NY - MALL AT SMITH HAVEN LLC
- Nature of debtor's interest** SUBLESSEE
- State the term remaining** 2/28/2021
- List the contract number of any government contract** _____
- HALLMARK RETAIL, LLC,
ATTN RETAIL RENT ESTATE
MD # 163
2501 MCGEE
KANSAS CITY MO 64108
- 2.72. **Title of contract** SUBLEASE **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** STORE NO. 87 - FARMINGDALE, NY - AIRPORAT PLAZA LLC
- Nature of debtor's interest** SUBLESSEE
- State the term remaining** 2/28/2021
- List the contract number of any government contract** _____
- HALLMARK RETAIL, LLC,
ATTN RETAIL RENT ESTATE
MD # 163
2501 MCGEE
KANSAS CITY MO 64108
- 2.73. **Title of contract** SUBLEASE **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** STORE NO. 90 - E. ISLIP, NY - ARC EAST ISLIP LLC
- Nature of debtor's interest** SUBLESSEE
- State the term remaining** 2/29/2020
- List the contract number of any government contract** _____
- HALLMARK RETAIL, LLC,
ATTN RETAIL RENT ESTATE
MD # 163
2501 MCGEE
KANSAS CITY MO 64108

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.74. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE HANFORD BROS. CO., LLC
C/O RETAIL BUSINESS SERVICES
PO BOX 744587
ATLANTA GA 30374-4587
- State the term remaining** 8/31/2023
- List the contract number of any government contract** _____
- 2.75. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE INLAND COMMERCIAL ESTATE
SERVICES, LLC
62903 COLLECTION CTR DR
CHICAGO IL 60693-0629
- State the term remaining** 5/31/2024
- List the contract number of any government contract** _____
- 2.76. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE INLAND TIOL REAL ESTATE
SERVICES, LLC
62903 COLLECTION CENTER DR
CHICAGO IL 60693-0629
- State the term remaining** 10/31/2022
- List the contract number of any government contract** _____
- 2.77. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE IREIT SHREWSBURY WHITE CITY
LLC
62903 COLLECTION CENTER DRIVE
CHICAGO IL 60693-0629
- State the term remaining** 6/30/2022
- List the contract number of any government contract** _____
- 2.78. **Title of contract** RENTAL 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** STORAGE FACILITY - HINGHAM
- Nature of debtor's interest** LESSEE ISTOREAGE
125 RECREATION PARK DR
HINGHAM MA 02043-4205
- State the term remaining** MONTH-TO-MONTH UNTIL TERMINATED
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.79. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE JER REALTY LLC
70 HASTINGS STREET
WELLESLEY HILLS MA 02481
- State the term remaining** 2/28/2021
- List the contract number of any government contract** _____
- 2.80. **Title of contract** FLOOD POLICY **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** _____
- Nature of debtor's interest** _____ JOHNSON & JOHNSON
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
1 JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK NJ 08933
- State the term remaining** 11/12/20
- List the contract number of any government contract** _____
- 2.81. **Title of contract** FLOOD POLICY **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** _____
- Nature of debtor's interest** _____ JOHNSON & JOHNSON
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
1 JOHNSON & JOHNSON PLAZA
NEW BRUNSWICK NJ 08933
- State the term remaining** 6/8/21
- List the contract number of any government contract** _____
- 2.82. **Title of contract** SELECT MERCHANT PAYMENT CARD PROCESSING 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** BANK ACCOUNT/CREDIT CARDS
- Nature of debtor's interest** _____ JPMORGAN CHASE BANK, N.A.
MICHAEL MOON
50 ROWES WHARF
SECOND FLOOR
BOSTON MA 02110
- State the term remaining** 7/13/22
- List the contract number of any government contract** _____
- 2.83. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE KIOP BRANFORD, LLC.
PO BOX 62045
NEWARK NJ 07101
- State the term remaining** 5/31/2027
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.84. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/31/2020
- List the contract number of any government contract** _____
- KR STRATFORD LLC
BRIXMOR PROPERTY GROUP
PO BOX 645324
CINCINNATI OH 45264-5324
- 2.85. **Title of contract** SUBLEASE **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** STORE NO. 88 - HICKSVILLE, NY - KRE BROADWAY OWNER, LLC
- Nature of debtor's interest** LESSOR
- State the term remaining** 2/28/2024
- List the contract number of any government contract** _____
- KRE BRONDWAY OWNER, LLC
ATTN MANAGING PRINCIPAL
110 NORTH SEPULVEDA BLVD
SUITE 1925
EL SEGUNDO CA 90245
- 2.86. **Title of contract** RENEWAL ORDER FORM **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** RENEWAL FOR WORKFORCE SOFTWARE
- Nature of debtor's interest** _____
- State the term remaining** 1/26/21
- List the contract number of any government contract** _____
- KRONOS INCORPORATED
CHASTITY DELPONTE
900 CHELMSFORD STREET
LOWELL MA 01851
- 2.87. **Title of 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** EXECUTORY CONTRACT
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** _____
- List the contract number of any government contract** _____
- LEASE QUERY
3 RAVINIA DRIVE NE
SUITE P7
ATLANTA GA 30346
- 2.88. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 2/28/2025
- List the contract number of any government contract** _____
- LEGACY PLACE PROPERTIES LLC
33 BOYLSTON STREET
SUITE 3000
CHESTNUT HILL MA 02467

