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PROPOSED ATTORNEYS FOR DEBTORS

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION**

In re:	§ Chapter 11
	§
Corsicana Bedding, LLC, <i>et al.</i> , ¹	§ Case No. 22-90016-elm11
	§
Debtors.	§ Jointly Administered

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

Introduction

On June 25, 2022 (the “Petition Date”), Corsicana Bedding, LLC and the above-captioned debtors and debtors-in-possession (collectively, the “Debtors”), filed voluntary petitions for relief under Chapter 11 of the Title 11 of the United States Code (the “Bankruptcy Code”) in the United States Bankruptcy Court for the Northern District of Texas (the “Bankruptcy Court”). The Chapter 11 cases are jointly administered under Case No. 22-90016-ELM11 (the “Chapter 11 Cases”).

¹ The Debtors in these chapter 11 cases, along with the last four digits of each Debtor’s federal tax identification number, are: Corsicana Bedding, LLC (3019) (“Corsicana”); Thetford Leasing LLC (7227) (“Thetford”); Olive Branch Building, LLC (7227) (“Olive Branch”); Eastern Sleep Products Company (1185) (“Eastern Sleep”); Englander-Symbol Mattress of Mississippi, LLC (5490) (“Englander Symbol”); Hylton House Furniture, Inc. (5992) (“Hylton House”); Luuf, LLC (3450) (“Luuf”); Symbol Mattress of Florida, Inc. (4172) (“Symbol Florida”); Symbol Mattress of Pennsylvania, Inc. (3160) (“Symbol Pennsylvania”); Symbol Mattress of Wisconsin, Inc. (0871) (“Symbol Wisconsin”); Symbol Mattress Transportation, Inc. (1185) (“Symbol Transportation”); and Master Craft Sleep Products, Inc. (4961) (“Master Craft”). The location of the Debtors’ service address is P.O. Box 3233, Fort Worth, Texas 76113.

With the assistance of their proposed advisors, the Debtors' management prepared the Schedules of Assets and Liabilities (collectively, the "Schedules") and the Statements of Financial Affairs (the "SOFAs" and together with the Schedules, the "Schedules and SOFAs") pursuant to section 521 of the Bankruptcy Code and Rule 1007 of the Federal Rules of Bankruptcy Procedure. The Schedules and SOFAs are unaudited and do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States ("GAAP"), and they are they not intended to be fully reconciled to the financial statements.

Although the Debtors' management has made every reasonable effort to ensure that the Schedules and SOFAs are accurate and complete based on information that was available to them at the time of preparation, subsequent information or discovery may result in material changes to these Schedules and SOFAs, and inadvertent errors or omissions may have occurred. Subsequent receipt of information or an audit may result in material changes in financial data requiring amendment of the Schedules and SOFAs. Accordingly, the Schedules and SOFAs remain subject to further review and verification by the Debtors. The Debtors reserve their right to amend the Schedules and SOFAs from time-to-time as may be necessary or appropriate.

These general notes regarding the Debtors' Schedules and SOFAs (the "Global Notes") comprise an integral part of the Schedules and SOFAs filed by the Debtors and should be referenced in connection with any review of the Schedules and SOFAs. Nothing contained in the Schedules and SOFAs shall constitute a waiver of any rights or claims of the Debtors against any third party, or in or with respect to any aspect of these Chapter 11 Cases.

Michael Juniper, the Debtors' Chief Restructuring Officer, has signed each of the Schedules and SOFAs. Mr. Juniper is an authorized signatory for each of the Debtors. In reviewing and signing the Schedules and SOFAs, Mr. Juniper has relied upon the efforts, statements, and representations of various personnel employed by the Debtors and their advisors. Mr. Juniper has not (and could not have) personally verified the accuracy of each statement and representation contained in the Schedules and SOFAs, including statements and representations concerning amounts owed to creditors, classification of such amounts, and creditor addresses.

Global Notes

- 1. Redacted information.** Pursuant to the *Order (I) Authorizing the Debtors to File a Consolidated List of Creditors, (II) Authorizing the Debtors to Redact Certain Personal Identification Information of Individual Creditors and Current and Former Employees, and (III) Approve the Form and Manner of Notifying Creditors of the Commencement of the Debtors' Chapter 11 Cases and Bar Date* [Doc. No. 66], the home address information of individuals in the Schedules and SOFAs has been redacted (the "Confidential Information"). Any party in interest that requires access to the Confidential Information for purposes of service in connection with these Chapter 11 Cases may request a copy of the Confidential Information by contacting counsel to the Debtors, Steve Pezanosky (stephen.pezanosky@haynesboone.com) or David Staab (david.staab@haynesboone.com), and such counsel shall provide the Confidential Information within five (5) business days of such request. Moreover, any individual

claimant who would like to confirm their claim, including any Confidential Information, may do so by contacting the foregoing counsel to the Debtors.

2. **Asset Presentation.** Unless otherwise noted, each asset and liability of the Debtors is shown on the basis of the book value of the asset or liability in the Debtors' books and records, as of June 25, 2022, and not on the basis of current market values of such interest in property or liabilities. Assets valued at \$0 are fully depreciated. The Debtors reserve their right to amend or adjust the value of each asset or liability set forth herein.
3. **Gross Revenue and Other Income Presentation.** The gross revenue and other income provided in the SOFAs is rolled-up and consolidated at Eastern Sleep Products Company for it and its specific subsidiaries (Thetford, Olive Branch, Englander Symbol, Hylton House, Luuf, Symbol Florida, Symbol Pennsylvania, Symbol Wisconsin, Symbol Transportation, and Master Craft, if applicable). The Debtors reserve their right to amend or adjust the amounts set forth herein.
4. **Liabilities.** The Debtors have sought to allocate liabilities between the prepetition and postpetition periods based on the information and research that was conducted in connection with the preparation of the Schedules and SOFAs. As additional information becomes available and further research is conducted, the allocation of liabilities between prepetition and postpetition periods may change. The Debtors also reserve the right to change the allocation of liability to the extent additional information becomes available.
5. **Intercompany Balances.** Intercompany balances exist among all Debtors. These may represent assets or liabilities depending on the Debtor and the corresponding intercompany Debtor. These have been excluded from the Schedules. These net to \$0 on a consolidated basis.
6. **Causes of Action.** Despite reasonable efforts, the Debtors might not have identified or set forth all of their causes of action against third parties as assets in their Schedules and SOFAs. The Debtors reserve any and all of their rights with respect to any causes of action they may have, and neither these Global Notes nor the Schedules and SOFAs shall be deemed a waiver of any such causes of action.
7. **Claims Description.** Any failure to designate a claim on the Debtors' Schedules or SOFAs as "disputed," "contingent" or "unliquidated" does not constitute an admission by the Debtors that such claim is not "disputed," "contingent" or "unliquidated." The Debtors reserve the right to dispute, or to assert offsets or defenses to, any claim reflected on its Schedules and SOFAs as to amount, liability, priority, secured or unsecured status, or classification, or to otherwise designate any claim as "disputed," "contingent" or "unliquidated" by filing and serving an appropriate amendment. The Debtors reserve the right to amend their Schedules or SOFAs as necessary or appropriate.
8. **Property and Equipment.** Owned property and equipment are listed at net book value. Additionally, all information set forth on the Schedules and SOFAs regarding owned equipment, merchandise and other physical assets of the Debtors is based upon the

information set forth in the Debtors' books and records. The Debtors have not completed a recent physical inventory of any of their owned equipment, merchandise or other physical assets and any information set forth in the Schedules and SOFAs may be over or understated. Further, nothing in the Schedules or SOFAs (including the failure to list leased property or equipment as owned property or equipment) is or shall be construed as an admission as to the determination of legal status of any lease (including whether any lease is a true lease or financing arrangement), and the Debtors reserve all their rights with respect to such issues. For the purposes of Schedule A/B Part 9, the value of certain assets with a net book value of zero may not be set forth on these particular Schedules. Schedule A/B Part 9 assets primarily include leasehold improvements, building improvements and construction-in-progress.

- 9. Insiders.** In the circumstances in which the Schedules require information regarding insiders or officers and directors, included herein are each Debtor's (a) directors (or persons in similar positions) and (b) officers. Attached as an exhibit to these Global Notes is the known potential insider relationships. The listing of a party as an insider is not intended to be nor should it be construed as a legal characterization of such party as an 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. Further, employees have been included in this disclosure for informational purposes only and should not be deemed to be "insiders" in terms of control of the Debtors, management responsibilities or functions, decision-making or corporate authority or as otherwise defined by applicable law, including, without limitation, the federal securities laws, or with respect to any theories of liability or for any other purpose.
- 10. Specific Notes.** These Global Notes are in addition to the specific notes set forth in the individual Schedules and SOFAs. Disclosure of information in one Schedule, SOFA, exhibit, continuation sheet even if incorrectly placed, shall be deemed to be disclosed in the correct Schedule, SOFA, exhibit or continuation sheet.
- 11. Totals.** All totals that are included in the Schedules represent totals of the liquidated amounts for the individual schedule for which they are listed.
- 12. Unliquidated Claim Amounts.** Claim amounts that could not be fairly quantified by the Debtors are scheduled as "unliquidated" or "unknown."
- 13. General Reservation of Rights.** The Debtors specifically reserve the right to amend, modify, supply, correct, change or alter any part of their Schedules and SOFAs as and to the extent necessary as they deem appropriate.

Specific Disclosures with Respect to the Debtors' Schedules

- 1. Schedule D—Creditors Holding Secured Claims.** Except as specifically stated herein, real property lessors, utility companies and other parties which may hold security deposits have not been listed on Schedule D. The Debtors have not included on Schedule D all parties that may believe their claims are secured through setoff rights, deposits

posted by, or on behalf of, the Debtors, or inchoate statutory lien rights. While reasonable efforts have been made, determination of the date upon which each claim in Schedule D was incurred or arose would be unduly and cost prohibitive, and therefore, the Debtors may not list a date for each claim listed on Schedule D.

2. **Schedule D—Prepetition ABL Facility and Prepetition Term Loans.** The Debtors' prepetition ABL credit facility (the "Prepetition ABL Facility") is memorialized in that certain Credit Agreement dated as of April 28, 2021 (as amended, restated, amended and restated, supplemented, or otherwise modified from time to time, the "Prepetition ABL Credit Agreement") by and among Corsicana Bedding, LLC, and certain of its affiliates designated therein, as borrowers, Corsicana Parent Co., LLC and certain other parties, as guarantors, the financial institutions from time to time party thereto and Wingspire Capital LLC, as administrative agent.

The Debtors' prepetition term loan credit facility (the "Prepetition Term Loans") is memorialized in that certain Financing Agreement dated as of April 28, 2021 (as amended, restated, amended and restated, supplemented, or otherwise modified from time to time the "Prepetition Term Loan Agreement") by and among, among others, Corsicana Bedding, LLC, as borrower, and certain of its affiliates designated therein as guarantors, each lender from time to time party thereto, and Blue Torch Finance, LLC, as administrative agent and collateral agent.

Although there are multiple parties that hold a portion of the debt included in the Prepetition ABL Facility and the Prepetition Term Loans, only the administrative agents have been listed for purposes of Schedule D. The descriptions provided in Schedule D are intended only as a summary. 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 any liens. Nothing in the Global Notes or the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements.

3. **Schedule E—Creditors Holding Unsecured Priority Claims.** The listing of any claim on Schedule E does not constitute an admission by the Debtors that such claim is entitled to priority under Section 507 of the Bankruptcy Code. The Debtors reserve the right to dispute the priority status of any claim on any basis. While reasonable efforts have been made, determination of the date upon which each claim in Schedule E was incurred or arose would be unduly burdensome and cost prohibitive, and therefore, the Debtors may not list a date for each claim listed on Schedule E. Additionally, the Debtors have not included employee related priority claims that existed as of the Petition Date to the extent that such claims have been or are approved for payment pursuant to orders entered by the Bankruptcy Court.
4. **Schedule F—Creditors Holding Unsecured Nonpriority Claims.** The liabilities identified in Schedule F are derived from the Debtors' books and records, which may or may not, in fact, be completely accurate, but they do represent a reasonable attempt by the Debtors to set forth their unsecured obligations. Accordingly, the actual amount of claims against the Debtors may vary from the represented liabilities. Parties in interest

should not accept that the listed liabilities necessarily reflect the correct amount of any unsecured creditor's allowed claims or the correct amount of all unsecured claims. Similarly, parties in interest should not anticipate that recoveries in these cases will reflect the relationship of aggregate asset values and aggregate liabilities set forth in the Schedules and SOFAs. Parties in interest should consult their own professionals or advisors with respect to pursuing a claim. Although the Debtors and their professionals have generated financials the Debtors believe to be reasonable, actual liabilities (and assets) may deviate from the Schedules and SOFAs due to certain events that occur throughout the duration of these chapter 11 cases. The claims listed on Schedule F arose or were incurred on various dates. In certain instances, the date on which a claim arose may be unknown or subject to dispute. Although reasonable efforts have been made to determine the date upon which claims listed in Schedule F was incurred or arose, fixing that date for each claim in Schedule F would be unduly burdensome and cost prohibitive and, therefore, the Debtors may not list a date for each claim listed on Schedule F.

