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 Trucking, Inc.

**UNITED STATES BANKRUPTCY COURT
 EASTERN DISTRICT OF CALIFORNIA
 SACRAMENTO DIVISION**

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| In re: | Case No.: 22-21148 |
| MATHESON FLIGHT EXTENDERS, INC., | Chapter 11 |
| Debtor. | |

| | |
|---------------------------------|--------------------|
| In re: | Case No.: 22-21149 |
| MATHESON POSTAL SERVICES, INC., | Chapter 11 |
| Debtor. | |

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| In re: | Case No.: 22-21758 |
| MATHESON TRUCKING, INC., | Chapter 11 |
| Debtor. | |
| <input type="checkbox"/> Affects All Debtors | GLOBAL NOTES, METHODOLOGY AND SPECIFIC DISCLOSURES REGARDING THE DEBTOR'S SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS |
| <input type="checkbox"/> Affects Matheson Flight Extenders Only | |
| <input type="checkbox"/> Affects Matheson Postal Services Only | |
| <input checked="" type="checkbox"/> Affects Matheson Trucking, Inc. Only | |
| Judge: Hon. Christopher M. Klein | |

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Introduction

Matheson Trucking, Inc., the debtor and debtor-in-possession in the above-captioned chapter 11 case (the “**Debtor**”) with the assistance of its advisors, have filed its Schedules of Assets and Liabilities (the “**Schedules**”) and Statement of Financial Affairs (the “**Statements**,” and together with the Schedules, the “**Schedules and Statements**”) with the United States Bankruptcy Court for the Eastern District of California (the “**Bankruptcy Court**”), pursuant to section 521 of title 11 of the United States Code (the “**Bankruptcy Code**”) and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the “**Bankruptcy Rules**”).

These Global Notes, Methodology, and Specific Disclosures Regarding the Debtor’s Schedules of Assets and Liabilities and Statement of Financial Affairs (the “**Global Notes**”) pertain to, are incorporated by reference in, and comprise an integral part of the Debtor’s Schedules and Statements. The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and Statements.

In preparing the Schedules and Statements, the Debtor relied upon information derived from its books and records that was available at the time of such preparation. Although the Debtor has made reasonable efforts to ensure the accuracy and completeness of such financial information, inadvertent errors or omissions, as well as the discovery of conflicting, revised, or subsequent information, may cause a material change to the Schedules and Statements.

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

The Schedules and Statements have been signed by an authorized representative of the Debtor. In reviewing and signing the Schedules and Statements, this representative relied upon the efforts, statements and representations of the Debtor’s other personnel and professionals. The representative has not (and could not have) personally verified the accuracy of each such statement and representation, including, for example, statements and representations concerning amounts owed to creditors and their addresses.

GLOBAL NOTES AND OVERVIEW OF METHODOLOGY

1. Basis of Presentation. The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States (“**GAAP**”), nor are they intended to be fully reconciled with the financial

statements of the Debtor. Additionally, the Schedules and Statements contain unaudited information that is subject to further review and potential adjustment.

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

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

3. **Global Notes.** These Global Notes are in addition to any specific notes set forth in the Schedules and Statement. The fact that the Debtor has prepared a Global Note with respect to a particular Schedule or Statement and not as to others does not reflect and should not be interpreted as a decision by the Debtor to exclude the applicability of such Global Note to any or all of the Debtor’s remaining Schedules or Statements, as appropriate.

4. **Description of Cases and “as of” Information Date.** On July 14, 2022 (the “**Petition Date**”), the Debtor filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code. The Debtor is operating its business and managing its properties as a debtor in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code. On July 22, 2022, the Bankruptcy Court entered an order directing procedural consolidation and joint administration of the Debtor’s chapter 11 case under case number 22-21148 [Docket No. 63].

The asset information provided in the Schedules and Statements, except as otherwise noted, represents the asset data of the Debtor as of June 30, 2022, and the liability information provided herein, except as otherwise noted, represents the liability data of the Debtor as of July 14, 2022.

5. **Net Book Value of Assets.** Except as otherwise noted, each asset and liability of the Debtor is shown on the basis of net book value of the asset or liability in accordance with the

Debtor's accounting books and records. Therefore, unless otherwise noted, the Schedules and Statements are not based upon any estimate of the current market values of the Debtor's assets and liabilities, which may not correspond to book values. It would be cost prohibitive and unduly burdensome to obtain current market valuations of the Debtor's property interests. Additionally, because the book values of certain assets may materially differ from their fair market values, they may be listed as undetermined amounts as of the Petition Date. Furthermore, as applicable, assets that have been fully depreciated may not appear on the Schedules or may appear with a current value of "undetermined".

6. **Recharacterization.** Notwithstanding the Debtor's reasonable efforts to properly characterize, classify, categorize, or designate certain Claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statements, the Debtor may, nevertheless, have improperly characterized, classified, categorized, designated, or omitted certain items due to the complexity and size of the Debtor's business. Accordingly, the Debtor reserves all of its rights to recharacterize, reclassify, recategorize, redesignate, add, or delete items reported in the Schedules and Statements at a later time as is necessary or appropriate as additional information becomes available, including, without limitation, whether contracts or leases listed herein were deemed executory or unexpired as of the Petition Date and remain executory and unexpired post-petition.

7. **Real Property and Personal Property-Leased.** In the ordinary course of its business, the Debtor leased real property and various articles of personal property, including, fixtures, and equipment, from certain third-party lessors. The Debtor has made reasonable efforts to list all such leases in the Schedules and Statements. The Debtor has made reasonable efforts to include lease obligations on Schedule D (secured debt) to the extent applicable and to the extent the lessor filed a UCC-1. However, nothing in the Schedules or Statements is, or shall be construed as, an admission or determination as to the legal status of any lease (including whether to assume and assign or reject such lease or whether it is a true lease or a financing arrangement).