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.89. **Title of contract** VEHICLE 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** VIN NO. 2172
- Nature of debtor's interest** LESSEE LEXUS FINANCIAL SERVICES
100 APOLLO DR SUITE 201
CHELMSFORD MA 01824
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.90. **Title of contract** SAFEPOINT 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** USE OF LOOMIS SAFES TO DEPOSIT MONEY
- Nature of debtor's interest** _____ LOOMIS ARMORED US, LLC
PATRICK J. OTERO, CFO
2500 CITY WEST BLVD
STE 2300
HOUSTON TX 77042
- State the term remaining** 7/2/2025
- List the contract number of any government contract** _____
- 2.91. **Title of contract** SERVICE 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** LOSS PREVENTION
- Nature of debtor's interest** _____ LP INNOVATIONS D/B/A DTIQ
KEVIN OBRIEN
111 SPEEN STREET
FRAMINGHAM MA 01701
- State the term remaining** MARCH 3, 2021
- List the contract number of any government contract** _____
- 2.92. **Title of contract** WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY **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** WORKERS COMPENSATION (MA)
- Nature of debtor's interest** _____ MA RETAIL MERCHANTS WC
GROUP INC.
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
35 BRAINTREE HILL OFFICE PARK
SUITE 206
BRAINTREE MA 02185
- State the term remaining** 1/1/21
- List the contract number of any government contract** _____
- 2.93. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE MALL AT SMITH HAVEN, LLC
PO BOX 643200
PITTSBURGH PA 15264-3200
- State the term remaining** 2/28/2021
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.94. **Title of contract** SUBLEASE
- State what the contract or lease is for** STORE 91 - SMITH HAVEN/LAKE GROVE, NY - MALL AT SMITH HAVEN LLC
- Nature of debtor's interest** LESSOR
- State the term remaining** 2/28/2021
- 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**
MALL AT SMITH HAVEN, LLC
M.S. MANAGEMENT ASSOCIATES INC.
225 WEST WASHINGTON STREET
INDIANAPOLIS IN 46204
- 2.95. **Title of contract** FIRST EXCESS – DIRECTORS AND OFFICERS LIABILITY POLICY
- State what the contract or lease is for** _____
- Nature of debtor's interest** _____
- State the term remaining** 2/16/21
- 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**
MARKEL AMERICAN INSURANCE CO.
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
10275 W. HIGGINS ROAD
SUITE 750
ROSEMONT IL 60018
- 2.96. **Title of contract** _____
- State what the contract or lease is for** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 2/28/2024
- 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**
MARKET STREET RETAIL SOUTH LLC
PO BOX 842375
BOSTON MA 02284-2375
- 2.97. **Title of contract** _____
- State what the contract or lease is for** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/31/2028
- 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**
MAYFLOWER SOLOMON POND
14199 COLLECTIONS CTR DR
CHICAGO IL 60693
- 2.98. **Title of contract** WORKERS COMPENSATION AND EMPLOYERS LIABILITY INSURANCE POLICY
- State what the contract or lease is for** WORKERS COMPENSATION (CT, ME, NJ, NY AND RI)
- Nature of debtor's interest** _____
- State the term remaining** 1/1/21
- 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**
MEMIC INDEMNITY COMPANY
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
1685 NORTH OPDYKE ROAD
AUBURN HILLS MI 48326