5. **Schedule G—Executory Contracts.** While every effort has been made to ensure the accuracy of Schedule G, inadvertent errors or omissions may have occurred. Listing a contract or agreement on Schedule G does not constitute an admission that such contract or agreement is an executory contract or unexpired lease or that such contract or agreement was in effect on the Petition Date or is valid or enforceable. The Debtors hereby reserve all of their rights to dispute the validity, status, or enforceability of any contracts, agreements, or leases set forth in Schedule G and to amend or supplement such Schedule, as necessary. Certain of the leases and contracts listed on Schedule G may contain certain renewal options, guarantees of payment, 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. In addition, the Debtors may have entered into various other types of agreements in the ordinary course of their business, such as easements, right of way, subordination, nondisturbance agreements, supplemental agreements, amendments/letter agreements, title agreements and confidentiality agreements. Such documents are also not set forth in Schedule G. The Debtors reserve all rights to dispute or challenge the characterization of the structure of any transaction or any document or instrument related to a creditor's claim. The Debtors may be party to certain agreements that have expired by their terms, but all parties continue to operate under the agreement. Out of an abundance of caution, the Debtors have listed such agreements on Schedule G. The Debtors' inclusion of such contracts or agreements on Schedule G is not an admission that such contract or agreement is an executory contract or unexpired lease. Omission of a contract or agreement from Schedule G does not constitute an admission that such omitted contract or agreement is not an executory contract or unexpired lease. The Debtors' rights under the Bankruptcy Code with respect to any such omitted contracts or agreements are not impaired by the omission. In some cases, the same supplier or provider may appear multiple times in Schedule G. Multiple listings, if any, reflect distinct agreements between the applicable Debtor and such supplier or provider. The listing of any contract on Schedule G does not constitute an admission by the Debtors as to the validity of any such contract. The Debtors reserve the right to dispute the effectiveness of any such contract listed on Schedule G or to amend Schedule G at any time to remove any contract.

EXHIBIT – INSIDER RELATIONSHIPS

Insider or Related Party	Debtor Entity(ies)	Nature of Relationship
Blue Torch Capital	Corsicana Bedding, LLC, et al.	Indirect Equity Owner
KKR Credit	Corsicana Bedding, LLC, et al.	Indirect Equity Owner
Long Point Capital, Inc.	Corsicana Bedding, LLC, et al.	Indirect Equity Owner
Bradley Dietz	Corsicana Bedding, LLC, et al.	Director
Eric Rhea	Corsicana Bedding, LLC, et al.	Officer/Director-
Matthew Khan	Corsicana Bedding, LLC, et al.	Director
Michael Juniper	Corsicana Bedding, LLC, et al.	Chief Restructuring Officer
Scott Vogel	Corsicana Bedding, LLC, et al.	Director
Mark Jannke	Corsicana Bedding, LLC, et al.	Secretary and Treasurer
Corsicana Parent Co., LLC	Corsicana Bedding, LLC, et al.	Equity Owner

Fill in this information to identify the case:**Debtor name:** Eastern Sleep Products Company**United States Bankruptcy Court for the:** Northern District of Texas**Case number (if known):** 22-90019☐ 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

UNKNOWN

1b. Total personal property:

Copy line 91A from Schedule A/B

\$24,111,334.47

1c. Total of all property:

Copy line 92 from Schedule A/B

\$24,111,334.47

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

\$150,978,232.01

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

\$5,075.00

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

+ \$8,999,459.57

4. Total liabilities

Lines 2 + 3a + 3b

\$159,982,766.58

Fill in this information to identify the case:**Debtor name:** Eastern Sleep Products Company**United States Bankruptcy Court for the:** Northern District of Texas**Case number (if known):** 22-90019☐ 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
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2. Cash on hand

2.1. AFTERPAY (PAYMENT MECHANISM)	\$0.00
2.2. PAYPAL (PAYMENT MECHANISM)	\$5,392.40

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.	FIFTH THIRD BANK 6111 N. RIVER ROAD ROSEMONT IL 60018	CHECKING	2661	\$3,914.32
3.2.	FIFTH THIRD BANK 6111 N. RIVER ROAD ROSEMONT IL 60018	CHECKING	2653	\$427,875.65
3.3.	PRIMIS BANK 10900 NUCKOLS RD #325 GLEN ALLEN VA 23060	CHECKING	7418	\$1,895.94
3.4.	PRIMIS BANK 10900 NUCKOLS RD #325 GLEN ALLEN VA 23060	CHECKING	7415	\$174,127.04

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.					\$

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****5. Total of part 1**

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

\$613,205.35

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. LEASE

\$10,206.91

INTERNATIONAL MARKET CENTERS INC
15209-WMCV PHASE2 SPE
475 S GRAND CENTRAL PARKWAY, STE 1615
LAS VEGAS NV 89106

7.2. LEASE

\$7,247.00

INTERNATIONAL MARKET CENTERS INC
15209-WMCV PHASE2 SPE
475 S GRAND CENTRAL PARKWAY, STE 1615
LAS VEGAS NV 89106

7.3. LEASE

\$1,912.47

INTERNATIONAL MARKET CENTERS INC
15209-WMCV PHASE2 SPE
475 S GRAND CENTRAL PARKWAY, STE 1615
LAS VEGAS NV 89106**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. INSURANCE

\$80,168.00

AON

8.2. TAX

\$3,086.00

CITY OF RICHMOND ESTATE TAX BILL

8.3. AIRFARE

\$608.96

DALLAS TENNYSON (EMPLOYEE)

8.4. SUBSCRIPTION

UNDETERMINED

DUN & BRADSTREET

8.5. MTHLY FEE

\$1,827.00

JOHNSON CONTROLS SECURITY SOLUTIONS LLC

8.6. LICENSE FEE

\$2,314.38

OHM SYSTEMS

8.7. TAX

\$5,403.02

REBECCA R. LONGNAKER

8.8. INSURANCE

\$29,500.00

SENTRY INSURANCE

8.9. INSURANCE

\$8,000.00

SENTRY INSURANCE

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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

8.10. LICENSE FEE

\$6,562.74

TECHNOLOGY ASSURANCE GROUP, INC

8.11. ROYALTY

UNDETERMINED

TOMMIE COPPER INC

9. Total of part 2

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

\$156,836.48

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.**Current value of
debtor's interest****11. Accounts receivable**

Face amount

Doubtful or uncollectible
accounts

11a. ¹	90 days old or less:	\$1,041,084.00	- \$0.00	= →	\$1,041,084.00
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Face amount

Doubtful or uncollectible
accounts

11b. ¹	Over 90 days old:	\$136,183.00	- \$148,611.00	= →	(\$12,428.00)
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12. Total of part 3

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

\$1,028,656.00

¹MULTIPLE CREDITS ON MULTIPLE CUSTOMERS' ACCOUNTS**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. AXA COMPUTERSHARE PO BOX 505000 LOUISVILLE KY 40233	market value as of 3/2021	\$2,010.70
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14.2. METLIFE COMPUTERSHARE PO BOX 505000 LOUISVILLE KY 40233	market value as of 3/2021	\$8,995.44
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Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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. ¹	CHESTERFIELD LANCO, L.L.C. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.2. ¹	EASTERN SLEEP PRODUCTS - FORT WAYNE, LLC 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.3. ¹	EASTERN SLEEP PRODUCTS - POICIANA, LLC 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.4.	ENGLANDER-SYMBOL MATTRESS OF MISSISSIPPI, LLC 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.5.	HYLTON HOUSE FURNITURE, INC. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.6.	LUUF, LLC 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.7.	MASTER CRAFT SLEEP PRODUCTS, INC. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.8. ¹	SYMBOL MATTRESS - LAS VEGAS LLC 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.9.	SYMBOL MATTRESS OF FLORIDA, INC. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.10. ¹	SYMBOL MATTRESS OF NEW ENGLAND, INC. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.11.	SYMBOL MATTRESS OF PENNSYLVANIA, INC. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.12.	SYMBOL MATTRESS OF WISCONSIN, INC. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN
15.13.	SYMBOL MATTRESS TRANSPORTATION, INC. 1420 W. MOCKINGBIRD SUITE 800 DALLAS TX 75247	100.0%	_____	UNKNOWN

¹NON-DEBTOR ENTITY

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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.

\$11,006.14**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

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

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

19.1.	RAW MATERIALS - 1 - VA PLANT	1/14/2022	\$2,270,459.00	RECENT COST BASED VALUATION	\$2,270,459.00
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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.	FINISHED GOODS - 1 - VA PLANT	1/14/2022	\$181,310.00	RECENT COST BASED VALUATION	\$181,310.00

22. Other inventory or supplies

22.1. _____ \$ _____

23. Total of part 5

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

\$2,451,769.00**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: \$765,418.00 Valuation method: RECENT COST BASED VALUATION Current value: \$765,418.00

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.

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

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. _____	\$ _____	_____	\$ _____
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			\$0.00

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

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

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

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

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

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

- ☐ No
- ☐ Yes

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

- ☐ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

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

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
39.1. MIX OF LEASED AND OWNED	\$0.00	Net Book Value	UNDETERMINED
40. Office fixtures			
40.1. _____	\$ _____	_____	\$ _____

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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.	MIX OF LEASED AND OWNED	\$19,580.04	Net Book Value	\$19,580.04
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.			\$19,580.04

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

- ☐ No
☒ Yes

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

- ☒ No
☐ Yes

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

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

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available) (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles				
47.1.	AAMARK GRAPHIC SYSTEMS	\$1,504.04	Net Book Value	\$1,504.04
47.2.	AAMARK GRAPHIC SYSTEMS	\$3,281.94	Net Book Value	\$3,281.94
47.3.	1999 F150	\$0.00	Net Book Value	UNDETERMINED
47.4.	99 GRAND MARQUISE	\$0.00	Net Book Value	UNDETERMINED
47.5.	F150 WITH BED LINER-WHITE	\$0.00	Net Book Value	UNDETERMINED
47.6.	'86 USED FORD TRACTOR	\$0.00	Net Book Value	UNDETERMINED
47.7.	COLONIAL FORD TRUCK SALES	\$0.00	Net Book Value	UNDETERMINED
47.8.	COLONIAL FORD TRUCK SALES	\$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.	20" WRAPPER/SPARE BARS	\$0.00	Net Book Value	UNDETERMINED
50.2.	HOT MELT GLUE MACHINES	\$1,014.35	Net Book Value	\$1,014.35

Debtor	Eastern Sleep Products Company		Case number (if known) 22-90019	
50.3.	13 KALAMAZOO BAND SAW	\$0.00	Net Book Value	UNDETERMINED
50.4.	AIR TABLE	\$0.00	Net Book Value	UNDETERMINED
50.5.	AIR TABLE	\$0.00	Net Book Value	UNDETERMINED
50.6.	AIR TABLE	\$0.00	Net Book Value	UNDETERMINED
50.7.	AIR TABLES	\$0.00	Net Book Value	UNDETERMINED
50.8.	BALER 3060	\$0.00	Net Book Value	UNDETERMINED
50.9.	BK-6 BALE OPENER	\$0.00	Net Book Value	UNDETERMINED
50.10.	CONVEYOR SYSTEM	\$0.00	Net Book Value	UNDETERMINED
50.11.	EDGE-SWEET PVT H SLITTER	\$0.00	Net Book Value	UNDETERMINED
50.12.	EDGE-SWEETS VERTICAL SAW	\$0.00	Net Book Value	UNDETERMINED
50.13.	FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.14.	FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.15.	FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.16.	GPT1000 PILLOW TOP RUFFLER	\$0.00	Net Book Value	UNDETERMINED
50.17.	GRIBETZ QUILTING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.18.	GRIBETZ QUILTING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.19.	HARTCO CLIPPING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.20.	LACE TUFTER/MANUAL TABLE	\$0.00	Net Book Value	UNDETERMINED
50.21.	LOADING DOCK EQUIPMENT	\$0.00	Net Book Value	UNDETERMINED
50.22.	NI E 50L FORKLIFT	\$0.00	Net Book Value	UNDETERMINED
50.23.	PC-S 90 TAPE EDGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.24.	PORTER DOUBLE O/C MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.25.	PORTER FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.26.	PORTER FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.27.	PORTER FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.28.	PORTER HIGH SPEED QUILTER	\$0.00	Net Book Value	UNDETERMINED
50.29.	PORTER LABEL SEWER	\$0.00	Net Book Value	UNDETERMINED
50.30.	PORTER SEWING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.31.	QUILTING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.32.	RECOND. DOUBLE LOCK 2000	\$0.00	Net Book Value	UNDETERMINED
50.33.	RESTA HANDLE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.34.	RUFFLER-ATLANTA	\$0.00	Net Book Value	UNDETERMINED
50.35.	SERVICE STATION EQUIP	\$0.00	Net Book Value	UNDETERMINED
50.36.	SPUHL 90 PANEL CUTTER	\$0.00	Net Book Value	UNDETERMINED
50.37.	SPUHL BALE OPENER	\$0.00	Net Book Value	UNDETERMINED
50.38.	SPUHL TAPE EDGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.39.	TOYOTA FORKLIFT 5FGC25	\$0.00	Net Book Value	UNDETERMINED
50.40.	UNDERGROUND GAS TANKS	\$0.00	Net Book Value	UNDETERMINED
50.41.	VARIOUS MACH UPGRADES EDGE INDS.	\$0.00	Net Book Value	UNDETERMINED
50.42.	WBSCO WRAPPING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.43.	1335MC SEMI AUTO FOUNDATION BORDER	\$0.00	Net Book Value	UNDETERMINED