8. **Excluded Assets and Liabilities.** The Debtor has sought to allocate liabilities between the prepetition and postpetition periods based on the information and research conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further investigation is conducted, the allocation of liabilities between the prepetition and postpetition periods may change. Accordingly, the Debtor reserves all of its rights to amend, supplement, or otherwise modify the Schedules and Statements as is necessary or appropriate.

The liabilities listed on the Schedules do not reflect any analysis of Claims under section 503(b)(9) of the Bankruptcy Code. Accordingly, the Debtor reserves all of its rights to dispute or challenge the validity of any asserted Claims under section 503(b)(9) of the Bankruptcy Code.

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

The Bankruptcy Court has authorized the Debtor to pay, in its discretion, certain outstanding Claims on a post-petition basis. Prepetition liabilities that have been paid post-

petition may have been excluded from the Schedules and Statements. To the extent the Debtor pays any of the claims listed in the Schedules and Statements pursuant to any orders entered by the Bankruptcy Court, the Debtor reserves all rights to amend and supplement the Schedules and Statements and take other action, such as filing objections to Claims, as is necessary and appropriate to avoid overpayment or duplicate payment for such liabilities.

9. **Insiders.** Solely, for purposes of the Schedules and Statements, the Debtor defines “insiders” to include the following: (a) directors; (b) senior level officers; (c) equity holders holding in excess of 5% of the voting securities of the Debtor entities; (d) Debtor affiliates; and (e) relatives of any of the foregoing (to the extent known by the Debtor). Entities listed as “insiders” have been included for informational purposes and their inclusion shall not constitute an admission that those entities are insiders for purposes of section 101(31) of the Bankruptcy Code.

10. **Intercompany and Other Transactions.** For certain reporting and internal accounting purposes, the Debtor records intercompany receivables and payables. Receivables and payables among the Debtor and its other debtor affiliates are reported as assets on Schedule A/B or liabilities on Schedule E/F part 2, as appropriate (collectively, the “***Intercompany Claims***”) as of the Petition Date. While the Debtor has used commercially reasonable efforts to ensure that the proper intercompany balance is attributed to each legal entity, the Debtor and its estate reserve all rights to amend the Intercompany Claims in the Schedules and Statements, including, without limitation, to change the characterization, classification, categorization or designation of such claims, including, but not limited to, the right to assert that any or all Intercompany Claims are, in fact, consolidated or otherwise properly assets or liabilities of a different Debtor entity. The intercompany accounts receivable, accounts payable and loan amounts on a consolidated basis for Matheson Trucking, Inc. and all subsidiaries net to zero. The company is still in the process of reviewing all intercompany transactions.

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

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

Moreover, other than real property leases reported in Schedule A/B 55, the Debtor has not necessarily set forth executory contracts and unexpired leases as assets in the Schedules and Statements, even though these contracts and leases may have some value to the Debtor’s estate. The Debtor’s executory contracts and unexpired leases have been set forth in Schedule G.

12. **Materialman’s/Mechanic’s Liens.** The assets listed in the Schedules and Statements are presented without consideration of any materialman’s or mechanic’s liens.

1 **13. Classifications.** Listing a Claim or contract on (a) Schedule D as “secured,” (b) Schedule
2 E/F part 1 as “priority,” (c) Schedule E/F part 2 as “unsecured,” or (d) Schedule G as
3 “executory” or “unexpired,” does not constitute an admission by the Debtor of the legal
rights of the claimant, or a waiver of the Debtor’s rights to recharacterize or reclassify such
Claims or contracts or leases or to exercise its rights to setoff against such Claims.

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

8 **15. Causes of Action.** Despite its reasonable efforts to identify all known assets, the Debtor
9 may not have listed all of its causes of action or potential causes of action against third-
10 parties as assets in the Schedules and Statements, including, without limitation, causes of
11 actions arising under the provisions of chapter 5 of the Bankruptcy Code and any other
12 relevant non-bankruptcy laws to recover assets or avoid transfers. The Debtor reserves all of
13 its rights with respect to any cause of action (including avoidance actions), controversy,
14 right of setoff, cross-claim, counter-claim, or recoupment and any Claim on contracts or for
15 breaches of duties imposed by law or in equity, demand, right, action, lien, indemnity,
16 guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege,
17 license, and franchise of any kind or character whatsoever, known, unknown, fixed or
contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated,
disputed or undisputed, secured or unsecured, assertable directly or derivatively, whether
arising before, on, or after the Petition Date, in contract or in tort, in law, or in equity, or
pursuant to any other theory of law (collectively, “**Causes of Action**”) it may have, and
neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any
Claims or Causes of Action or in any way prejudice or impair the assertion of such Claims or
Causes of Action.

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

23 **17. Summary of Significant Reporting Policies.** The following is a summary of significant
reporting policies:

24 a. Undetermined Amounts. The description of an amount as
25 “unknown,” “TBD” or “undetermined” is not intended to
26 reflect upon the materiality of such amount.

27 b. Totals. All totals that are included in the Schedules and
28 Statements represent totals of all known amounts. To the

1 extent there are unknown or undetermined amounts, the
2 actual total may be different than the listed total.

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

7 **18. Estimates and Assumptions.** Because of the timing of the filings, management was
8 required to make certain estimates and assumptions that affected the reported amounts of
9 these assets and liabilities. Actual amounts could differ from those estimates, perhaps
10 materially.

11 **19. Currency.** Unless otherwise indicated, all amounts are reflected in U.S. dollars.

12 **20. Setoffs.** The Debtor incurs certain offsets and other similar rights during the ordinary course
13 of business. Offsets in the ordinary course can result from various items, including, without
14 limitation, intercompany transactions, pricing discrepancies, returns, refunds, warranties,
15 debit memos, credits, and other disputes between the Debtor and their suppliers and/or
16 customers. These offsets and other similar rights are consistent with the ordinary course of
17 business in the Debtor's industry and are not tracked separately. Therefore, although such
18 offsets and other similar rights may have been accounted for when certain amounts were
19 included in the Schedules, offsets are not independently accounted for, and as such, are or
20 may be excluded from the Debtor's Schedules and Statements.