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.99. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE MG 650 MAIN LLC
C/O DV MANAGEMENT LLC
2001 WEST MAIN ST STE 248
STAMFORD CT 06702
- State the term remaining** 5/31/2022
- List the contract number of any government contract** _____
- 2.100. **Title of contract** SOFTWARE SERVICES, LICENSE AND HOSTING 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** LICENSE TO USE MIVA'S SOFTWARE AND HOSTING SERVICES
- Nature of debtor's interest** _____ MIVA MERCHANT
MEGAN STILERMAN
16745 WEST BERNARDO DRIVE
4TH FLOOR
SAN DIEGO CA 92127
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.101. **Title of contract** INDEPENDENT BOARD MEMBER 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** _____
- Nature of debtor's interest** _____ MTS ADVISORY LLC
MICHAEL T. SULLIVAN
Address Intentionally Omitted
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.102. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE NEW CREEK II, LLC
P.O. BOX 842989
BOSTON MA 02284-2989
- State the term remaining** 2/28/2025
- List the contract number of any government contract** _____
- 2.103. **Title of contract** LIFE INSURANCE – JOHN M. ANDERSON **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** _____
- Nature of debtor's interest** _____ NEW ENGLAND FINANCIAL
501 BOYLSTON ST
BOSTON MA 02116
- State the term remaining** 5/5/2021
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.104. **Title of contract** MASTER SERVICE 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** CONTRACT FOR TELECOMMUNICATION SERVICES
- Nature of debtor's interest** _____ NEW HORIZON COMMUNICATIONS
- State the term remaining** _____ ERIC HAMARRE, VP OF SALES
- List the contract number of any government contract** _____ 200 BAKER AVE
CONCORD MA 01742
- 2.105. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE NP ROYAL RIDGE, LLC
- State the term remaining** 2/28/2024 THE WILDER COMPANIES
- List the contract number of any government contract** _____ OCW RETAIL - SHUA LLC
PO BOX 412278
BOSTON MA 02241-2278
- 2.106. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE OCW RETAIL - CANTON, LLC
- State the term remaining** 5/31/2026 PO BOX 392331
PITTSBURGH PA 15251-9331
- List the contract number of any government contract** _____
- 2.107. **Title of contract** LIFE INSURANCE – THOMAS J. ANDERSON **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** _____
- Nature of debtor's interest** _____ OHIO NATIONAL LIFE INSURANCE
- State the term remaining** 1/24/2021 ATTN LEGAL DEPARTMENT
- List the contract number of any government contract** _____ BANKRUPTCY GROUP
1 FINANCIAL WAY
CINCINNATI OH 45242
- 2.108. **Title of contract** MASTER SERVICE 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** CONTRACT FOR TELECOMMUNICATION SERVICES
- Nature of debtor's interest** _____ ONBRAND24, LLC
- State the term remaining** _____ MARK FICHERA, PRESIDENT
- List the contract number of any government contract** _____ 100 CUMMINGS CENTER
STE 306L
BEVERLY MA 01915

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.109. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE PARAMUS PARK SHOPPING CENTER LP
PARAMUS PARK
PO BOX 776184
CHICAGO IL 60677-6184
- State the term remaining** 5/31/2024
- List the contract number of any government contract** _____
- 2.110. **Title of contract** AMENDMENT TO PAYPAL USER 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** PRICING AMENDMENT
- Nature of debtor's interest** _____ PAYPAL
JASON JOHNSON, SR. DIRECTOR
2211 N 1ST ST
SAN JOSE CA 95131
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.111. **Title of contract** STATEMENT OF WORK **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** CLOUD AND MANAGEMENT & SERVICES AGREEMENT
- Nature of debtor's interest** _____ PC CONNECTION SALES CORPORATION
DAVE THOMAS
730 MILFORD ROAD
MERRIMACK NH 03054
- State the term remaining** JULY 31, 2021
- List the contract number of any government contract** _____
- 2.112. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE PHEASANT LANE REALTY TRUST
13205 COLLECTIONS CENTER DRIVE
CHICAGO IL 60693
- State the term remaining** 5/31/2021
- List the contract number of any government contract** _____
- 2.113. **Title of contract** COMMERCIAL INSURANCE **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** PACKAGE POLICY (GENERAL LIABILITY, FLOOD, EARTHQUAKE, WINDSTORM/HAIL, INLAND MARINE, EMPLOYEE BENEFITS ERRORS OR OMISSIONS)
- Nature of debtor's interest** _____ PHOENIX INSURANCE COMPANY (TRAVELER)
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
1 AMERICAN ROW
HARTFORD CT 06103
- State the term remaining** 1/1/21
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.114. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE PLEASANT SHOPS (EDENS), LLC
PO BOX 536856
TENT # 66521
ATLANTA GA 30353-6856
- State the term remaining** 2/28/2022
- List the contract number of any government contract** _____
- 2.115. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE POINT-LC1, LLC
C/O BERKSHIRE BANK
PO BOX 185-C
WORCESTER MA 01614
- State the term remaining** 5/31/2026
- List the contract number of any government contract** _____
- 2.116. **Title of contract** STORAGE 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** (STORE) 435 SWAMPSCOTT RD, SALEM, MA 01907
- Nature of debtor's interest** LESSEE PRIME STORAGE
38SWAMPSCOTT RD
SALEM MA 01970
- State the term remaining** MONTH-TO-MONTH UNTIL TERMINATED
- List the contract number of any government contract** _____
- 2.117. **Title of contract** LIFE INSURANCE – LAURA E. CAROLAN **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** _____
- Nature of debtor's interest** _____ PRUDENTIAL FINANCIAL
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
802 PRUDENTIAL PLAZA
NEWARK NJ 07102
- State the term remaining** 6/25/2033
- List the contract number of any government contract** _____
- 2.118. **Title of contract** LIFE INSURANCE – MARGARET ANDERSON **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** _____
- Nature of debtor's interest** _____ PRUDENTIAL FINANCIAL
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
802 PRUDENTIAL PLAZA
NEWARK NJ 07102
- State the term remaining** 7/8/2033
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.119. **Title of contract** LIFE INSURANCE – JAMES C. ANDERSON **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** _____
- Nature of debtor's interest** _____ PRUDENTIAL FINANCIAL
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
802 PRUDENTIAL PLAZA
NEWARK NJ 07102
- State the term remaining** 4/14/2033
- List the contract number of any government contract** _____
- 2.120. **Title of contract** MANAGEMENT LIABILITY POLICY **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** _____
- Nature of debtor's interest** _____ QBE SPECIALTY INSURANCE CO.
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
1 QBE WAY
SUN PRAIRIE WI 53596-0002
- State the term remaining** 2/16/21
- List the contract number of any government contract** _____
- 2.121. **Title of 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** EXECUTORY CONTRACT
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** _____ QUAD
N61 W23044 HARRY'S WAY
SUSSEX WI 53089-3995
- List the contract number of any government contract** _____
- 2.122. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/31/2025
- List the contract number of any government contract** _____ RAINIER COLONY PLACE
ACQUISITIONS, LLC
ATTN: DANIEL S. LOVELL
13760 NOEL ROAD
SUITE 800
DALLAS TX 75240
- 2.123. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/31/2027
- List the contract number of any government contract** _____ RAMSEY INTERSTATE CENTER LLC
95 NORTH STATE ROUTE 17
SUITE 100
PARAMUS NJ 07652