Debtor	Eastern Sleep Products Company		Case number (if known)	22-90019
50.44.	2 EOY FORKLIFTS	\$0.00	Net Book Value	UNDETERMINED
50.45.	2 TABLES & MOTOR	\$0.00	Net Book Value	UNDETERMINED
50.46.	20 WRAPPER/SPACE BAR	\$0.00	Net Book Value	UNDETERMINED
50.47.	20 WRAPPER/SPACE BAR	\$0.00	Net Book Value	UNDETERMINED
50.48.	20" WRAPPER/SPARE BAR	\$0.00	Net Book Value	UNDETERMINED
50.49.	3 LOAD RUNNER MACHINES	\$0.00	Net Book Value	UNDETERMINED
50.50.	4 TAPE EDGE MACHINES	\$0.00	Net Book Value	UNDETERMINED
50.51.	6 SK SINGER 68 SEWING MACHINES	\$0.00	Net Book Value	UNDETERMINED
50.52.	660 GAL VERTICAL TANK	\$0.00	Net Book Value	UNDETERMINED
50.53.	7 HOT MELT BRIDGE MACHINES	\$0.00	Net Book Value	UNDETERMINED
50.54.	94F FUTON FILLER-QUEEN SZ	\$0.00	Net Book Value	UNDETERMINED
50.55.	AIR COMPRESSOR/DRYER	\$0.00	Net Book Value	UNDETERMINED
50.56.	AIR CONDITIONER	\$0.00	Net Book Value	UNDETERMINED
50.57.	AIR CURTAIN BLOWER	\$0.00	Net Book Value	UNDETERMINED
50.58.	AIR DOORS	\$0.00	Net Book Value	UNDETERMINED
50.59.	AIR LINES FOR NEW MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.60.	B-6 BALE OPENER	\$0.00	Net Book Value	UNDETERMINED
50.61.	BK-6 BALE OPENER	\$0.00	Net Book Value	UNDETERMINED
50.62.	BK-6 BALE OPENER	\$0.00	Net Book Value	UNDETERMINED
50.63.	BOOT OPTION (2)	\$0.00	Net Book Value	UNDETERMINED
50.64.	BORDER MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.65.	BS 401 PANEL CUTTER	\$0.00	Net Book Value	UNDETERMINED
50.66.	BS-61 110PSI/CONDENSATION	\$0.00	Net Book Value	UNDETERMINED
50.67.	CARDINAL DORMA TRONIC SCA	\$0.00	Net Book Value	UNDETERMINED
50.68.	CEIL/PRESS W/SWIVEL/EXP	\$0.00	Net Book Value	UNDETERMINED
50.69.	CEIL/PRESS W/SWIVEL/EXP	\$0.00	Net Book Value	UNDETERMINED
50.70.	CHAIN STITCH MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.71.	CHAIN STITCH MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.72.	CL MOTOR	\$0.00	Net Book Value	UNDETERMINED
50.73.	CLEANING EQUIPMENT	\$0.00	Net Book Value	UNDETERMINED
50.74.	COMP. QUILTING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.75.	COMPRESSOR	\$0.00	Net Book Value	UNDETERMINED
50.76.	COMPUTERIZED CHAIN STITCH MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.77.	CONVEYOR	\$0.00	Net Book Value	UNDETERMINED
50.78.	CONVEYOR - ST CYR	\$0.00	Net Book Value	UNDETERMINED
50.79.	CONVEYOR - ST CYR	\$0.00	Net Book Value	UNDETERMINED
50.80.	CONVEYOR IPS	\$0.00	Net Book Value	UNDETERMINED
50.81.	CONVEYOR SYSTEM	\$0.00	Net Book Value	UNDETERMINED
50.82.	CONVEYOR SYSTEM	\$0.00	Net Book Value	UNDETERMINED
50.83.	CONVEYORS	\$0.00	Net Book Value	UNDETERMINED
50.84.	CROSSCUT CHANNEL & TROLLE	\$0.00	Net Book Value	UNDETERMINED

Debtor	Eastern Sleep Products Company	Case number (if known) 22-90019		
50.85.	CUTOFF SAW 839	\$0.00	Net Book Value	UNDETERMINED
50.86.	DEWALT SAW	\$0.00	Net Book Value	UNDETERMINED
50.87.	FLANGER	\$0.00	Net Book Value	UNDETERMINED
50.88.	FORKLIFT	\$0.00	Net Book Value	UNDETERMINED
50.89.	FORKLIFT	\$0.00	Net Book Value	UNDETERMINED
50.90.	FORKLIFT GATES	\$0.00	Net Book Value	UNDETERMINED
50.91.	FRAME	\$0.00	Net Book Value	UNDETERMINED
50.92.	FREIGHT ON LIFT	\$0.00	Net Book Value	UNDETERMINED
50.93.	GPT1000 PILLOW TOP RUFFLER	\$0.00	Net Book Value	UNDETERMINED
50.94.	GREBITZ	\$0.00	Net Book Value	UNDETERMINED
50.95.	GRIBETZ ULTRA SAW	\$0.00	Net Book Value	UNDETERMINED
50.96.	H268AA MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.97.	HEAVY DUTY BAILER	\$0.00	Net Book Value	UNDETERMINED
50.98.	HORIZONTAL SAW	\$0.00	Net Book Value	UNDETERMINED
50.99.	HYTROL GRAVITY CONVEYOR	\$0.00	Net Book Value	UNDETERMINED
50.100.	KALAMAZOO SAW WITH BLADE	\$0.00	Net Book Value	UNDETERMINED
50.101.	KANSAI A1101P MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.102.	KANSAI A1101P MACHINE (1)	\$0.00	Net Book Value	UNDETERMINED
50.103.	KANSAI L501MF MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.104.	KINDER CORP	\$0.00	Net Book Value	UNDETERMINED
50.105.	KINGDOWNS - NEED DESCRIPTION	\$0.00	Net Book Value	UNDETERMINED
50.106.	LABEL SEWER	\$0.00	Net Book Value	UNDETERMINED
50.107.	LACE TUFT	\$0.00	Net Book Value	UNDETERMINED
50.108.	LACE TUFTER/60 MAN TABLE	\$0.00	Net Book Value	UNDETERMINED
50.109.	LATHE MACHINE GH-14ZX 14X40	\$0.00	Net Book Value	UNDETERMINED
50.110.	LOADING FRAME	\$0.00	Net Book Value	UNDETERMINED
50.111.	MACHINE LATHE	\$0.00	Net Book Value	UNDETERMINED
50.112.	MATTRESS PICKING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.113.	MILLING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.114.	NAT'L BAILING MACH HY72A	\$0.00	Net Book Value	UNDETERMINED
50.115.	NO DESCRIPTION	\$0.00	Net Book Value	UNDETERMINED
50.116.	PALLET JACK-PMX	\$0.00	Net Book Value	UNDETERMINED
50.117.	PANEL CUTTER	\$0.00	Net Book Value	UNDETERMINED
50.118.	PANEL CUTTER	\$0.00	Net Book Value	UNDETERMINED
50.119.	PAT-300	\$0.00	Net Book Value	UNDETERMINED
50.120.	PC-6 90' PANEL CUTTER	\$0.00	Net Book Value	UNDETERMINED
50.121.	PC-S 90 TABLE EDGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.122.	PC-S 90 TABLE EDGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.123.	PC-S STD 90 BALE CUTTER	\$0.00	Net Book Value	UNDETERMINED
50.124.	PF1000 FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.125.	PFM 515 FLANGE MACHINE	\$0.00	Net Book Value	UNDETERMINED

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

50.126.	PLQ 750 LABEL SEWER/QUILTER	\$0.00	Net Book Value	UNDETERMINED
50.127.	POWER CONVEYOR	\$0.00	Net Book Value	UNDETERMINED
50.128.	PWS SEWINGMACHINE	\$0.00	Net Book Value	UNDETERMINED
50.129.	QUILTING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.130.	QUILTING MACHINE, LEGGET PLATT	\$0.00	Net Book Value	UNDETERMINED
50.131.	REBUILT MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.132.	REFRIG DRYER KRD-800	\$0.00	Net Book Value	UNDETERMINED
50.133.	REMOVABLE HEATER	\$0.00	Net Book Value	UNDETERMINED
50.134.	REPLACED UNIT HEATERS	\$0.00	Net Book Value	UNDETERMINED
50.135.	RESTA H26AAA BEDDING MACH	\$0.00	Net Book Value	UNDETERMINED
50.136.	ROLL PACK	\$0.00	Net Book Value	UNDETERMINED
50.137.	RUFFLER ATLLANTA ATTACHMENT	\$0.00	Net Book Value	UNDETERMINED
50.138.	RUFFLER MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.139.	SECURITY SYSTEM	\$0.00	Net Book Value	UNDETERMINED
50.140.	SEWING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.141.	SEWING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.142.	SEWING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.143.	SK-SINGER 68 SEWING MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.144.	STITCH MACHINE	\$0.00	Net Book Value	UNDETERMINED
50.145.	TAPE MASTER GRIBETZ	\$0.00	Net Book Value	UNDETERMINED
50.146.	TAPE MASTER GRIBETZ	\$0.00	Net Book Value	UNDETERMINED
50.147.	TAPE MASTER GRIBETZ	\$0.00	Net Book Value	UNDETERMINED
50.148.	TOYOTA FORKLIFT 42-4FGC25	\$0.00	Net Book Value	UNDETERMINED
50.149.	USED CONVEYOR	\$0.00	Net Book Value	UNDETERMINED
50.150.	VERTICAL SAW	\$0.00	Net Book Value	UNDETERMINED
50.151.	WIRE FOR SIMPLY BEDDING	\$0.00	Net Book Value	UNDETERMINED
50.152.	XL5000 EAGLE MATTRESS	\$0.00	Net Book Value	UNDETERMINED

51. Total of part 8

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

\$5,800.33

52. Is a depreciation schedule available for any of the property listed in Part 8?☐ No☒ Yes**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real property****54. Does the debtor own or lease any real property?**☐ No. Go to Part 10.☒ Yes. Fill in the information below.