21 **Specific Disclosures With Respect To The Debtor's Schedules**

22 **Schedule A/B.** All values set forth in Schedule A/B reflect the book value of the Debtor's assets
23 as of June 30, 2022, unless otherwise noted below. Other than real property leases
24 reported on Schedule A/B 55, the Debtor has not included leases and contracts on Schedule A/B.
25 Leases and contracts are listed on Schedule G.

26 **Schedule A/B 3.** Cash values held in financial accounts are listed on Schedule A/B 3 as
27 of July 14, 2022, unless otherwise noted in Schedule A/B 3. Details with respect
28 to the Debtor's cash management system and bank accounts are provided in the *Motion
for Order Authorizing Debtor to (A) Maintain Existing Bank Account and (B) Continue
Use of Cash Management System* [Case No. 22-21758; Docket No. 11] (the "**Cash
Management Motion**").

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

Schedule A/B 47. Listing the year, make, model and identification numbers for each of
the Debtor's automobiles, vans, trucks, and trailers would be unduly burdensome and,
therefore, the Debtor has not listed this information. However, if required, the
Debtor will compile this information. The vehicles specifically identified in
Schedule A/B 47 are believed to be utilized by Matheson Family Members for business
and personal use. The amount referenced in the schedules is the net book value and the
current value is "undetermined" as the net book value for these vehicles may not be an
indication of the market value.

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3 **Schedule A/B 55.** The Debtor does not own any real property. The Debtor has
4 listed its real property leases in Schedule A/B 55. The Debtor's leasehold
interests/improvements appear on Schedule A/B 55.

5 **Schedule A/B 63.** The Debtor maintains customer and vendor lists. The amount is
6 listed as undetermined because the fair market value of such ownership cannot be
determined.

7 **Schedule A/B 72.** The Debtor has listed any unused net operating losses in response to
Schedule A/B 72 on a consolidated basis.

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

14 **Schedule A/B 77.** The intercompany receivables listed on Schedule A/B 77 indicate the
15 date through which they were calculated. All other receivables listed on Schedule A/B 77
are listed as of June 30, 2022.

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

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

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

26 **Schedule E/F Part 1.** The Bankruptcy Court has authorized the Debtor, in its discretion, to pay
27 certain employee wage, paid time off, benefit and business expenses that may be entitled to
priority under the applicable provisions of the Bankruptcy Code. To the extent that applicable
28

1 Claims have been or will be paid under one or more of the Court's orders, such Claims may not
2 be included in Schedule E/F Part 1.

3 The listing of any claim on Schedule E/F Part 1 does not constitute an admission by the Debtor
4 that such claim is entitled to priority treatment under 11 U.S.C. § 507. The Debtor reserves its
right to dispute the priority status of any claim on any basis.

5 **Schedule E/F part 2.** The Debtor has used reasonable efforts to report all general unsecured
6 Claims against the Debtor on Schedule E/F part 2, based upon the Debtor's books and records
as of the Petition Date.

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

11 Schedule E/F part 2 contains information regarding pending litigation involving the Debtor. The
12 dollar amount of potential Claims associated with any such pending litigation is listed as
13 "undetermined" and marked as contingent, unliquidated, and disputed in the Schedules and
14 Statements. Some of the litigation Claims listed on Schedule E/F may be subject to
15 subordination pursuant to section 510 of the Bankruptcy Code. Further, the incidents underlying
the litigation Claims listed on Schedule E/F may have given rise to related obligations that the
Debtor may be responsible for. Inclusion of these related obligations on Schedule E/F is not
intended to suggest that the litigation counterparty is entitled to multiple or duplicative recoveries.

16 Schedule E/F part 2 also includes potential or threatened litigation claims. Any information
17 contained in Schedule E/F part 2 with respect to such potential litigation shall not be a binding
18 representation of the Debtor's liabilities with respect to any of the potential suits and proceedings
included therein.

19 The Debtor expressly incorporates by reference into Schedule E/F part 2, all parties to pending
20 litigation listed in the Debtor's Statements 7, as contingent, unliquidated, and disputed claims, to
the extent not already listed on Schedule E/F part 2.

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

24 **Schedule G.** Although reasonable efforts have been made to ensure the accuracy of Schedule
25 G, inadvertent errors or omissions may have occurred. The Debtor hereby reserves all of its
26 rights to (i) dispute the validity, status or enforceability of any contracts, agreements or leases
27 set forth in Schedule G and (ii) amend or supplement such Schedule as necessary. Furthermore,
the Debtor reserves all of its rights, claims and causes of action with respect to the contracts and
28 agreements listed on the Schedules, including the right to dispute or challenge the
characterization or the structure of any transaction, document or instrument.

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

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

7 Certain of the contracts and agreements listed on Schedule G may consist of several parts,
8 including, purchase orders, amendments, restatements, waivers, letters, and other documents that
9 may not be listed on Schedule G or that may be listed as a single entry. In some cases, the same
10 supplier or provider appears multiple times on Schedule G. This multiple listing is intended to
11 reflect distinct agreements between the Debtor and such supplier or provider. The Debtor
expressly reserves its rights to challenge whether such related materials constitute an
executory contract, a single contract or agreement, or multiple, severable or separate contracts.