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.124. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE RD MANAGEMENT LLC
WATERVIEW MARKETPLACE
OWNER LLC
810 SEVENTH AVE
10TH FL
NEW YORK NY 10019
- State the term remaining** 5/30/2030
- List the contract number of any government contract** _____
- 2.125. **Title of contract** MASTER ORDERING 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** _____
- Nature of debtor's interest** _____ REDPOINT GLOBAL INC.
DALE H. RENNER, CEO
36 WASHINGTON STREET
SUITE 120
WELLESLEY HILLS MA 02481
- State the term remaining** DECEMBER 31, 2021
- List the contract number of any government contract** _____
- 2.126. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE REDSTONE OPERATING LTD.
PTSHIP
33 BOYLSTON STREET
CHESTNUT HILL MA 02467
- State the term remaining** 2/28/2024
- List the contract number of any government contract** _____
- 2.127. **Title of contract** MASTER SERVICES & LICENSE 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** _____
- Nature of debtor's interest** _____ RETALON INC.
DIANNE MCCOUBREY
2727 STEELES AVE W.
SUITE 202
TORONTO ON M3K 3G9
CANADA
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.128. **Title of contract** MASTER SERVICES 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** LICENSE FOR USE OF RIBA'S PRODUCT
- Nature of debtor's interest** _____ RIBA RETAIL INC.
RICK BORETSKY
5950 WESTBURY AVE
MONTREAL QC H3W 2W9
CANADA
- State the term remaining** _____
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.129. **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** LEASE OF CERTAIN EQUIPMENT
- Nature of debtor's interest** LEASE OF PRODUCT: RICOH IMC2000 CONFIGURABLE PTO MODEL **RICOH USA, INC.**
- State the term remaining** _____ **NANNETTE MICKEN, VP, LOAN**
- List the contract number of any government contract** _____ **ADMINISTRATION MANAGER**
- _____ **70 VALLEY STREAM PARKWAY**
- _____ **MALVERN PA 19355**
- 2.130. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **R-K BLACK ROCK I, LLC**
- State the term remaining** 2/28/2023 **CL400018**
- List the contract number of any government contract** _____ **PO BOX 5046**
- _____ **NEW BRITAIN CT 06050-5046**
- 2.131. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **RK MIDDLETOWN VILLAGE LLC**
- State the term remaining** 5/31/2029 **50 CABOT STREET**
- List the contract number of any government contract** _____ **NEEDHAM MA 02494**
- 2.132. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **RK TAUNTON CROSSING LLC**
- State the term remaining** 5/31/2027 **50 CABOT ST**
- List the contract number of any government contract** _____ **NEEDHAM MA 02494**
- 2.133. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **ROCKAWAY CENTER ASSOCIATES**
- State the term remaining** 5/31/2026 **ROCKAWAY TOWNSQUARE**
- List the contract number of any government contract** _____ **CHICAGO IL 60677-2829**
- _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.134. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE ROUTE 140 SCHOOL STREET LLC
ROUTE140
SUITE 3000
CHESTNUT HILL MA 02467
- State the term remaining** 5/31/2031
- List the contract number of any government contract** _____
- 2.135. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE ROUTE 146 MILLBURY LLC
33 BOYLSTON STREET
CHESTNUT HILL MA 02467
- State the term remaining** 5/31/2024
- List the contract number of any government contract** _____
- 2.136. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE ROXVILLE ASSOCIATES
P.O. BOX 48
GREEN VILLAGE NJ 07935-0048
- State the term remaining** 8/31/2023
- List the contract number of any government contract** _____
- 2.137. **Title of contract** TAX SERVICES **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** FINANCIAL AUDIT/TAX ADVISORY
- Nature of debtor's interest** _____ RSM
MICHAEL BARTUCCA, PARTNER
80 CITY SQ.
BOSTON MA 02129
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.138. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE SDC CLIFTON COMMONS, INC
P.O. BOX 209267
AUSTIN TX 78720-9267
- State the term remaining** 5/31/2026
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.139. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE SUDBURY CROSSING LTD PARTNERSHIP
- State the term remaining** 1/10/2021 SUDBURY CROSSING STATION LLC
- List the contract number of any government contract** _____ PO BOX 645414 PITTSBURGH PA 645414
-
- 2.140. **Title of 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** DENTAL PLAN
- Nature of debtor's interest** _____ SUN LIFE ASSURANCE COMPANY OF CANADA
- State the term remaining** _____ (800) 247-6875
- List the contract number of any government contract** _____ WWW.SUNLIFE.COM/US ONE SUN LIFE EXECUTIVE PARK WELLESLEY HILLS, MA 02481
-
- 2.141. **Title of 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** VISION PLAN
- Nature of debtor's interest** _____ SUN LIFE ASSURANCE COMPANY OF CANADA
- State the term remaining** _____ (800) 247-6875
- List the contract number of any government contract** _____ WWW.SUNLIFE.COM/US ONE SUN LIFE EXECUTIVE PARK WELLESLEY HILLS, MA 02481
-
- 2.142. **Title of contract** ACCIDENT INSURANCE **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** _____
- Nature of debtor's interest** _____ SUN LIFE ASSURANCE COMPANY OF CANADA
- State the term remaining** _____ (800) 247-6875
- List the contract number of any government contract** _____ WWW.SUNLIFE.COM/US ONE SUN LIFE EXECUTIVE PARK WELLESLEY HILLS, MA 02481
-
- 2.143. **Title of contract** POLICY FOR EMPLOYEE VOLUNTARY LIFE, EMPLOYEE VOLUNTARY ACCIDENTAL DEATH AND DISMEMBERMENT, DEPENDENT VOLUNTARY LIFE AND DEPENDENT VOLUNTARY ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE **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** _____ SUN LIFE ASSURANCE COMPANY OF CANADA
- Nature of debtor's interest** _____ (800) 247-6875
- State the term remaining** _____ WWW.SUNLIFE.COM/US
- List the contract number of any government contract** _____ ONE SUN LIFE EXECUTIVE PARK WELLESLEY HILLS, MA 02481