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

	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.	LEASED PROPERTY FACTORY 1100 S. 12TH STREET WATERTOWN WI 53094	LEASEHOLD	UNKNOWN	_____	UNKNOWN
55.2.	LEASED PROPERTY FACTORY 8300 INDUSTRIAL DR OLIVE BRANCH MS 38654	LEASEHOLD	UNKNOWN	_____	UNKNOWN
55.3.	LEASED PROPERTY FACTORY 2001 BELLWOOD RD RICHMOND VA 23237	LEASEHOLD	UNKNOWN	_____	UNKNOWN
55.4.	LEASED PROPERTY VA HQ OFFICE 4901 FITZHUGH AVE RICHMOND VA 23230	LEASEHOLD	UNKNOWN	_____	UNKNOWN
55.5.	LEASED PROPERTY WAREHOUSE BLDG 5 2700 JEFFERSON DAVIS HWY RICHMOND VA 23234	LEASEHOLD	UNKNOWN	_____	UNKNOWN
55.6.	LEASED PROPERTY WAREHOUSE 1007 S. 12TH ST WATERTOWN WI 53094	LEASEHOLD	UNKNOWN	_____	UNKNOWN
55.7.	LEASED PROPERTY FACTORY 1100 S. 12TH STREET WATERTOWN WI 53094	LEASEHOLD IMPROVEMENTS	UNKNOWN	Net Book Value	UNKNOWN
55.8.	LEASED PROPERTY FACTORY 8300 INDUSTRIAL DR OLIVE BRANCH MS 38654	LEASEHOLD IMPROVEMENTS	UNKNOWN	Net Book Value	UNKNOWN

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

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

55.9. LEASED PROPERTY
FACTORY

LEASEHOLD IMPROVEMENTS

UNKNOWN

Net Book Value

UNKNOWN

2001 BELLWOOD RD
RICHMOND VA 23237

55.10. LEASED PROPERTY
VA HQ OFFICE

LEASEHOLD IMPROVEMENTS

UNKNOWN

Net Book Value

UNKNOWN

4901 FITZHUGH AVE
RICHMOND VA 23230

55.11. LEASED PROPERTY
WAREHOUSE

LEASEHOLD IMPROVEMENTS

UNKNOWN

Net Book Value

UNKNOWN

BLDG 5 2700 JEFFERSON DAVIS HWY
RICHMOND VA 23234

55.12. LEASED PROPERTY
WAREHOUSE

LEASEHOLD IMPROVEMENTS

UNKNOWN

Net Book Value

UNKNOWN

1007 S. 12TH ST
WATERTOWN WI 53094

56. Total of part 9

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

UNKNOWN

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
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60. Patents, copyrights, trademarks, and trade secrets

60.1. TEMPERATURE CONTROLLED MATTRESS SYSTEM US9888782B1

UNKNOWN

UNKNOWN

60.2. SYMBOL USA 86/900834

UNKNOWN

UNKNOWN

60.3. SYMBOL (LOGO) 86/800531

UNKNOWN

UNKNOWN

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

60.4.	SYMBOL MATTRESS (LOGO) 73311122	UNKNOWN	_____	UNKNOWN
60.5.	DREAM KING 71/422307	UNKNOWN	_____	UNKNOWN

61. Internet domain names and websites

	Net book value of debtor's interest	Valuation method	Current value of debtor's interest
61.1. SYMBOLMATTRESS.COM - 07/07/2023(EXP. DATE)	\$19.99	Renewal Price	UNKNOWN
61.2. EASTERNSLEEPJOBS.COM	UNKNOWN	_____	UNKNOWN
61.3. EASTERNSLEEPPRODUCTS.COM	UNKNOWN	_____	UNKNOWN
61.4. EASTERNSLEEPRECOVERY.COM	UNKNOWN	_____	UNKNOWN
61.5. ESPBEDS.COM	UNKNOWN	_____	UNKNOWN
61.6. ESPMEDICALCOLLECTION.COM	UNKNOWN	_____	UNKNOWN
61.7. ESPRECOVERY.COM	UNKNOWN	_____	UNKNOWN
61.8. LUUFBED.COM	UNKNOWN	_____	UNKNOWN
61.9. LUUFBEDS.COM	UNKNOWN	_____	UNKNOWN
61.10. LUUFSLEEP.COM	UNKNOWN	_____	UNKNOWN
61.11. LUUFTBEDS.COM	UNKNOWN	_____	UNKNOWN
61.12. SYMBOLCAREERS.COM	UNKNOWN	_____	UNKNOWN
61.13. SYMBOLJOBS.COM	UNKNOWN	_____	UNKNOWN
61.14. SYMBOLRECOVERY.COM	UNKNOWN	_____	UNKNOWN
61.15. SYMBOLMEDICALMATTRESSES.COM	UNKNOWN	_____	UNKNOWN
61.16. TOMMIECOPPERMATTRESS.COM	UNKNOWN	_____	UNKNOWN
61.17. SLEEPFRESHBED.COM	UNKNOWN	_____	UNKNOWN

62. Licenses, franchises, and royalties

62.1.	_____	\$ _____	_____	\$ _____
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63. Customer lists, mailing lists, or other compilations

63.1.	CUSTOMER LISTS INCLUDING NAME, ADDRESS, TELEPHONE & E-MAIL, IF AVAILABLE	UNKNOWN	_____	UNKNOWN
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64. Other intangibles, or intellectual property

64.1.	_____	\$ _____	_____	\$ _____
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65. Goodwill

65.1. ¹	GOODWILL - CORSICANA PURCHASE	\$6,740,456.72	Net book value	\$6,740,456.72
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¹BALANCE AS OF 5/31/2022 FINANCIAL STATEMENTS**66. Total of part 10**

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

\$6,740,456.72

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

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes**69. Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

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

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

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

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

	Description (for example, federal, state, local)	Tax refund amount	NOL amount	Tax year	Current value of debtor's interest
72.1.	UNKNOWN	UNKNOWN	UNKNOWN	_____	UNKNOWN

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.	ALLIANZ GLOBAL RISK US INSURANCE COMPANY	PRIMARY MANAGEMENT LIABILITY - POLICY NO. USF00934622	_____	_____	_____	UNDETERMINED
73.2.	ASSOCIATED INDUSTRIES INSURANCE CO, INC.	EXCESS D&O - POLICY NO. ANV152226A	_____	_____	_____	UNDETERMINED
73.3.	AXIS INSURANCE CO.	EXCESS D&O - POLICY NO. P-001-000518200-02	_____	_____	_____	UNDETERMINED
73.4.	CERTAIN UNDERWRITERS AT LLOYDS	WINDSTORM DEDUCTIBLE BUYBACK - POLICY NO. 1104-359893	_____	_____	_____	UNDETERMINED
73.5.	COMMERCE AND INDUSTRY INSURANCE COMPANY	STORAGE TANK THIRD-PARTY LIABILITY, CORRECTIVE ACTION AND CLEANUP COSTS - POLICY NO. 003033829	_____	_____	_____	UNDETERMINED

Debtor **Eastern Sleep Products Company** Case number (if known) **22-90019**

73.6.	CONTINENTAL INSURANCE COMPANY	UMBRELLA - POLICY NO. 6020740105				UNDETERMINED
73.7.	GREAT AMERICAN INSURANCE COMPANY	ENVIRONMENTAL SITE LIABILITY - POLICY NO. PRE 3342396 01				UNDETERMINED
73.8.	OBSIDIAN SPECIALTY INSURANCE COMPANY	EXCESS D&O - POLICY NO. OSIC-410-DOX-1-2022-1				UNDETERMINED
73.9.	PHOENIX INSURANCE COMPANY	AUTOMOBILE - POLICY NO. BA-OP957391-21-14				UNDETERMINED
73.10.	VARIOUS TRAVELERS SUBSIDIARIES INCLUDING THE TRAVELERS INDEMNITY COMPANY OF CONNECTICUT, TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA, THE PHOENIX INSURANCE COMPANY, AND OTHERS	WORKER'S COMPENSATION - POLICY NO. UB-7R704054-21-14				UNDETERMINED
73.11.	STARSTONE SPECIALTY INSURANCE COMPANY	EXCESS D&O - POLICY NO. D72808221ASP				UNDETERMINED
73.12.	TRAVELERS INDEMNITY CORPORATION OF AMERICA	PROPERTY - POLICY NO. 660-0P950549-21-14;				UNDETERMINED
73.13.	TRAVELERS INDEMNITY CORPORATION OF AMERICA	GENERAL LIABILITY - POLICY NO. 660-0P950549-21-14				UNDETERMINED
73.14.	TRAVELERS PROPERTY AND CASUALTY COMPANY OF AMERICA	EXCESS LIABILITY - POLICY NO. 6S129831-EX				UNDETERMINED
73.15.	ALLIANZ GLOBAL RISK US INSURANCE COMPANY	RUN-OFF: EASTERN SLEEP PRODUCTS COMPANY (D&O, EMPLOYMENT PRACTICES LIABILITY, FIDUCIARY) - POLICY NO. USF00956721				UNDETERMINED

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

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

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

	Nature of claim	Amount requested	Current value of debtor's interest
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Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

75.1. _____ \$ _____ \$ _____

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. INTERCOMPANY AR BALANCE FROM CORSICANA BEDDING, LLC \$12,523,075.97

77.2. INTERCOMPANY AR BALANCE FROM LUUF, LLC \$560,948.44

78. Total of part 11

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

\$13,084,024.41

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?☒ No☐ Yes

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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>	\$613,205.35	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$156,836.48	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$1,028,656.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$11,006.14	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$2,451,769.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$19,580.04	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$5,800.33	
88. Real property. <i>Copy line 56, Part 9.</i>	→	UNKNOWN
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$6,740,456.72	
90. All other assets. <i>Copy line 78, Part 11.</i> +	\$13,084,024.41	
91. Total. Add lines 80 through 90 for each column.91a.	\$24,111,334.47	+ 91b. UNKNOWN
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$24,111,334.47

Fill in this information to identify the case:

Debtor name: Eastern Sleep Products Company

United States Bankruptcy Court for the: Northern District of Texas

Case number (if known): 22-90019

☐ 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.

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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**

BLUE TORCH FINANCE, LLC
 LOGAN FISHER
 430 PARK AVE STE 1202
 NEW YORK NY 10022
 LFISHER@BLUETORCHCAPITAL.COM

Date debt was incurred: 4/28/21**Last 4 digits of account number:****Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?

☒ No. Specify each creditor, including this creditor, and its relative priority. THE RELATIVE PRIORITY OF LIENS AND SECURITY INTERESTS OF WINGSPIRE, IN ITS CAPACITY AS PREPETITION ABL AGENT, AND BLUE TORCH, IN ITS CAPACITY AS PREPETITION TERM LOAN AGENT, ARE SET FORTH IN THE PREPETITION INTERCREDITOR AGREEMENT.

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

Describe debtor's property that is subject to a lien

ALL ASSETS OF THE DEBTOR

\$132,432,302.83 UNKNOWN

Describe the lien

FIRST PRIORITY WITH RESPECT TO PREPETITION TERM PRIORITY COLLATERAL AND SECOND PRIORITY WITH RESPECT TO PREPETITION ABL PRIORITY COLLATERAL, AS SET FORTH IN MORE DETAIL IN THE PREPETITION INTERCREDITOR AGREEMENT AND APPLICABLE LOAN DOCUMENTS.

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 **Eastern Sleep Products Company**Case number (if known) **22-90019**

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

WINGSPIRE CAPITAL LLC
JOHN OLSEN
13010 MORRIS RD STE 175
ALPHARETTA GA 30004
JOLSEN@WINGSPIRECAPITAL.COM

Date debt was incurred: 4/28/21

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☐ No

☒ Yes. Have you already specified the relative priority?

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

☒ Yes. The relative priority of creditors is specified on lines: 2.1

Describe debtor's property that is subject to a lien

ALL ASSETS OF THE DEBTOR \$18,545,929.18 UNKNOWN

Describe the lien

FIRST PRIORITY WITH RESPECT TO PREPETITION ABL PRIORITY COLLATERAL AND SECOND PRIORITY WITH RESPECT TO PREPETITION TERM PRIORITY COLLATERAL, AS SET FORTH IN MORE DETAIL IN THE PREPETITION INTERCREDITOR AGREEMENT AND APPLICABLE LOAN DOCUMENTS.