12 The contracts, agreements, and leases listed on Schedule G may have expired or may have been
13 modified, amended, or supplemented from time to time by various amendments, restatements,
14 waivers, estoppel certificates, letters, memoranda and other documents, instruments, and
15 agreements that may not be listed therein despite the Debtor's use of reasonable efforts to
16 identify such documents. Further, unless otherwise specified on Schedule G, each executory
17 contract or unexpired lease listed thereon shall include all exhibits, schedules, riders,
modifications, declarations, amendments, supplements, attachments, restatements, or other
agreements made directly or indirectly by any agreement, instrument, or other document that in
any manner affects such executory contract or unexpired lease, without respect to whether such
agreement, instrument, or other document is listed thereon.

18 In addition, the Debtor may have entered into other types of agreements in the ordinary course
19 of its business, such as subordination, nondisturbance, and attornment agreements,
20 supplemental agreements, settlement agreements, amendments/letter agreements, title
21 agreements and confidentiality agreements. Such documents may not be set forth on Schedule
22 G. Executory agreements that are oral in nature have not been included on the Schedule G.

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

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

Specific Disclosures With Respect To The Debtor's Statements

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

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

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

The Debtor's historical practice for many years prior to 2022 generally was to routinely pay and treat certain non-business credit card payments and other non-business expenses paid on behalf of certain officers and directors as additional compensation for which the recipient received a 1099. After the Debtor's financial problems manifested in or around Feb. 2022, the Debtor imposed additional controls to limit payment of non-business-related expenses and other expenses to officers, directors, and other insiders. The Debtor continues to review its procedures and policies in that regard. The Debtor has included all consulting and payroll distributions, supplemental compensation, and aggregate travel, entertainment, and other expense reimbursements, aggregated by date, made over the twelve months preceding the Petition Date to any individual that may be deemed an "Insider." The Debtor believes that listing of individual payments on a payment date by payment date basis would be unduly burdensome and, therefore, the Debtor has listed the information on an aggregate basis. However, if required, the Debtor will compile this information.

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

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

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

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

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

4 **Statement 26d.** The Debtor has provided financial statements in the ordinary course of its
5 business to numerous financial institutions, creditors, and other parties within two years
6 immediately before the Petition Date. Considering the number of such recipients and the
7 possibility that such information may have been shared with parties without the Debtor's
knowledge or consent or subject to confidentiality agreements, the Debtor may not have
disclosed all parties that may have received such financial statements.

8 **Statement 30.** Unless otherwise indicated in a specific response to Statement 30, the Debtor
9 has included a comprehensive response to Statement 30 in Statement 4.

10 //

11 //

12 //

Fill in this information to identify the case:**Debtor name:** Matheson Trucking, Inc.**United States Bankruptcy Court for the:** Eastern District of California**Case number (if known):** 22-21758☐ 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

\$166,533.37

1b. Total personal property:

Copy line 91A from Schedule A/B

\$217,799,278.52

1c. Total of all property:

Copy line 92 from Schedule A/B

\$217,965,811.89

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

\$14,640,544.09

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

\$138,488.00

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

+ \$300,381,275.61

4. Total liabilities

Lines 2 + 3a + 3b

\$315,160,307.70

Fill in this information to identify the case:

Debtor name: Matheson Trucking, Inc.

United States Bankruptcy Court for the: Eastern District of California

Case number (if known): 22-21758

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

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

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

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

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.

☒ Yes. Fill in the information below

| All cash or cash equivalents owned or controlled by the debtor | Current value of debtor's interest |
|--|------------------------------------|
|--|------------------------------------|

2. Cash on hand

2.1. _____ \$ _____

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. | BANK OF AMERICA | MASTER CONCENTRATION ACCOUNT - CHECKING | 1526 | (\$262,911.83) |
| 3.2. | BANK OF AMERICA | CREDIT CARD COLLATERAL ACCOUNT | 1721 | \$250,000.00 |
| 3.3. | BANK OF AMERICA | INSURANCE ACCOUNT | 1941 | \$0.00 |
| 3.4. ¹ | BANK OF AMERICA | EMPLOYEE TRUST ACCOUNT | 1540 | \$1,291,634.77 |

¹SERVICE CONTRACT ACT EMPLOYEE WELFARE BENEFITS TRUST - BANK ACCOUNT HELD IN TRUST; BALANCE AS OF 6/30/2022

4. Other cash equivalents (Identify all)

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

5. Total of part 1

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

\$1,278,722.94

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758****Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below

7. Deposits, including security deposits and utility deposits

| | Description, including name of holder of deposit | Current value of debtor's interest |
|------|---|------------------------------------|
| 7.1. | SECURITY JAMAL SALEH 7835 CHURCH ST HIGHLAND CA 92346 | \$3,000.00 |
| 7.2. | SECURITY PIPKIN CONSTRUCTION 8997 MANDAN COURT BOISE ID 83709 | \$1,350.00 |
| 7.3. | SECURITY PROLOGIS L.P. 775/795 ATLANTA S. PARKWAY, SUITE 100 COLLEGE PARK GA 30349 | \$38,513.00 |
| 7.4. | SECURITY STAG INDUSTRIAL HOLDINGS LLC 2189 WESTOVER ROAD CHICOPEE MA 01022 | \$215,191.00 |