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.144. **Title of contract** CRITICAL ILLNESS INSURANCE **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** _____
- Nature of debtor's interest** _____ SUN LIFE ASSURANCE COMPANY OF CANADA
(800) 247-6875
WWW.SUNLIFE.COM/US
ONE SUN LIFE EXECUTIVE PARK
WELLESLEY HILLS, MA 02481
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.145. **Title of contract** VOLUNTARY LONG TERM DISABILITY INCOME INSURANCE **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** _____
- Nature of debtor's interest** _____ SUN LIFE ASSURANCE COMPANY OF CANADA
(800) 247-6875
WWW.SUNLIFE.COM/US
ONE SUN LIFE EXECUTIVE PARK
WELLESLEY HILLS, MA 02481
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.146. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 5/30/2030
- List the contract number of any government contract** _____ SUNRISE PROMENADE ASSOCIATES
SPIEGEL ASSOCIATES
ATTN: PRESIDENT
375 N BROADWAY
PENTHOUSE
JERICHO NY 11753
- 2.147. **Title of contract** MASTER 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** _____
- Nature of debtor's interest** _____ TALENTREEF, INC.
KAREN SAWYER, EVP CUSTOMER SUCCESS
950 17TH ST.
DENVER CO 80202
- State the term remaining** 12/31/2020
- List the contract number of any government contract** _____
- 2.148. **Title of contract** COMMERCIAL INSURANCE **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 AUTOMOBILE LIABILITY
- Nature of debtor's interest** _____
- State the term remaining** 1/1/21
- List the contract number of any government contract** _____ THE PHOENIX INSURANCE COMPANY (TRAVELER)
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
1 AMERICAN ROW
HARTFORD CT 06103