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

3. **Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.** **\$150,978,232.01**

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

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

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

	Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
3.1.	BLUE TORCH FINANCE, LLC SEI - BLUE TORCH CAPITAL LOAN OPS 1 FREEDOM VLY DR OAKS PA 19456	Line 2.1	_____
3.2.	MCGUIRE WOODS BRIAN I SWETT 1251 AVENUE OF THE AMERICAS 20TH FLOOR NEW YORK NY 10020-1104	Line 2.2	_____
3.3.	MCGUIREWOODS DEMETRA LIGGINS HOUSTON TEXAS TOWER 845 TEXAS AVE 24TH FLOOR HOUSTON TX 77002	Line 2.2	_____

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.4.	MCGUIREWOODS SHAWN R. FOX 1251 AVENUE OF THE AMERICAS 20TH FLOOR NEW YORK NY 10020-1104	Line 2.2	_____
3.5.	MUNSCH HARDT KOPF & HARR PC DEBORAH M PERRY 500 N AKARD STREET SUITE 3800 DALLAS TX 75201-6659	Line 2.1	_____
3.6.	SCHULTE ROTH & ZABEL ADAM C HARRIS 919 THIRD AVENUE NEW YORK NY 10022	Line 2.1	_____
3.7.	SCHULTE ROTH & ZABEL LLP ABBIEY WALSH;MATTHEW SUNDAY 919 THIRD AVENUE NEW YORK NY 10022	Line 2.1	_____

Fill in this information to identify the case:**Debtor name:** Eastern Sleep Products Company**United States Bankruptcy Court for the:** Northern District of Texas**Case number (if known):** 22-90019☐ 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. 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
	STATE OF NEW JERSEY NJ DIVISION OF TAXATION BANKRUPTCY SECTION PO BOX 245 TRENTON NJ 08695-0245	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,075.00	\$5,075.00
	Date or dates debt was incurred 2014/2020/2021	Basis for the claim: 2014 INCOME TAX; 2020 & 2021 SALES TAX		Nonpriority amount \$0.00
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

¹FILINGS/PYMTS PUT ON HOLD; NOT FILED YET; INT/PEN ACCRUING

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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 A TO Z PACKAGING ENTERPRISES, INC. 3605 SANDY PLAINS ROAD STE #240 MARIETTA GA 30066 Date or dates debt was incurred 4/20/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$53,592.50
3.2. Nonpriority creditor's name and mailing address A.M. DAVIS, INC. 3703 PRICE CLUB BLVD MIDLOTHIAN VA 23112 Date or dates debt was incurred 5/10/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,372.23
3.3. Nonpriority creditor's name and mailing address AAMK C/O KELLY ANN GALER EARL Warburton & Adams Inc CHRISTOPHER R WALSH 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> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.4.	Nonpriority creditor's name and mailing address ABF FREIGHT SYSTEMS P.O. BOX 10048 FORT SMITH AZ 72917 Date or dates debt was incurred 4/27/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,475.57
3.5.	Nonpriority creditor's name and mailing address ADHESIVE PRODUCTS CO. P.O. BOX 6434 FISHERS IN 46038 Date or dates debt was incurred 6/23/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,780.00
3.6.	Nonpriority creditor's name and mailing address ADS SECURITY P.O. BOX 531687 ATLANTA GA 30353-1687 Date or dates debt was incurred 2/16/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$108.75

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.7.	Nonpriority creditor's name and mailing address ADVANCE FIBER TECH. CORP. 344 LODIE STREET HACKENSACK NJ 07601-0000 Date or dates debt was incurred 3/25/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,268.18
3.8.	Nonpriority creditor's name and mailing address ALL AMERICAN POLY CORPORATION P O BOX 10148 NEW BRUNWSICK NJ 08906-0000 Date or dates debt was incurred 6/7/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,192.50
3.9.	Nonpriority creditor's name and mailing address APPLIED INDUSTRIAL TECH. 22510 NETWORK PLACE CHICAGO IL 60673-1225 Date or dates debt was incurred 2/9/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,172.56

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.10.	Nonpriority creditor's name and mailing address ASSOCIATED PRINTING SERVICES, INC P.O. BOX 5967 GLEN ALLEN VA 23058 Date or dates debt was incurred 2/8/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,807.88
3.11.	Nonpriority creditor's name and mailing address AT & T UNIVERSAL BILLER P.O. BOX 5019 CAROL STREAM IL 60197-5019 Date or dates debt was incurred 6/11/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$226.75
3.12.	Nonpriority creditor's name and mailing address ATLANTA ATTACHMENT COMPANY 362 INDUSTRIAL PARK DRIVE LAWRENCEVILLE GA 30046 Date or dates debt was incurred 2/22/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,283.11

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.13.	Nonpriority creditor's name and mailing address AVERITT EXPRESS INC P.O. BOX 102197 ATLANTA GA 30368-2197 Date or dates debt was incurred 5/19/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,966.08
3.14.	Nonpriority creditor's name and mailing address BEKAERTDESLEE USA INC. DEPT. 3785 P.O. BOX 123785 DALLAS TX 75312-3785 Date or dates debt was incurred 5/5/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$829.66
3.15.	Nonpriority creditor's name and mailing address BIG LEAF NETWORKS DEPT LA 24973 PASADENA CA 91185-4973 Date or dates debt was incurred 5/1/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,437.76

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.16.	Nonpriority creditor's name and mailing address BOTTOMNINE INC DBA CARTRIDGE WORLD 4120A COX RD GLEN ALLEN VA 23060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,696.47
	Date or dates debt was incurred 4/8/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.17.	Nonpriority creditor's name and mailing address BRADY INDUSTRIES OF TENNESSEE, LLC 7055 LINDELL RD LAS VEGAS NV 89118	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,930.54
	Date or dates debt was incurred 3/28/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.18.	Nonpriority creditor's name and mailing address BRIGHTEDGE TECHNOLOGIES, INC. DEPT CH 17960 PALATINE IL 60055-7960	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$9,750.00
	Date or dates debt was incurred 4/1/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.19.	Nonpriority creditor's name and mailing address C3 CORPORATION 3300 E. VENTURE DRIVE APPLETON WI 54911 Date or dates debt was incurred 5/11/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$39,740.98
3.20.	Nonpriority creditor's name and mailing address CAROLINA INDUSTRIAL RESOURCES 4303 OAK LEVEL ROAD ROCKY MOUNT NC 27803 Date or dates debt was incurred 6/1/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,471.00
3.21.	Nonpriority creditor's name and mailing address CARPENTER COMPANY P.O. BOX 27205 RICHMOND VA 23261 Date or dates debt was incurred 6/20/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,038.62

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.22.	Nonpriority creditor's name and mailing address CENTURYLINK P.O. BOX 4300 CAROL STREAM IL 60197-4300 Date or dates debt was incurred 6/10/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$13,687.62
3.23.	Nonpriority creditor's name and mailing address CITY OF OLIVE BRANCH 9200 PIGEON ROOST OLIVE BRANCH MS 38654 Date or dates debt was incurred 6/15/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$411.10
3.24.	Nonpriority creditor's name and mailing address CNA INSURANCE COMPANY CNA INSURANCE COMPANY ATTN LEGAL DEPT 33 S WABASH CHICAGO IL 60604 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INSURANCE PREMIUM FINANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.25.	Nonpriority creditor's name and mailing address COLONIAL, LLC P O BOX 148 HIGH POINT NC 27261	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$3,222.79
	Date or dates debt was incurred 3/17/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.26.	Nonpriority creditor's name and mailing address COLORADO FURNITURE 10853 US HWY 285 STE. D CONIFER CO 80433	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$429.35
	Date or dates debt was incurred 6/7/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.27.	Nonpriority creditor's name and mailing address COLUMBIA GAS P.O. BOX 70319 PHILADELPHIA PA 19176-0319	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$89.82
	Date or dates debt was incurred 6/15/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.28.	Nonpriority creditor's name and mailing address COMCAST P.O. BOX 71211 CHARLOTTE NC 28272-1211 Date or dates debt was incurred 6/8/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$740.76
3.29.	Nonpriority creditor's name and mailing address COMMERCE TECHNOLOGIES, LLC 25736 NETWORK PLACE CHICAGO IL 60673-1257 Date or dates debt was incurred 4/30/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$409.40
3.30.	Nonpriority creditor's name and mailing address COMPLETE OFFICE OF WISCONSIN P.O. BOX 640 GERMANTOWN WI 53022 Date or dates debt was incurred 5/9/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$212.27

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3.31.	Nonpriority creditor's name and mailing address COMPRESSED AIR TECHNOLOGIES, INC. P.O. BOX 180459 RICHLAND MS 39218 Date or dates debt was incurred 4/12/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,361.50
3.32.	Nonpriority creditor's name and mailing address COMPRESSED AIR TECHNOLOGY, INC. P O BOX 697 MARSHALL WI 53559-0000 Date or dates debt was incurred 2/14/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,056.52
3.33.	Nonpriority creditor's name and mailing address CORSIANA MATTRESS BEDDING LLC 3001 S US HWY 287 CORSICANA TX 75109 Date or dates debt was incurred ONGOING SINCE SALE 4/28/2021 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Amount of claim \$6,214,457.90

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3.34.	Nonpriority creditor's name and mailing address CORSICANA MATTRESS TEXAS (100) 3001 S. US HWY 287 CORSICANA TX 75109 Date or dates debt was incurred 5/18/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,764.80
3.35.	Nonpriority creditor's name and mailing address COYOTE LOGISTICS LLC P.O. BOX 742636 ATLANTA GA 30374-2639 Date or dates debt was incurred 3/31/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25,393.00
3.36.	Nonpriority creditor's name and mailing address CROWN EQUIPMENT CORP. P O BOX 641173 CINCINNATI OH 45264-1173 Date or dates debt was incurred 1/25/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,458.74

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3.37.	Nonpriority creditor's name and mailing address CULP INC P O BOX 751007 CHARLOTTE NC 28275-0000 Date or dates debt was incurred 6/29/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$189,190.94
3.38.	Nonpriority creditor's name and mailing address D1 & RCS MOVING, LLC 4817 BETHLEHEM ROAD RICHMOND VA 23230 Date or dates debt was incurred 6/8/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,260.00
3.39.	Nonpriority creditor's name and mailing address DIAMOND NEEDLE CORP 60 COMMERCE ROAD CARLSTATDT NJ 07072-0000 Date or dates debt was incurred 1/31/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,080.54

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3.40.	Nonpriority creditor's name and mailing address DOMINION ENERGY VIRGINIA P O BOX 26543 RICHMOND VA 23290-0001	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,231.23
	Date or dates debt was incurred 6/10/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.41.	Nonpriority creditor's name and mailing address DUN & BRADSTREET P.O. BOX 75434 CHICAGO IL 60675-5434	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$21,000.00
	Date or dates debt was incurred 1/3/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.42.	Nonpriority creditor's name and mailing address EIS INC. P.O. BOX 734768 CHICAGO IL 60673-4768	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$3,170.00
	Date or dates debt was incurred 2/8/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.43.	Nonpriority creditor's name and mailing address ENGAGE CONSULTING LLC 14523 50TH AVE EAST TACOMA WA 98446 Date or dates debt was incurred 5/20/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$18,170.00
3.44.	Nonpriority creditor's name and mailing address ENGLANDER SLEEP PRODUCTS LLC 6801 W. 73RD STREET BEDFORD PARK IL 60499 Date or dates debt was incurred 4/15/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$60,003.00
3.45.	Nonpriority creditor's name and mailing address ENVIVO HEALTH LLC P.O. BOX 2279 RUSSELL SPRINGS KY 42642 Date or dates debt was incurred 10/12/2021 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$287.50

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3.46.	Nonpriority creditor's name and mailing address ESCO GROUP INC. 2887 THREE MILE ROAD NW GRAND RAPIDS MI 49534	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$3,183.71
	Date or dates debt was incurred 2/8/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.47.	Nonpriority creditor's name and mailing address ESTES EXPRESS LINES P O BOX 105160 ATLANTA GA 30348-5160	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,880.27
	Date or dates debt was incurred 4/4/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.48.	Nonpriority creditor's name and mailing address EVA CHANEY 2475 WOODBURY STREET PEARLAND TX 77584	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$5,450.00
	Date or dates debt was incurred 6/3/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.49.	Nonpriority creditor's name and mailing address EZ-FULLFILLMENT LLC 942 MULBERRY STREET LAKE MILLS WI 53551 Date or dates debt was incurred 6/1/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$380.00
3.50.	Nonpriority creditor's name and mailing address FEDEX P O BOX 371461 PITTSBURGH PA 15250-7461 Date or dates debt was incurred 3/29/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$65,098.64
3.51.	Nonpriority creditor's name and mailing address FXI, INC. INNOCOR COLLECTIONS P.O. BOX 747067 ATLANTA GA 30374-7067 Date or dates debt was incurred 5/9/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$399,471.65

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3.52.	Nonpriority creditor's name and mailing address G&S ELECTRICAL SERVICES LLC P.O. BOX 18432 MEMPHIS TN 38181-0432 Date or dates debt was incurred 5/10/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,553.74
3.53.	Nonpriority creditor's name and mailing address GBS P.O. BOX 2340 NORTH CANTON OH 44720-0340 Date or dates debt was incurred 3/4/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$282.74
3.54.	Nonpriority creditor's name and mailing address GC PIVOTAL LLC P.O. BOX 842630 DALLAS TX 75284-2630 Date or dates debt was incurred 5/1/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$324.72

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3.55.	Nonpriority creditor's name and mailing address GRAINGER, INC. DEPT 831667035 PALATINE IL 60038-0001 Date or dates debt was incurred 2/24/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,398.30
3.56.	Nonpriority creditor's name and mailing address GREATAMERICA FINANCIAL SVCS. P.O. BOX 660831 DALLAS TX 75266-0831 Date or dates debt was incurred 5/23/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$213.82
3.57.	Nonpriority creditor's name and mailing address GT DESIGNS AND APPAREL LLC 807 N CHURCH STREET WATERTOWN WI 53098 Date or dates debt was incurred 4/7/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$158.25