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

| | Description, including name of holder of prepayment | Current value of debtor's interest |
|------|---|------------------------------------|
| 8.1. | EXCESS LIABILITY POLICY ACE PROPERTY & CASUALTY INSURANCE CO | \$ _____ |
| 8.2. | PREPAID INSURANCE ALL BUSINESS INSURANCE POLICIES | \$1,937,944.10 |
| 8.3. | EXCESS LIABILITY POLICY ARGONAUT INSURANCE COMPANY | \$ _____ |
| 8.4. | PREPAID SUBSCRIPTION CERIDIAN | \$77,363.34 |
| 8.5. | PREPAID SOFTWARE LICENSES CORNERSTONE ONDEMAND INC. | \$61,668.83 |
| 8.6. | RETAINER BALANCE CULHANE MEADOWS | \$30,000.00 |
| 8.7. | RETAINER BALANCE DEVELOPMENT SPECIALISTS, INC. | \$38,111.50 |
| 8.8. | RETAINER BALANCE DONLIN, RECANO & COMPANY, INC. | \$11,012.60 |
| 8.9. | RETAINER BALANCE DOWNEY B LEGAL | \$16,213.00 |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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. | RETAINER BALANCE FLETCHER & LEE | \$8,395.50 |
| 8.11. | AUTO INSURANCE POLICIES GREENWICH INSURANCE COMPANY | \$ _____ |
| 8.12. | GL INSURANCE POLICY GREENWICH INSURANCE COMPANY | \$ _____ |
| 8.13. | RETAINER BALANCE MCDONALD CARANO WILSON | \$25,000.00 |
| 8.14. | PREPAID MISC MULTIPLE | \$65,106.40 |
| 8.15. | RETAINER BALANCE NUTI-HART LLP | \$40,825.50 |
| 8.16. | RETAINER BALANCE PORTER SCOTT | \$10,000.00 |
| 8.17. | FUEL STORAGE TANK POLLUTION SCOTTSDALE INSURANCE COMPANY | \$ _____ |
| 8.18. | PROPERTY INSURANCE POLICY TRAVELERS PROPERTY CASUALTY CO OF AMERICA | \$ _____ |
| 8.19. | EXCESS LIABILITY POLICY WESTCHESTER SURPLUS LINES INSURANCE CO | \$ _____ |
| 8.20. | WC INSURANCE POLICY XL INSURANCE AMERICA INC | \$ _____ |

9. Total of part 2

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

\$2,579,694.77

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

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

Current value of debtor's interest

11. Accounts receivable

| | Face amount | Doubtful or uncollectible accounts | | |
|------|----------------------|------------------------------------|------------------------------------|--------------------|
| 11a. | 90 days old or less: | \$ _____ | - \$ _____ | = → \$ _____ |
| | | Face amount | Doubtful or uncollectible accounts | |
| 11b. | Over 90 days old: | \$ _____ | - \$ _____ | = → \$ _____ |

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758****12. Total of part 3**

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

\$0.00

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 valueCurrent value of
debtor's interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock

14.1. _____ \$ _____

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

Name of entity

% of ownership

| | | | | |
|-------|------------------------------------|---------|-------|--------------|
| 15.1. | JOE GARRETT, INC. | 100.00% | _____ | UNDETERMINED |
| 15.2. | MATHESON AIR SERVICES, LLC | 100.00% | _____ | UNDETERMINED |
| 15.3. | MATHESON FAST FREIGHT, INC. | 100.00% | _____ | UNDETERMINED |
| 15.4. | MATHESON MAIL TRANSPORTATION, INC. | 100.00% | _____ | UNDETERMINED |
| 15.5. | MATHESON POSTAL, INC. | 100.00% | _____ | UNDETERMINED |

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.

UNDETERMINED

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 inventoryNet book value of
debtor's interest
(Where available)Valuation method used
for current valueCurrent value of
debtor's interest**19. Raw materials**

19.1. _____ \$ _____

20. Work in progress

20.1. _____ \$ _____

21. Finished goods, including goods held for resale

21.1. _____ \$ _____

22. Other inventory or supplies

General description

Date of the last physical
inventoryNet book value of
debtor's interestValuation method used
for current valueCurrent value of
debtor's interest

| | | | | | |
|-------|-------------------------|-----------|-------------|---------------------------|-------------|
| 22.1. | INVENTORY - PARTS - FCC | 6/30/2022 | \$15,930.57 | FIFO (FIRST IN FIRST OUT) | \$15,930.57 |
|-------|-------------------------|-----------|-------------|---------------------------|-------------|

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

22. Other inventory or supplies

| | General description | Date of the last physical inventory | Net book value of debtor's interest | Valuation method used for current value | Current value of debtor's interest |
|-------|-----------------------------------|-------------------------------------|-------------------------------------|---|------------------------------------|
| 22.2. | INVENTORY - PARTS - DEN | 6/30/2022 | \$157,629.90 | FIFO (FIRST IN FIRST OUT) | \$157,629.90 |
| 22.3. | INVENTORY - PARTS - OAK | 6/30/2022 | \$9,882.97 | FIFO (FIRST IN FIRST OUT) | \$9,882.97 |
| 22.4. | INVENTORY - PARTS - BOI | 6/30/2022 | \$66,204.93 | FIFO (FIRST IN FIRST OUT) | \$66,204.93 |
| 22.5. | INVENTORY - PARTS - SAC | 6/30/2022 | \$71,221.65 | FIFO (FIRST IN FIRST OUT) | \$71,221.65 |
| 22.6. | INVENTORY - PARTS - SB | 6/30/2022 | \$57,391.27 | FIFO (FIRST IN FIRST OUT) | \$57,391.27 |
| 22.7. | INVENTORY - PARTS - SLC | 6/30/2022 | \$213,719.96 | FIFO (FIRST IN FIRST OUT) | \$213,719.96 |
| 22.8. | INVENTORY - PARTS - SEA | 6/30/2022 | \$111,192.10 | FIFO (FIRST IN FIRST OUT) | \$111,192.10 |
| 22.9. | INVENTORY - PARTS - ALL - RESERVE | | (\$9,500.00) | 1-2% OF TOTAL BALANCE | (\$9,500.00) |

23. Total of part 5

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

\$693,673.35

24. Is any of the property listed in Part 5 perishable?

☒ No

☐ Yes

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

☒ No

☐ Yes Book value: \$ Valuation method: Current value: \$

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

☒ No

☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

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

☒ No. Go to Part 7.

☐ Yes. Fill in the information below.