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.149. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE THE STOP & SHOP SUPERMARKET COMPANY LLC
PO BOX 3797
BOSTON MA 02241-3797
- State the term remaining** 5/31/2022
- List the contract number of any government contract** _____
- 2.150. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE THE STOP & SHOP SUPERMARKET COMPANY LLC
PO BOX 3797
BOSTON MA 02241-3797
- State the term remaining** 6/30/2024
- List the contract number of any government contract** _____
- 2.151. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE THE STOP & SHOP SUPERMARKET COMPANY LLC,
ARC EAST ISLIP LLC
2501 MCGEE
PO BOX 419580 MD 851
KANSAS CITY MO 64141-6580
- State the term remaining** 2/28/2020
- List the contract number of any government contract** _____
- 2.152. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE TPS LLC
20 MAIN ST
ACTON MA 01720
- State the term remaining** 6/30/2023
- List the contract number of any government contract** _____
- 2.153. **Title of contract** EXCESS FOLLOW-FORM AND UMBRELLA LIABILITY INSURANCE POLICY **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** EXCESS UMBRELLA LIABILITY POLICY
- Nature of debtor's interest** _____ TRAVELERS PROPERTY CASUALTY CO OF AMERICA
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
ONE TOWER SQUARE
HARTFORD CT 06183
- State the term remaining** 1/1/21
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.154. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE TRT BRAINTREE II LLC
PO BOX 809144
CHICAGO IL 60680-9144
- State the term remaining** 5/31/2027
- List the contract number of any government contract** _____
- 2.155. **Title of contract** ADVANTAGE HMO 2000 **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** HEALTH INSURANCE
- Nature of debtor's interest** _____ TUFTS
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
705 MT AUBURN STREET
WATERTOWN MA 02472
- State the term remaining** 5/31/2021
- List the contract number of any government contract** _____
- 2.156. **Title of contract** ADVANTAGE PPO SAVER 3000 **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** HEALTH INSURANCE
- Nature of debtor's interest** _____ TUFTS
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
705 MT AUBURN STREET
WATERTOWN MA 02472
- State the term remaining** 5/31/2021
- List the contract number of any government contract** _____
- 2.157. **Title of contract** PPO BASIC 25 - CIGNA PPO **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** HEALTH INSURANCE
- Nature of debtor's interest** _____ TUFTS
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
705 MT AUBURN STREET
WATERTOWN MA 02472
- State the term remaining** POLICY ENDS 5/31/2021
- List the contract number of any government contract** _____
- 2.158. **Title of contract** HMO VALUE 25 **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** HEALTH INSURANCE
- Nature of debtor's interest** _____ TUFTS
ATTN LEGAL DEPARTMENT
BANKRUPTCY GROUP
705 MT AUBURN STREET
WATERTOWN MA 02472
- State the term remaining** POLICY ENDS 5/31/2021
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.159. **Title of contract** ADVANTAGE PPO 2000 - CIGNA PPO **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** HEALTH INSURANCE
- Nature of debtor's interest** _____ TUFTS
- State the term remaining** 5/31/2021 ATTN LEGAL DEPARTMENT
- List the contract number of any government contract** _____ 705 MT AUBURN STREET
WATERTOWN MA 02472
- 2.160. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE TWO WALKERS BROOK CROSSING, LLC
- State the term remaining** 2/28/2023 C/O THE WILDER COMPANIES
- List the contract number of any government contract** _____ 800 BOYLSTON ST STE 1300
BOSTON MA 02199
- 2.161. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE UB POMPTON LAKES I, LLC
- State the term remaining** 2/28/2024 POMPTON LAKES HYE PARTNERS
- List the contract number of any government contract** _____ PO BOX 371328
PITTSBURG PA 15250-7328
- 2.162. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE UB STAMFORD, LP
- State the term remaining** 5/31/2026 321 RAILROAD AVENUE
- List the contract number of any government contract** _____ GREENWICH CT 06830
- 2.163. **Title of contract** SHORT TERM DISABILITY, PLAN DOCUMENT, **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** _____
- Nature of debtor's interest** _____ UNION SECURITY INSURANCE COMPANY
- State the term remaining** _____ ATTN LEGAL DEPARTMENT
- List the contract number of any government contract** _____ 2323 GRAND BLVD
KANSAS CITY MO 64108-2670