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3.58.	Nonpriority creditor's name and mailing address HILL ELECTRICAL, INC. P O BOX 158 MECHANICSVILLE VA 23111-0000	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$35,000.00
	Date or dates debt was incurred 3/21/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.59.	Nonpriority creditor's name and mailing address HILL EXPRESS, INC. 4204 CEDAR TREE DRIVE MEMPHIS TN 38141	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$28,889.80
	Date or dates debt was incurred 3/14/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.60.	Nonpriority creditor's name and mailing address ID.ME INC. PO BOX 392625 PITTSBURGH PA 15251-3625	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$58,640.00
	Date or dates debt was incurred 3/24/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.61.	Nonpriority creditor's name and mailing address INDUSTRIAL POWER PRODUCTS, INC. P.O. BOX 221149 MEMPHIS TN 38122-9149 Date or dates debt was incurred 2/8/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,099.90
3.62.	Nonpriority creditor's name and mailing address J & L TIRE INC 855 LINMAR LANE JOHNSON CREEK WI 53038-0000 Date or dates debt was incurred 2/25/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$658.32
3.63.	Nonpriority creditor's name and mailing address J. J. KELLER & ASSOC. P.O. BOX 6609 CAROL STREAM IL 60197-6609 Date or dates debt was incurred 4/21/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,534.15

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3.64.	Nonpriority creditor's name and mailing address JAMES RIVER PETROLEUM ENERGY DEPT 720067 P.O. BOX 1335 CHARLOTTE NC 28201 Date or dates debt was incurred 6/6/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,318.01
3.65.	Nonpriority creditor's name and mailing address JONES FIBER PRODUCTS LLC P O BOX 385 HUMBOLDT TN 38343-0000 Date or dates debt was incurred 5/5/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$56,355.29
3.66.	Nonpriority creditor's name and mailing address JUST POSTED LLC PO BOX 444 AUBURN IN 46706 Date or dates debt was incurred 6/7/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$818.51

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3.67.	Nonpriority creditor's name and mailing address JWR INC. P.O. BOX 356 JOHNSON CREEK WI 53038 Date or dates debt was incurred 3/17/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$430.40
3.68.	Nonpriority creditor's name and mailing address KAESER COMPRESSORS P O BOX 946 FREDERICKSBURG VA 22404-0000 Date or dates debt was incurred 5/2/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,391.73
3.69.	Nonpriority creditor's name and mailing address KAZLOW & FIELDS, LLC. 8100 SANDPIPER CIRCLE SUITE 204 BALTIMORE MD 21236 Date or dates debt was incurred 3/21/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$400.00

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3.70.	Nonpriority creditor's name and mailing address KEITER 4401 DOMINION BLVD GLEN ALLEN VA 23060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$16,000.00
	Date or dates debt was incurred 5/11/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.71.	Nonpriority creditor's name and mailing address KEN'S MAINTENANCE SERVICES LLC 611 S. 6TH STREET WATERTOWN WI 53094	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,300.00
	Date or dates debt was incurred 4/30/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.72.	Nonpriority creditor's name and mailing address KONICA MINOLTA BUSINESS SOLUTIONS DEPT. AT 952823 ATLANTA GA 31192-2823	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$914.00
	Date or dates debt was incurred 6/11/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.73.	Nonpriority creditor's name and mailing address KONICA MINOLTA PREMIER FINANCE P.O. BOX 070241 PHILADELPHIA PA 19176-0241 Date or dates debt was incurred 4/11/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,712.08
3.74.	Nonpriority creditor's name and mailing address LAVA EXPERTS IN KNITTING 55 SLEEPY TIME DRIVE WATERLOO SC 20384-0000 Date or dates debt was incurred 4/6/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,246.89
3.75.	Nonpriority creditor's name and mailing address LEGGETT & PLATT INCORPORATED P.O. BOX 538385 ATLANTA GA 30353-8385 Date or dates debt was incurred 2/11/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$58,887.13

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3.76.	Nonpriority creditor's name and mailing address LEMON VENTURES INC P.O. BOX 9368 RICHMOND VA 23227 Date or dates debt was incurred 3/28/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,125.00
3.77.	Nonpriority creditor's name and mailing address LHH RECRUITMENT SOLUTIONS DEPT CH 14031 PALATINE IL 60055-4031 Date or dates debt was incurred 6/5/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,704.70
3.78.	Nonpriority creditor's name and mailing address LOGICDATA NORTH AMERICA, INC. 5300 BROADMOOR SUITE D GRAND RAPIDS MI 49512 Date or dates debt was incurred 4/28/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$20,147.60

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3.79.	Nonpriority creditor's name and mailing address LOST & FOUND CORP P.O. BOX 4656 MOORESVILLE NC 28117 Date or dates debt was incurred 6/20/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$758.89
3.80.	Nonpriority creditor's name and mailing address M J PIERCE DISTRIBUTOR 23 SHAWMUT AVE. DANVERS MA 01923 Date or dates debt was incurred 11/2/2021 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$10,740.38
3.81.	Nonpriority creditor's name and mailing address MALOUF 1525 W 2960 S LOGAN UT 84321 Date or dates debt was incurred 6/21/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$494.96

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3.82.	Nonpriority creditor's name and mailing address MCMASTER-CARR SUPPLY CO. P O BOX 7690 CHICAGO IL 60680-0000	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,131.12
	Date or dates debt was incurred 3/30/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.83.	Nonpriority creditor's name and mailing address MIDLAND PLASTICS P.O. BOX 510055 NEW BERLIN WI 53094	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$875.46
	Date or dates debt was incurred 4/22/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.84.	Nonpriority creditor's name and mailing address MOMENTUM TELECOM INC DIRECT 29361 NETWORK PLACE CHICAGO IL 60673-1293	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,033.42
	Date or dates debt was incurred 6/1/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.85.	Nonpriority creditor's name and mailing address NAPA AUTO PARTS P O BOX 409043 ATLANTA GA 30384-9043	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$44.50
	Date or dates debt was incurred 5/9/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.86.	Nonpriority creditor's name and mailing address NATIONAL LIFT, LLC 5625 E. RAINES ROAD MEMPHIS TN 38115	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$7,400.00
	Date or dates debt was incurred 3/16/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.87.	Nonpriority creditor's name and mailing address NATIONWIDE ELECTRIC SUPPLY 27 E 2ND STREET RICHMOND VA 23224	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$685.23
	Date or dates debt was incurred 4/20/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.88.	Nonpriority creditor's name and mailing address NEST CONTRACT FURNISHINGS 211 WAGNER ROAD EVANS CITY PA 16033	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$270.00
	Date or dates debt was incurred 6/9/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.89.	Nonpriority creditor's name and mailing address NEW ENGLAND NEEDLES, INC P O BOX 1429 BURLINGTON CT 06013-0000	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,720.76
	Date or dates debt was incurred 2/21/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.90.	Nonpriority creditor's name and mailing address NORTHCENTRAL EPA P.O. BOX 405 BYHALIA MS 38611-0405	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$7,671.57
	Date or dates debt was incurred 6/6/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.91.	Nonpriority creditor's name and mailing address OHM SYSTEMS INC 10895 INDECO DRIVE CINCINATI OH 45241 Date or dates debt was incurred 4/30/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$45,149.98
3.92.	Nonpriority creditor's name and mailing address PACKAGING CORPORATION OF AMERICA P O BOX 532058 ATLANTA GA 30353-2058 Date or dates debt was incurred 5/26/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$34,037.35
3.93.	Nonpriority creditor's name and mailing address PEOPLES PREMIUM FINANCE 600 SW JEFFERSON STREET LEE'S SUMMIT MO 64063 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INSURANCE PREMIUM FINANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

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3.94.	Nonpriority creditor's name and mailing address PIONEER & LEGEND CANADA LTD 387 LIMESTONE CRES NORTH YORK ON M3J 2R1 CANADA Date or dates debt was incurred 5/19/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$478,941.37
3.95.	Nonpriority creditor's name and mailing address PLEASANTS HARDWARE P.O. BOX 4267 VIRGINIA BEACH VA 23454 Date or dates debt was incurred 5/31/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$64.09
3.96.	Nonpriority creditor's name and mailing address PRECISION BLADES, INC. P O BOX 1408 SALTILLO MS 38866-0000 Date or dates debt was incurred 4/19/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,058.39

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3.97.	Nonpriority creditor's name and mailing address PRECISION FABRICS GROUP INC P O BOX 60944 CHARLOTTE NC 28260 Date or dates debt was incurred 3/25/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,433.22
3.98.	Nonpriority creditor's name and mailing address PRECISION TEXTILES LLC P.O. BO X 1036 CHARLOTTE NC 28201-1036 Date or dates debt was incurred 5/31/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$46,878.38
3.99.	Nonpriority creditor's name and mailing address PROFORMA P.O. BOX 640814 CINCINNATI OH 45264-0814 Date or dates debt was incurred 6/23/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,502.10

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3.100.	Nonpriority creditor's name and mailing address QUENCH USA, INC. P.O. BOX 781393 PHILADELPHIA PA 19178-1393 Date or dates debt was incurred 3/18/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$571.96
3.101.	Nonpriority creditor's name and mailing address QUILL CORPORATION P O BOX 37600 PHILADELPHIA PA 19101-0600 Date or dates debt was incurred 3/14/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,603.58
3.102.	Nonpriority creditor's name and mailing address REVERE ELECTRIC SUPPLY CO. 8218 SOLUTIONS CENTER CHICAGO IL 60677-8002 Date or dates debt was incurred 5/19/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$141.74

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3.103.	Nonpriority creditor's name and mailing address RUTTER & ASSOCIATES 3820-A HUNTINGREEN LN WINSTON-SALEM NC 27106 Date or dates debt was incurred 6/9/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,996.00
3.104.	Nonpriority creditor's name and mailing address SAFETY PRODUCTS INC P.O. BOX 1688 EATON PARK FL 33840 Date or dates debt was incurred 5/18/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$544.06
3.105.	Nonpriority creditor's name and mailing address SCHMIDT MACHINE CO, INC. 15446 BLAKELEY TRAIL BELLE PLAINE MN 56011 Date or dates debt was incurred 3/2/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,021.26

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3.106.	Nonpriority creditor's name and mailing address SCHNEIDER NATIONAL INC. 2567 PAYSPHERE CIRCLE CHICAGO IL 60674 Date or dates debt was incurred 6/16/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$841.59
3.107.	Nonpriority creditor's name and mailing address SMART PROCURE, INC. 700 WEST HILLSBORO BLVD., SUITE 4-100 DEERFIELD BEACH FL 33441 Date or dates debt was incurred 6/21/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,000.00
3.108.	Nonpriority creditor's name and mailing address SOUTHEASTERN FREIGHT LINE P O BOX 100104 COLUMBIA SC 29202-3104 Date or dates debt was incurred 2/23/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$555.49

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3.109.	Nonpriority creditor's name and mailing address SOUTHEASTERN TRUCK & TRAILER COMPAN 2201 COMMERCE ROAD RICHMOND VA 23234 Date or dates debt was incurred 6/1/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$544.00
3.110.	Nonpriority creditor's name and mailing address SOUTHERLAND, INC. P.O. BOX 269 ANTIOCH TN 37011 Date or dates debt was incurred 5/24/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,910.00
3.111.	Nonpriority creditor's name and mailing address SOUTHSIDE WOODCRAFT P O BOX 3515 PAWLEYS ISLAND SC 29585-0000 Date or dates debt was incurred 1/7/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$95,391.60

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3.112.	Nonpriority creditor's name and mailing address SPECTRUM ADHESIVES, INC PO BOX 1000, DEPT 466 MEMPHIS TN 38148-0466 Date or dates debt was incurred 3/31/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$324.75
3.113.	Nonpriority creditor's name and mailing address SPRUCE UP TREE CARE LLC 1831 12TH AVE S SUITE #147 NASHVILLE TN 37203 Date or dates debt was incurred 6/13/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,800.00
3.114.	Nonpriority creditor's name and mailing address STANDARD FIBER, LLC. 577 AIRPORT BLVD SUITE 200 BURLINGAME CA 94010 Date or dates debt was incurred 5/3/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$27,582.56

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3.115.	Nonpriority creditor's name and mailing address STANLEY CONVERGENT SECURITY SOLUTIONS DEPT CH 10651 PALATINE IL 60055	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$82.76
	Date or dates debt was incurred 5/26/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.116.	Nonpriority creditor's name and mailing address STAPLES P O BOX 105748 ATLANTA GA 30348-5748	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,779.23
	Date or dates debt was incurred 4/2/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.117.	Nonpriority creditor's name and mailing address SUMMIT LOGISTICS SERVICES, LLC P.O. BOX 409 FORT ATKINSON WI 53538	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$4,550.00
	Date or dates debt was incurred 5/3/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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3.118.	Nonpriority creditor's name and mailing address SUNBELT RENTALS, INC. P O BOX 409211 ATLANTA GA 30384-9211 Date or dates debt was incurred 5/5/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,203.34
3.119.	Nonpriority creditor's name and mailing address SUTTON CLARK SUPPLY, INC. P O BOX 26367 1705 BROOK ROAD RICHMOND VA 23260-0000 Date or dates debt was incurred 2/1/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$798.39
3.120.	Nonpriority creditor's name and mailing address TFORCE FREIGHT 28013 NETWORK PLACE CHICAGO IL 60673-1280 Date or dates debt was incurred 1/10/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$247,252.42