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

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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

32.1. _____ \$ _____ \$ _____

33. Total of part 6

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

| |
|--------|
| \$0.00 |
|--------|

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

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

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

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

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

- ☐ No
- ☐ Yes

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

- ☐ No
- ☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

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

| | General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|------------------------------------|--|---|------------------------------------|
| 39. Office furniture | | | | |
| 39.1. | OWNED - OFFICE EQUIPMENT/FURNITURE | \$29,949.87 | Net Book Value | \$29,949.87 |
| 40. Office fixtures | | | | |
| 40.1. | SEE, RESPONSE AT PART 7, NO. 39 | \$ _____ | _____ | \$ _____ |
| 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. | COMMUNICATION EQUIPMENT | \$21,179.97 | Net Book Value | \$21,179.97 |
| 41.2. | COMPUTER EQUIPMENT | \$113,294.72 | Net Book Value | \$113,294.72 |
| 41.3. | SECURITY EQUIPMENT | \$3,191.47 | Net Book Value | \$3,191.47 |
| 41.4. | SOFTWARE | \$428,186.90 | Net Book Value | \$428,186.90 |
| 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. | _____ | \$ _____ | _____ | \$ _____ |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

43. Total of part 7

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

\$595,802.93

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

- ☐ No
☒ Yes

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

- ☐ No
☒ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

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

| General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
|--|--|---|------------------------------------|

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

| | | | | |
|-------|----------------------------|-------------|----------------|--------------|
| 47.1. | MISC VEHICLES | \$0.00 | Net Book Value | UNDETERMINED |
| 47.2. | TRACTORS | \$0.00 | Net Book Value | UNDETERMINED |
| 47.3. | TRAILERS | \$185.61 | Net Book Value | \$185.61 |
| 47.4. | UTILITY VEHICLES | \$19,531.08 | Net Book Value | \$19,531.08 |
| 47.5. | 2005, G55K MERCEDES-BENZ | \$0.00 | Net Book Value | UNDETERMINED |
| 47.6. | USED 2006 HUMMER, MOD H1 | \$0.00 | Net Book Value | UNDETERMINED |
| 47.7. | 2001 MODIFIED FREIGHTLINER | \$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. | FORKLIFTS | \$300.59 | Net Book Value | \$300.59 |
| 50.2. | PLANT EQUIP | \$19,857.12 | Net Book Value | \$19,857.12 |

51. Total of part 8

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

\$39,874.40

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

- ☐ No
☒ Yes

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

- ☐ No
☒ Yes

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

Part 9: Real property

54. Does the debtor own or lease any real property?

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

| | Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available. | Nature and extent of debtor's interest in property | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|---|---|---|--|---|
| 55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest | | | | | |
| 55.1. | 11-3103249 COMMERCIAL OFFICE BUILDING - CBR STC 14301 MATTAWOMAN DRIVE BRANDYWINE MD 20613 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.2. | COMMERCIAL OFFICE BUILDING - ATL STC - FACILITY LEASE 1970 MAPLE AVENUE ATLANTA GA 30336 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.3. | 5-439-12-1 FACILITY LEASE - OAK SHOP LEASE 2500 POPLAR STREET OAKLAND CA 94607 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.4. | 1192641060000 COMMERCIAL OFFICE BUILDING - SNB - HIGHLAND SHOP 27236 3RD STREET BLDG "B" HIGHLAND CA 92346 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.5. | 001-0053-024-0000 COMMERCIAL OFFICE BUILDING - SAC SHOP LEASE - OPS OFFICE 455 BANNON STREET SACRAMENTO CA 95811 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.6. | 15-05-451-029-0000 FACILITY LEASE SLC - SLC SHOP LEASE 588 GLADIOLA STREET SALT LAKE CITY UT 84104 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.7. | COMMERCIAL OFFICE BUILDING - FACILITY LEASE SEA UPS 6729 EAST MARGINAL WAY S SEATTLE WA 98108 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

| | Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available. | Nature and extent of debtor's interest in property | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|------------|---|---|---|--|---|
| 55. | Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest | | | | |
| 55.8. | 303-289-5444 FACILITY LEASE - DEN SHOP LEASE 6875 EAST 54TH PLACE COMMERCE CITY CO 80022 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.9. | COMMERCIAL OFFICE BUILDING - BOI SHOP & TERMINAL 7801 W LEMHI LANE STE 5 BOISE ID 83709 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.10. | COMMERCIAL OFFICE BUILDING - ATL STC - FACILITY LEASE 775 / 795 ATLANTA SOUTH PARKWAY SUITE 100 COLLEGE PARK GA 30349 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.11. | COMMERCIAL OFFICE BUILDING - FACILITY LEASE BNA UPS 807 SPACE PARK N GOODLETTSVILLE TN 37072 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.12. | 067-0170-003-0000 FACILITY LEASE HQ 9785 GOETHE ROAD SACRAMENTO CA 95827 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.13. | CHIC-000001-000000-W000036 COMMERCIAL OFFICE BUILDING - NE STC 2189 WESTOVER ROAD CHICOPEE MA 01022 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |
| 55.14. | FACILITY LEASE - RNO THS - RENO PEAK ANNEX 9499 N. VIRGINIA ST RENO NV 89506 | LEASEHOLD INTEREST | UNDETERMINED | _____ | UNDETERMINED |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| 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

| | | | | |
|--------|---|------------------------|--------------------------------|--------------|
| 55.15. | 7119002007 FACILITY LEASE - SO CA STC - LGB STC 2400 WEST ARTESIA BLVD LONG BEACH CA 90805 | LEASEHOLD INTEREST | UNDETERMINED | UNDETERMINED |
| 55.16. | LEASEHOLD IMPROVEMENT - ALL LEASED REAL PROPERTY | LEASEHOLD IMPROVEMENTS | \$166,533.37 Net Book Value | \$166,533.37 |