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.164. **Title of contract** SHORT TERM DISABILITY **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** _____
- Nature of debtor's interest** _____ UNION SECURITY INSURANCE COMPANY
- State the term remaining** _____ ATTN LEGAL DEPARTMENT
- List the contract number of any government contract** _____ BANKRUPTCY GROUP
2323 GRAND BLVD
KANSAS CITY MO 64108-2670
- 2.165. **Title of contract** UPS ADVISORY AND TECHNICAL SUPPORT SERVICES 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** SPECIAL UPS-RELATED SERVICES
- Nature of debtor's interest** _____ UPS
MICHELLE POLLOCK
- State the term remaining** _____ 55 GLENLAKE PARKWAY NE
ATLANTA GA 30328
- List the contract number of any government contract** _____
- 2.166. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE URBAN EDGE/HANOVER UE LLC
- State the term remaining** 5/31/2028 CONRANS UE LLC
PO BOX 645755
PITTSBURGH PA 15264-5255
- List the contract number of any government contract** _____
- 2.167. **Title of contract** 401(K) PROFIT SHARING PLAN **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** _____
- Nature of debtor's interest** _____ VOYA
- State the term remaining** _____ MARK SALAMONE
396 COMMONWEALTH AVE
- List the contract number of any government contract** _____ UNIT D2A
BOSTON MA 02215
- 2.168. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE W/S HADLEY PROPERTIES II LLC
- State the term remaining** 2/28/2022 33 BOYLSTON STREET
SUITE 3000
CHESTNUT HILL MA 02467
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.169. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE W/S LEBANON LLC
33 BOYSLTON STREET
SUITE 3000
CHESTNUT HILL MA 02467
- State the term remaining** 2/28/2021
- List the contract number of any government contract** _____
- 2.170. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE W/S PEAK CANTON PROPERTIES LLC
33 BOYLSTON STREET
SUITE 3000
CHESTNUT HILL MA 02467
- State the term remaining** 2/28/2026
- List the contract number of any government contract** _____
- 2.171. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE W/S SMITHFIELD ASSOCIATES LLC
33 BOYLSTON STREET
CHESTNUT HILL MA 02467
- State the term remaining** 5/31/2026
- List the contract number of any government contract** _____
- 2.172. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE W/S WAREHAM PROPERTIES LLC
33 BOYSTON STREET
SUITE 3000
CHESTNUT HILL MA 02467
- State the term remaining** 5/31/2024
- List the contract number of any government contract** _____
- 2.173. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE W/S/K SEEKONK ASSOCIATES LLC
33 BOYLSTON STREET
SUITE 3000
CHESTNUT HILL MA 02467
- State the term remaining** 12/31/2023
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.174. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE W/S/M HINGHAM PROPERTIES LLC
33 BOYLSTON STREET
CHESTNUT HILL MA 02467
- State the term remaining** 5/31/2024
- List the contract number of any government contract** _____
- 2.175. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE WAKEFIELD MALL, LLC
CHARLES RIVER TOWERS
151 COOLIDGE AVE, UNIT 104
WATERTOWN MA 02472-2865
- State the term remaining** 5/31/2023
- List the contract number of any government contract** _____
- 2.176. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE WAL LEX LLC
C/O MELLON TRUST OF NE
PO BOX 55865
BOSTON MA 02205
- State the term remaining** 2/28/2025
- List the contract number of any government contract** _____
- 2.177. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE WALNUT ASSOCIATES LP
208 BROADWAY
SAUGUS MA 01906
- State the term remaining** 4/30/2022
- List the contract number of any government contract** _____
- 2.178. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE WALT WHITMAN MALL, LLC
PO BOX 776405
CHICAGO IL 60677-6405
- State the term remaining** 3/1/2020
- List the contract number of any government contract** _____