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3.121.	Nonpriority creditor's name and mailing address THE COBURN COMPANY INC. 1170 UNIVERSAL BLVD., PO BOX 147 WHITEWATER WI 53190	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,975.00
	Date or dates debt was incurred 4/11/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.122.	Nonpriority creditor's name and mailing address THE MOTHERCHIC LLC P.O. BOX 383 VILLANOVA PA 19085	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$3,933.01
	Date or dates debt was incurred 6/7/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.123.	Nonpriority creditor's name and mailing address THETFORD ASSOCIATES, INC. 5516 FALMOUTH STREET SUITE 300 RICHMOND VA 23230-1819	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$28,222.22
	Date or dates debt was incurred 3/23/2022	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.124.	Nonpriority creditor's name and mailing address TRAVELERS ATTN LEGAL DEPT 1 TOWER SQ HARTFORD CT 06183-0003 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INSURANCE PREMIUM FINANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.125.	Nonpriority creditor's name and mailing address TRAVELERS ATTN LEGAL DEPT 1 TOWER SQ HARTFORD CT 06183-0003 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INSURANCE PREMIUM FINANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.126.	Nonpriority creditor's name and mailing address TRAVERO LOGISTICS, LLC 2020 LEFEBURE ROAD FAIRFAX IA 52228 Date or dates debt was incurred 4/20/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,200.00

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3.127.	Nonpriority creditor's name and mailing address TRIDENT TRANSPORT, LLC PO BOX 746991 ATLANTA GA 30374-6991 Date or dates debt was incurred 3/24/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,900.00
3.128.	Nonpriority creditor's name and mailing address UFP 2829 SEA HARBOR ROAD DALLAS TX 75212 Date or dates debt was incurred 2/17/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$111,727.20
3.129.	Nonpriority creditor's name and mailing address ULINE INC P.O. BOX 88741 CHICAGO IL 60680-1741 Date or dates debt was incurred 4/21/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$22,435.23

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

3.130.	Nonpriority creditor's name and mailing address UNITED PARCEL SERVICE P O BOX 809488 CHICAGO IL 60680-9488 Date or dates debt was incurred 6/11/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$5,106.93
3.131.	Nonpriority creditor's name and mailing address UT+C 745 KENTUCK ROAD DANVILLE VA 24540 Date or dates debt was incurred 11/9/2021 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$84,207.65
3.132.	Nonpriority creditor's name and mailing address VERIZON P.O. BOX 16801 NEWARK NJ 07101-6801 Date or dates debt was incurred 6/13/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$320.38

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3.133.	Nonpriority creditor's name and mailing address WARRANTY & RETURN RESERVE COMPANY RELATED LIABILITY Date or dates debt was incurred SINCE FORMATION OF COMPANY Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WARRANTY CLAIMS Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.134.	Nonpriority creditor's name and mailing address WASTE CONSULTANTS P.O. BOX 2407 BOONE NC 28607 Date or dates debt was incurred 6/3/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,007.20
3.135.	Nonpriority creditor's name and mailing address WEBBMASON MARKETING 10830 GILROY ROAD HUNT VALLEY MD 21031 Date or dates debt was incurred 5/25/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$333.36

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3.136.	Nonpriority creditor's name and mailing address WINDSTREAM P O BOX 9001908 LOUISVILLE KY 40290-1908 Date or dates debt was incurred 4/19/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$475.22
3.137.	Nonpriority creditor's name and mailing address WRIGHT OF THOMASVILLE P.O. BOX 306186 NASHVILLE TN 37230-6186 Date or dates debt was incurred 4/28/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$27,344.45
3.138.	Nonpriority creditor's name and mailing address XPO LOGISTICS FREIGHT, INC. 29559 NETWORK PL CHICAGO IL 60673-1295 Date or dates debt was incurred 3/31/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,742.55

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3.139.	Nonpriority creditor's name and mailing address YELLOW DIAMOND CONSULTS LLC DBA COW 7690 TREERIDGE CT ATLANTA GA 30350 Date or dates debt was incurred 6/15/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,000.00
3.140.	Nonpriority creditor's name and mailing address YILMAR DIS TICARET LTD STI DOSAB ALL OSMAN CADNO.25 SONMEZ CADBURSA 16369 TURKEY Date or dates debt was incurred 1/5/2022 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$67,944.00

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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
WOMBLE BOND DICKINSON (US) LLP JILL C WALTERS 555 FAYETTEVILLE ST.,STE 1100 RALEIGH NC 27601	Part 2 line 3.60	_____
WOMBLE BOND DICKINSON (US) LLP TODD A ATKINSON 811 MAIN ST.,STE 3130 HOUSTON TX 77002	Part 2 line 3.60	_____
YILMAR DIS TICARET LTD SIRKETI EYVAS YILMAZ. COMPANY MANAGER DEMIRTAS DUMLUPINAR OSB MAH.FESLEGEN SOK. NO. 11/1 OSMANGAZI BURSA TURKEY	Part 2 line 3.140	_____

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019****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.		\$5,075.00
5b. Total claims from Part 2	5b.	+	\$8,999,459.57
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		\$9,004,534.57

Fill in this information to identify the case:**Debtor name:** Eastern Sleep Products Company**United States Bankruptcy Court for the:** Northern District of Texas**Case number (if known):** 22-90019☐ Check if this is an amended filingOfficial Form 206G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

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

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

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

2. List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1.	<p>Title of contract BUSINESS INSURANCE POLICY</p> <p>State what the contract or lease is for PRIMARY MANAGEMENT LIABILITY - POLICY NO. USF00934622</p> <p>Nature of debtor's interest INSURED</p> <p>State the term remaining 2/12/2023</p> <p>List the contract number of any government contract _____</p>	<p>ALLIANZ GLOBAL RISK US INSURANCE COMPANY THOMAS VILLAROSA 28 LIBERTY STREET 25TH FLOOR NEW YORK NY 10005</p>
2.2.	<p>Title of contract BUSINESS INSURANCE POLICY</p> <p>State what the contract or lease is for RUN-OFF: EASTERN SLEEP PRODUCTS COMPANY (D&O, EMPLOYMENT PRACTICES LIABILITY, FIDUCIARY) - POLICY NO. USF00956721</p> <p>Nature of debtor's interest INSURED</p> <p>State the term remaining 4/28/2027</p> <p>List the contract number of any government contract _____</p>	<p>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</p> <p>ALLIANZ GLOBAL RISK US INSURANCE COMPANY THOMAS VILLAROSA 28 LIBERTY STREET 25TH FLOOR NEW YORK NY 10005</p>
2.3.	<p>Title of contract BUSINESS INSURANCE POLICY</p> <p>State what the contract or lease is for EXCESS D&O - POLICY NO. ANV152226A</p> <p>Nature of debtor's interest INSURED</p> <p>State the term remaining 2/12/2023</p> <p>List the contract number of any government contract _____</p>	<p>State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease</p> <p>ASSOCIATED INDUSTRIES INSURANCE CO, INC. R-T SPECIALTY LLC 180 N. STETSON AVENUE SUITE 4600 CHICAGO IL 60601</p>

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

- 2.4. **Title of contract** BUSINESS 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 D&O - POLICY NO. P-001-000518200-02
- Nature of debtor's interest** INSURED
- State the term remaining** 2/12/2023
- List the contract number of any government contract** _____
- 2.5. **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** REAL PROPERTY LEASE - B, 2700 JEFFERSON DAVIS HIGHWAY, RICHMOND, VA 23234
- Nature of debtor's interest** LESSEE
- State the term remaining** 3/31/2022
- List the contract number of any government contract** _____
- 2.6. **Title of contract** BUSINESS 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** WINDSTORM DEDUCTIBLE BUYBACK - POLICY NO. 1104-359893
- Nature of debtor's interest** INSURED
- State the term remaining** 9/29/2022
- List the contract number of any government contract** _____
- 2.7. **Title of contract** PREMIUM FINANCING **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** FINANCING OF INSURANCE
- Nature of debtor's interest** _____
- State the term remaining** _____
- List the contract number of any government contract** _____
- 2.8. **Title of contract** BUSINESS 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** STORAGE TANK THIRD-PARTY LIABILITY, CORRECTIVE ACTION AND CLEANUP COSTS - POLICY NO. 003033829
- Nature of debtor's interest** INSURED
- State the term remaining** 3/3/2023
- List the contract number of any government contract** _____

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

- 2.9. **Title of contract** BUSINESS 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** UMBRELLA - POLICY NO. 6020740105
- Nature of debtor's interest** INSURED CONTINENTAL INSURANCE COMPANY
- State the term remaining** 9/29/2022 151 NORTH FRANKLIN ST
- List the contract number of any government contract** CHICAGO IL 60606
- 2.10. **Title of contract** LICENSE AND INDEMNITY AGREEMENT AND AS AMENDED **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE - 1007 S. 12TH ST, WATERTOWN, WI 53094
- Nature of debtor's interest** LICENSEE EASTGATE LLC
- State the term remaining** 8/31/2024 246 SHELHORN ST
- List the contract number of any government contract** HENDERSON NV 89052
- 2.11. **Title of contract** BUSINESS 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** ENVIRONMENTAL SITE LIABILITY - POLICY NO. PRE 3342396 01
- Nature of debtor's interest** INSURED GREAT AMERICAN INSURANCE COMPANY
- State the term remaining** 9/29/2025 ADMINISTRATIVE OFFICES
- List the contract number of any government contract** GREAT AMERICAN TOWER AT QUEEN CITY SQUARE
- 2.12. **Title of contract** LICENSE AND INDEMNITY AGREEMENT AND AS AMENDED **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE - 1007 S. 12TH ST, WATERTOWN, WI 53094
- Nature of debtor's interest** LICENSEE HEPATICA HILL HOLDINGS, LTD.
- State the term remaining** 8/31/2024 1200 N MAYFAIR RD
- List the contract number of any government contract** SUITE 310
- 2.13. **Title of contract** UNKNOWN **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** COPIER LEASE - VIRGINIA PLANT
- Nature of debtor's interest** LESSOR OF EQUIPMENT KONICA MINOLTA
- State the term remaining** UNKNOWN 100 WILLIAMS DR.
- List the contract number of any government contract** RAMSEY NJ 07446

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

- 2.14. **Title of contract** UNKNOWN **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** MAINTENANCE ON OFFICE MACHINES
- Nature of debtor's interest** PURCHASER OF SERVICES KONICA MINOLTA BUSINESS SOLUTIONS
DEPT. AT 952823
ATLANTA GA 31192-2823
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.15. **Title of contract** UNKNOWN **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** 7 COPIERS / PRINTERS AT MULTIPLE LOCATIONS
- Nature of debtor's interest** LESSOR OF EQUIPMENT KONICA MINOLTA PREMIER FINANCE
P.O. BOX 070241
PHILADELPHIA PA 19176-0241
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.16. **Title of contract** SALES ORDER WITH SYMBOL MATTRESS **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** ONLINE TRUCKING BROKER SYSTEM
- Nature of debtor's interest** PURCHASER OF SERVICES KUEBIX LLC
5 MILL & MAIN PLACE #400
MAYNARD MA 01754
- State the term remaining** STARTING NOV 14, 2019, ONGOING
- List the contract number of any government contract** _____
- 2.17. **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** REAL PROPERTY LEASE - 2001 BELLWOOD RD, RICHMOND, VA 23237
- Nature of debtor's interest** LESSEE NET LEASE-POOL 3 LLC DBA MTP
2001 BELLWOOD RD LLC
C/O SOMERA ROAD
130 W 42ND ST FL 22
NEW YORK NY 10036
- State the term remaining** 4/2036
- List the contract number of any government contract** _____
- 2.18. **Title of contract** LEASE AGREEMENT BETWEEN NL VENTURES XI OLIVE BRANCH, L.L.C. AS LESSOR AND ENGLANDER-SYMBOL MATTRESS OF MISSISSIPPI, LLC AND EASTERN SLEEP PRODUCTS COMPANY, COLLECTIVELY, JOINTLY AND SEVERALLY, AS LESSEE **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** INDUSTRIAL DROVE, OLIVE BRANCH, MISSISSIPPI - PLANT LEASE NET LEASE-POOL3 LLC DBA MTP
8300 INDUSTRIAL DR LLC
ANGELICA SAVAGE
SOMERA ROAD 130 W 42ND ST FL 22
NEW YORK NY 10036
- Nature of debtor's interest** LESSOR OF REAL PROPERTY
- State the term remaining** LEASE EXPIRES APRIL 30, 2036
- List the contract number of any government contract** _____