56. Total of part 9

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

\$166,533.37

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☐ No
☒ Yes

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

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

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

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

60. Patents, copyrights, trademarks, and trade secrets

| | | | |
|-------|----|--|----|
| 60.1. | \$ | | \$ |
|-------|----|--|----|

61. Internet domain names and websites

| | Net book value of debtor's interest | Valuation method | Current value of debtor's interest |
|------------------------------------|-------------------------------------|------------------|------------------------------------|
| 61.1. EMATHESON.NET | UNDETERMINED | | UNDETERMINED |
| 61.2. MATHESONDELIVERS.COM | UNDETERMINED | | UNDETERMINED |
| 61.3. MATHESONENV.COM | UNDETERMINED | | UNDETERMINED |
| 61.4. MATHESONFLIGHT.COM | UNDETERMINED | | UNDETERMINED |
| 61.5. MATHESONFLIGHTTEXTENDERS.COM | UNDETERMINED | | UNDETERMINED |
| 61.6. MATHESONFLIGHTTEXTENDERS.NET | UNDETERMINED | | UNDETERMINED |
| 61.7. MATHESONFREIGHT.COM | UNDETERMINED | | UNDETERMINED |
| 61.8. MATHESONINC.COM | UNDETERMINED | | UNDETERMINED |
| 61.9. MATHESONLOGISTICS.COM | UNDETERMINED | | UNDETERMINED |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

61. Internet domain names and websites

| | Net book value of debtor's interest | Valuation method | Current value of debtor's interest |
|---------------------------------------|-------------------------------------|------------------|------------------------------------|
| 61.10. MATHESONMAIL.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.11. MATHESONMAILHANDLING.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.12. MATHESONMAILTRANSPORTATION.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.13. MATHESONPOSTAL.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.14. MATHESONPOSTALSERVICES.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.15. MATHESONSUSTAINABILITY.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.16. MATHESONTRANSPORTATION.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.17. MATHESONTRUCKING.COM | UNDETERMINED | _____ | UNDETERMINED |
| 61.18. MATHESONUNIVERSITY.COM | UNDETERMINED | _____ | UNDETERMINED |

62. Licenses, franchises, and royalties

| | | | |
|-------------------------|--------------|-------|--------------|
| 62.1. SOFTWARE LICENSES | UNDETERMINED | _____ | UNDETERMINED |
|-------------------------|--------------|-------|--------------|

63. Customer lists, mailing lists, or other compilations

| | | | |
|--|--------------|-------|--------------|
| 63.1. CUSTOMER AND VENDOR NAMES, ADDRESSES, E-MAILS, EIN, CERTAIN BANK ACCOUNT INFORMATION | UNDETERMINED | _____ | UNDETERMINED |
|--|--------------|-------|--------------|

64. Other intangibles, or intellectual property

| | | | |
|-------------|----------|-------|----------|
| 64.1. _____ | \$ _____ | _____ | \$ _____ |
|-------------|----------|-------|----------|

65. Goodwill

| | | | |
|-------------|----------|-------|----------|
| 65.1. _____ | \$ _____ | _____ | \$ _____ |
|-------------|----------|-------|----------|

66. Total of part 10

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

UNDETERMINED

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No
☒ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

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

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758****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. ¹ | LOANS RECEIVABLE - MFAFT MATHESON FAST FREIGHT, INC 9785 GOETHE ROAD SACRAMENTO CA 95827 | \$8,457,096.84 | - \$8,457,096.84 | = → | \$0.00 |
| 71.2. | RECEIVABLE FROM MARK MATHESON MARK B MATHESON 9785 GOETHE ROAD SACRAMENTO CA 95827 | \$446,280.75 | - \$0.00 | = → | \$446,280.75 |
| 71.3. | RECEIVABLE FROM MARK MATHESON MARK B MATHESON 9785 GOETHE ROAD SACRAMENTO CA 95827 | \$2,479.99 | - \$0.00 | = → | \$2,479.99 |
| 71.4. | NOTES RECEIVABLE FROM MARK MATHESON MARK B MATHESON 9785 GOETHE ROAD SACRAMENTO CA 95827 | \$592,965.87 | - \$0.00 | = → | \$592,965.87 |

¹OBLIGOR CLOSED 2010**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. | INTERNAL REVENUE SERVICE | \$252,754.00 | \$ _____ | YEAR END 6/30/21 | UNDETERMINED |
| 72.2. | INTERNAL REVENUE SERVICE | \$ _____ | \$3,860,470.76 | YEAR END 6/30/22 | UNDETERMINED |

73. Interests in insurance policies or annuities

| | Insurance company | Insurance policy No. | Annuity issuer name | Annuity account type | Annuity account No. | Current value of debtor's interest |
|-------|--------------------------------------|--|---------------------|----------------------|---------------------|------------------------------------|
| 73.1. | ARGONAUT INSURANCE CO. | EXCESS EMPLOYMENT PRACTICES LIABILITY INSURANCE, POLICY NO. MLX4263507-0 | _____ | _____ | _____ | UNDETERMINED |
| 73.2. | AXIS INSURANCE COMPANY | MANAGEMENT LIABILITY PRACTICES INSURANCE, POLICY NO. P-001-000521747-02 | _____ | _____ | _____ | UNDETERMINED |
| 73.3. | NATIONAL FIRE & MARINE INSURANCE CO. | LEAD EXCESS INSURANCE, POLICY NO. 42XSF30482505 | _____ | _____ | _____ | UNDETERMINED |