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.179. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **WARWICK MALL C/O BLISS PROPERTIES**
- State the term remaining** 3/31/2021 **PO BOX 75893**
- List the contract number of any government contract** _____ **BALTIMORE MD 21275-5893**
102
- 2.180. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **WATERSTONE RETAIL EPPING GROUND TENT, LLC**
- State the term remaining** 2/28/2023 **PO BOX 392389**
- List the contract number of any government contract** _____ **PITTSBURGH PA 15251-9389**
- 2.181. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **WATERSTONE ROCHESTER GROUND TENT LLC**
- State the term remaining** 5/31/2027 **WATERSTONE ROCHESTER, LLC**
- List the contract number of any government contract** _____ **117 KENDRICK ST**
STE 325
NEEDHAM MA 02494
- 2.182. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **WATERVIEW MARKETPLACE OWNER**
- State the term remaining** _____ **810 SEVENTH AVENUE**
- List the contract number of any government contract** _____ **TENTH FLOOR**
NEW YORK NY 10019
- 2.183. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE **WAYNE PSC, LLC**
- State the term remaining** _____ **505 MAIN STREET**
- List the contract number of any government contract** _____ **PO BOX 667**
HACKENSACK NJ 07602

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

- 2.184. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE WEDGEWOOD REALTY TRUST
20 MAIN ST
ACTON MA 01720
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.185. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE WESTFORD VALLEY
MARKETPLACE, INC
C/O THE WILDER COMPANIES, LTD
PO BOX 412776
BOSTON MA 02241-2776
- State the term remaining** 2/28/2025
- List the contract number of any government contract** _____
- 2.186. **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** LEASE OF CERTAIN EQUIPMENT AND TANGIBLE
PROPERTY, SOFTWARE, GENERAL INTANGIBLES, AND
RELATED SERVICES
- Nature of debtor's interest** _____ WINTHROP RESOURCES
CORPORATION
JAMIE REMER
11100 WAYATA BOULEVARD
SUITE 800
MINNETONKA MN 55305
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.187. **Title of 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** OCCUPANCY LEASE
- Nature of debtor's interest** LESSEE WJG REALTY TRUST
C/O STOP & SHOP SUPERMARKET
COMPANY LLC
PO BOX 3797
BOSTON MA 02241
- State the term remaining** 2/28/2020
- List the contract number of any government contract** _____
- 2.188. **Title of contract** EXCESS DIRECTORS AND OFFICERS LIABILITY POLICY –
A-SIDE DIC COVERAGE **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** _____
- Nature of debtor's interest** _____ XL SPECIALTY
INSURANCE CO.
EXECUTIVE OFFICES
70 SEAVIEW AVENUE
STAMFORD CT 06902-6040
- State the term remaining** 2/16/21
- List the contract number of any government contract** _____

Fill in this information to identify the case:

Debtor name: The Paper Store, LLC

United States Bankruptcy Court for the: District of Massachusetts

Case number (if known): 20-40743

☐ 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. AE CLARK ENTERPRISES	ROXBURY BUSINESS COMPLEX 19 ROUTE 10E BLDG 1-13 SUCCASUNNA NJ 07876	ROXVILLE ASSOCIATES	☐ D ☒ E/F ☒ G
2.2. ROMAN, KENNETH M, DIANE B ROMAN TIMOTHY A ROMAN AND DEBORAH B ROMAN ATTN KENNETH ROMAN	Address Intentionally Omitted	PLEASANT SHOPS (EDENS), LLC	☐ D ☒ E/F ☒ G
2.3. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	KAYNE SENIOR CREDIT II, LLC	☒ D ☐ E/F ☐ G
2.4. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	TRT BRAINTREE LLC	☐ D ☒ E/F ☒ G
2.5. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	W/S PEAK CANTON PROPERTIES LLC	☐ D ☒ E/F ☒ G

Debtor **The Paper Store, LLC**

Case number (if known) **20-40743**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.6. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	SUNRISE PROMENADE ASSOCIATES	☐ D ☐ E/F ☒ G
2.7. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	MG 650 MAIN LLC C/O DV MANAGEMENT LLC	☐ D ☒ E/F ☒ G
2.8. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	PARAMUS PARK SHOPPING CENTER LP	☐ D ☒ E/F ☒ G
2.9. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	WATERVIEW MARKETPLACE OWNER LLC	☐ D ☐ E/F ☒ G
2.10. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	GGP-MAINE MALL LLC	☐ D ☒ E/F ☒ G
2.11. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	DELTA MB LLC	☐ D ☐ E/F ☒ G
2.12. TPS HOLDINGS, LLC	20 MAIN ST ACTON MA 01720	910 HAMBURG TURNPIKE, LLC	☐ D ☐ E/F ☒ G

Fill in this information to identify the case:

Debtor name: The Paper Store, LLC

United States Bankruptcy Court for the: District of Massachusetts

Case number (if known): 20-40743

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

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

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

Declaration and signature

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

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

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

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

Executed on 8/4/2020
MM/DD/YYYY

x

/s/ Don Van der Wiel

Signature of individual signing on behalf of debtor

Don Van der Wiel
Printed name

Chief Restructuring Officer
Position or relationship to debtor