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

2.19.	Title of contract	DEED OF LEASE BETWEEN NL VENTURES XI BELL WOOD, L.L.C. AS LESSOR AND EASTERN SLEEP PRODUCTS COMPANY AS LESSEE	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	BELLWOOD RD, RICHMOND, VIRGINIA - PLANT LEASE	NET LEASE-POOL3 LLC DBA MTP 8300 INDUSTRIAL DR LLC STEPHANIE BLESSING SOMERA ROAD 130 W 42ND ST FL 22 NEW YORK NY 10036
	Nature of debtor's interest	LESSOR OF REAL PROPERTY	
	State the term remaining	LEASE EXPIRES APRIL 30, 2036	
	List the contract number of any government contract	_____	
2.20.	Title of contract	LEASE AGREEMENT BETWEEN NL VENTURES XI WATERTOWN, L.L.C. AS LESSOR AND SYMBOL MATTRESS OF WISCONSIN AND EASTERN SLEEP PRODUCTS COMPANY, COLLECTIVELY, JOINTLY AND SEVERALLY, AS LESSEE	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	S. 12TH STREET, WATERTOWN, WISCONSIN - PLANT LEASE	NL VENTURES XI WATERTOWN, L.L.C. C/O AIC VENTURES ATTENTION: HEATH D. ESTERAK, MANAGING 2600 VIA FORTUNA SUITE 260 AUSTIN TX 78746
	Nature of debtor's interest	LESSOR OF REAL PROPERTY	
	State the term remaining	LEASE EXPIRES APRIL 30, 2036	
	List the contract number of any government contract	_____	
2.21.	Title of contract	BUSINESS 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 D&O - POLICY NO. OSIC-410-DOX-1-2022-1	
	Nature of debtor's interest	INSURED	OBSIDIAN SPECIALTY INSURANCE COMPANY R-T SPECIALTY LLC 180 N. STETSON AVENUE SUITE 4600 CHICAGO IL 60601
	State the term remaining	2/12/2023	
	List the contract number of any government contract	_____	
2.22.	Title of contract	ACCT: 1104-359893 - CORSICANA INVESTORS LLC	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	PREMIUM FINANCING	
	Nature of debtor's interest	FINANCING OF INSURANCE	PEOPLES PREMIUM FINANCE JOHN BINAGGIO 600 SW JEFFERSON SUITE 204 LEE'S SUMMIT MO 64063
	State the term remaining	7/29/22	
	List the contract number of any government contract	_____	
2.23.	Title of contract	UNKNOWN	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
	State what the contract or lease is for	REAL PROPERTY LEASE - 4932 W. COLTER STREET, GLENDALE, AZ 85301	
	Nature of debtor's interest	LESSEE	PHOENIX GLENDALE INDUSTRIAL INVESTORS LLC 401 E KILBOURN AVE SUITE 201 MILWAUKEE WI 53202
	State the term remaining	9/2024	
	List the contract number of any government contract	_____	

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

- 2.24. **Title of contract** BUSINESS 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** AUTOMOBILE - POLICY NO. BA-OP957391-21-14
- Nature of debtor's interest** INSURED PHOENIX INSURANCE COMPANY
205 MAIN STREET
CHESTER NJ 07930
- State the term remaining** 9/29/2022
- List the contract number of any government contract** _____
- 2.25. **Title of contract** INDUSTRIAL BUILDING DEED OF LEASE **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE - 4901 FITZHUGH AVENUE, SUITE 300, RICHMOND VA 23230
- Nature of debtor's interest** LESSEE PHOENIX RICHMOND INDUSTRIAL INVESTORS LLC
C/O PHOENIX INVESTORS
401 E KILBOURN AVE
SUITE 201
MILWAUKEE WI 53202
- State the term remaining** 4/27/2031
- List the contract number of any government contract** _____
- 2.26. **Title of contract** UNKNOWN **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** OFFICE EQUIPMENT LEASE; SYMBOL MATTRESS -CORP OFFICE RICHMOND, VA
- Nature of debtor's interest** LESSOR OF EQUIPMENT PITNEY BOWES GLOBAL FINANCIAL SVC
PO BOX 981022
BOSTON MA 02298-1022
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.27. **Title of contract** UNKNOWN **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** WATER COOLERS (OFFICE & PLANT); SYMBOL MATTRESS -CORP OFFICE RICHMOND, VA
- Nature of debtor's interest** LESSOR OF EQUIPMENT QUENCH USA, INC.
P.O. BOX 781393
PHILADELPHIA PA 19178-1393
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.28. **Title of contract** LICENSE AND INDEMNITY AGREEMENT AND AS AMENDED **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** REAL PROPERTY LEASE - 1007 S. 12TH ST, WATERTOWN, WI 53094
- Nature of debtor's interest** LICENSEE RY HOLDINGS PROPERTY 300 LLC
1200 N MAYFAIR RD
SUITE 310
MILWAUKEE WI 53226
- State the term remaining** 8/31/2024
- List the contract number of any government contract** _____

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

- 2.29. **Title of contract** BUSINESS 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 D&O - POLICY NO. D72808221ASP
- Nature of debtor's interest** INSURED **STARSTONE SPECIALTY INSURANCE COMPANY**
- State the term remaining** 2/12/2023 **R-T SPECIALTY LLC**
- List the contract number of any government contract** _____ **180 N. STETSON AVENUE**
- _____ **SUITE 4600**
- _____ **CHICAGO IL 60601**
- 2.30. **Title of contract** PREMIUM FINANCING **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** FINANCING OF INSURANCE
- Nature of debtor's interest** _____ **TRAVELERS**
- State the term remaining** _____ **ATTN LEGAL DEPT**
- List the contract number of any government contract** _____ **1 TOWER SQ**
- _____ **HARTFORD CT 06183-0003**
- 2.31. **Title of contract** PREMIUM FINANCING **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** FINANCING OF INSURANCE
- Nature of debtor's interest** _____ **TRAVELERS**
- State the term remaining** _____ **ATTN LEGAL DEPT**
- List the contract number of any government contract** _____ **1 TOWER SQ**
- _____ **HARTFORD CT 06183-0003**
- 2.32. **Title of contract** BUSINESS 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** PROPERTY - POLICY NO. 660-0P950549-21-14;
- Nature of debtor's interest** INSURED **TRAVELERS INDEMNITY CORPORATION OF AMERICA**
- State the term remaining** 9/29/2022 **1 TOWER SQ**
- List the contract number of any government contract** _____ **HARTFORD CT 06183-0003**
- 2.33. **Title of contract** BUSINESS 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** GENERAL LIABILITY - POLICY NO. 660-0P950549-21-14
- Nature of debtor's interest** INSURED **TRAVELERS INDEMNITY CORPORATION OF AMERICA**
- State the term remaining** 9/29/2022 **1 TOWER SQ**
- List the contract number of any government contract** _____ **HARTFORD CT 06183-0003**
- _____

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

- 2.34. **Title of contract** BUSINESS 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 LIABILITY - POLICY NO. 6S129831-EX
- Nature of debtor's interest** INSURED TRAVELERS PROPERTY AND CASUALTY COMPANY OF AMERICA
1 TOWER SQ
HARTFORD CT 06183-0003
- State the term remaining** 9/29/2022
- List the contract number of any government contract** _____
- 2.35. **Title of contract** UNKNOWN **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** PO BOX - AZ PLANT
- Nature of debtor's interest** PO BOX UNITED STATES POSTMASTER
POSTMASTER
CORSICANA TX 75110
- State the term remaining** UNKNOWN
- List the contract number of any government contract** _____
- 2.36. **Title of contract** BUSINESS 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** WORKER'S COMPENSATION - POLICY NO. UB-7R704054-21-14
- Nature of debtor's interest** INSURED VARIOUS TRAVELERS
SUBSIDIARIES INCLUDING THE
TRAVELERS INDEMNITY COMPANY
OF CONNECTICUT, TRAVELERS
PROPERTY CASUALTY COMPANY
OF AMERICA, THE PHOENIX
INSURANCE COMPANY, AND
OTHERS
TRAVELERS INDEMNITY COMPANY
OF CONNECTICUT
1 TOWER SQ
HARTFORD CT 06183-0003
- State the term remaining** 9/29/2022
- List the contract number of any government contract** _____

Fill in this information to identify the case:**Debtor name:** Eastern Sleep Products Company**United States Bankruptcy Court for the:** Northern District of Texas**Case number (if known):** 22-90019☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

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

1. Does the debtor have any codebtors?

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

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

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1. CHESTERFIELD LANDCO, L.L.C	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2. CHESTERFIELD LANDCO, L.L.C	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3. CORSICANA BEDDING, LLC	P.O. BOX 3233 FT. WORTH TX 76113	NL VENTURES XI OLIVE BRANCH, L.L.C.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.4. CORSICANA BEDDING, LLC	P.O. BOX 3233 FT. WORTH TX 76113	NL VENTURES XI BELLWOOD, L.L.C.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.5. CORSICANA BEDDING, LLC	P.O. BOX 3233 FT. WORTH TX 76113	NL VENTURES XI WATERTOWN, L.L.C.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.6. CORSICANA BEDDING, LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.7. CORSICANA BEDDING, LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8. CORSICANA OPERATING CO., LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.9. CORSICANA OPERATING CO., LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.10. CORSICANA PARENT CO., LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.11. CORSICANA PARENT CO., LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.12. EASTERN SLEEP-FORT WAYNE, LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.13. EASTERN SLEEP-FORT WAYNE, LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.14. EASTERN SLEEP-POINCIANA, LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.15. EASTERN SLEEP-POINCIANA, LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.16. ENGLANDER-SYMBOL MATTRESS OF MISSISSIPPI, LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.17. ENGLANDER-SYMBOL MATTRESS OF MISSISSIPPI, LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.18. ENGLANDER-SYMBOL MATTRESS OF MISSISSIPPI, LLC	P.O. BOX 3233 FT. WORTH TX 76113	NET LEASE-POOL3 LLC DBA MTP 8300 INDUSTRIAL DR LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.19. HYLTON HOUSE FURNITURE, INC.	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.20. HYLTON HOUSE FURNITURE, INC.	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.21. LUUF, LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.22. LUUF, LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.23. MASTER CRAFT SLEEP PRODUCTS, INC.	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.24. MASTER CRAFT SLEEP PRODUCTS, INC.	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.25. OLIVE BRANCH BUILDING, LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.26. OLIVE BRANCH BUILDING, LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.27. SYMBOL MATTRESS - LAS VEGAS, LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.28. SYMBOL MATTRESS - LAS VEGAS, LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.29. SYMBOL MATTRESS OF FLORIDA, INC.	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.30. SYMBOL MATTRESS OF FLORIDA, INC.	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.31. SYMBOL MATTRESS OF PENNSYLVANIA, INC.	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.32. SYMBOL MATTRESS OF PENNSYLVANIA, INC.	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.33. SYMBOL MATTRESS OF WISCONSIN, INC.	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.34. SYMBOL MATTRESS OF WISCONSIN, INC.	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.35. SYMBOL MATTRESS OF WISCONSIN, INC.	P.O. BOX 3233 FT. WORTH TX 76113	NET LEASE-POOL 3 LLC DBA MTP 1100 S 12TH ST LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.36. SYMBOL MATTRESS OF WISCONSIN, INC. (WI)	P.O. BOX 3233 FT. WORTH TX 76113	NL VENTURES XI WATERTOWN, L.L.C.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.37. SYMBOL MATTRESS TRANSPORTATION, INC.	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.38. SYMBOL MATTRESS TRANSPORTATION, INC.	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor **Eastern Sleep Products Company**Case number (if known) **22-90019**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.39. THETFORD LEASING LLC	P.O. BOX 3233 FT. WORTH TX 76113	BLUE TORCH FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.40. THETFORD LEASING LLC	P.O. BOX 3233 FT. WORTH TX 76113	WINGSPIRE CAPITAL LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:**Debtor name:** Eastern Sleep Products Company**United States Bankruptcy Court for the:** Northern District of Texas**Case number (if known):** 22-90019Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

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

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

Declaration and signature

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

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

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

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

Executed on 7/18/2022
MM/DD/YYYY

x

/s/ Michael Juniper

Signature of individual signing on behalf of debtor

Michael Juniper
Printed name

Chief Restructuring Officer
Position or relationship to debtor