Debtor **Matheson Trucking, Inc.** Case number (if known) **22-21758**

| | | | | | | |
|--------|---|---|--|--|--|--------------|
| 73.4. | CHUBB FEDERAL INSURANCE CO. | EXCESS LIABILITY INSURANCE, POLICY NO. XOOG72566580001 | | | | UNDETERMINED |
| 73.5. | GREENWICH INSURANCE CO. | LIABILITY INSURANCE, POLICY NO. RAD943505218 & AND RAD500019513 | | | | UNDETERMINED |
| 73.6. | GREENWICH INSURANCE CO. | AUTOMOBILE LIABILITY - AXA XL INSURANCE, POLICY NO. RAD5000195-13 | | | | UNDETERMINED |
| 73.7. | HISCOX | KIDNAP AND RANSOM INSURANCE, POLICY NO. UKA3005332.22 | | | | UNDETERMINED |
| 73.8. | SCOTTSDALE | STORAGE TANK LIABILITY - SCOTTSDALE INSURANCE, POLICY NO. VGS0002693 | | | | UNDETERMINED |
| 73.9. | TRAVELERS PROPERTY CASUALTY CO OF AMERICA | CASUALTY /PROPERTY - REPLACEMENT INSURANCE, POLICY NO. QT6303T36208ATIL22 | | | | UNDETERMINED |
| 73.10. | WESTCHESTER | EXCESS LIABILITY INSURANCE, POLICY NO. G71789597003 | | | | UNDETERMINED |
| 73.11. | XL INSURANCE AMERICA, INC. | WORKER'S COMPENSATION INSURANCE, POLICY NO. RWD9435054-18 | | | | UNDETERMINED |
| 73.12. | XL SPECIALITY INSURNACE COMPANY | AIRPORT LIABILITY, POLICY NO. UA0010968AV22A | | | | UNDETERMINED |
| 73.13. | WESTCHESTER INSURANCE COMPANY | PREMISES POLLUTION LIABILITY INSURANCE, POLICY NO. G72556045001 | | | | UNDETERMINED |
| 73.14. | HARTFORD FIRE INSURANCE COMPANY | 401(K) PLAN INSURANCE, POLICY NO. 57BDDGE6074 | | | | 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

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

74.1. _____ \$ _____ \$ _____

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

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

76. Trusts, equitable or future interests in property

76.1. _____ \$ _____

77. Other property of any kind not already listed

Examples: Season tickets, country club membership

| | | | |
|--------|--|--|-----------------|
| 77.1. | CAPITAL EQUIPMENT REPAIR | | \$15,471.35 |
| 77.2. | IMPREST FUND WORKERS' COMPENSATION | | \$2,080.36 |
| 77.3. | INTERCOMPANY RECEIVABLE DUE FROM MATHESON AIR SERVICES. (AS OF JULY 14, 2022) | | \$3,958,935.45 |
| 77.4. | INTERCOMPANY RECEIVABLE DUE FROM MATHESON FLIGHT EXTENDERS, INC. (AS OF MAY 5, 2022) | | \$48,150,110.62 |
| 77.5. | INTERCOMPANY RECEIVABLE DUE FROM MATHESON FLIGHT EXTENDERS, INC. (AS OF MAY 6, 2022 - JULY 14, 2022) | | \$6,427,394.46 |
| 77.6. | INTERCOMPANY RECEIVABLE DUE FROM MATHESON MAIL TRANSPORTATION. (AS OF JULY 14, 2022) | | \$1,922,403.43 |
| 77.7. | INTERCOMPANY RECEIVABLE DUE FROM MATHESON POSTAL SERVICES, INC. (AS OF MAY 5, 2022) | | \$53,678,837.20 |
| 77.8. | INTERCOMPANY RECEIVABLE DUE FROM MATHESON POSTAL SERVICES, INC. (AS OF MAY 6, 2022 - JULY 14, 2022) | | \$3,845,916.80 |
| 77.9. | MISCELLANEOUS EMPLOYEE RECEIVABLES | | \$463.40 |
| 77.10. | MISCELLANEOUS RECEIVABLES | | \$489,170.42 |
| 77.11. | RECEIVABLE DUE FROM XL | | \$3,106.70 |
| 77.12. | RELATED PARTY RECEIVABLE - MATHESON HOLDINGS, GP | | \$38,612.83 |
| 77.13. | INTERCOMPANY RECEIVABLE DUE FROM MATHSON FLIGHT EXTENDERS, INC. (AS OF JULY 14, 2020) | | \$17,439,116.26 |
| 77.14. | INTERCOMPANY RECEIVABLE DUE FROM MATHESON POSTAL SERVICES, INC. (AS OF JULY 14, 2020) | | \$75,598,164.24 |

78. Total of part 11

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

\$212,611,510.13

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

☒ No

☐ Yes

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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> | \$1,278,722.94 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$2,579,694.77 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$0.00 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | UNDETERMINED | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$693,673.35 | |
| 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> | \$595,802.93 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$39,874.40 | |
| 88. Real property. <i>Copy line 56, Part 9.</i> | → | \$166,533.37 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | UNDETERMINED | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | + \$212,611,510.13 | |
| 91. Total. Add lines 80 through 90 for each column.91a. | \$217,799,278.52 | + 91b. \$166,533.37 |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. | | \$217,965,811.89 |

Fill in this information to identify the case:

Debtor name: Matheson Trucking, Inc.

United States Bankruptcy Court for the: Eastern District of California

Case number (if known): 22-21758

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

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

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

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

**Column A
Amount of
Claim**

Do not deduct the value of collateral.

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

2.1. Creditor's name and address

BANC OF AMERICA LEASING & CAPITAL, LLC
PO BOX 100918
ATLANTA GA 30384-0918

Creditor's email address, if known

Date debt was incurred: 3/4/22

Last 4 digits of account number: 7305

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.
GUARANTEE - NOTE PAYABLE

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

Describe debtor's property that is subject to a lien

Describe the lien

GUARANTEE - NOTE PAYABLE

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

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

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

☒ Contingent

☐ Unliquidated

☐ Disputed

UNDETERMINED UNDETERMINED

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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

BANC OF AMERICA LEASING & CAPITAL,
LLC
PO BOX 100918
ATLANTA GA 30384-0918

Creditor's email address, if known

Date debt was incurred: 2/7/22

Last 4 digits of account number: 7304

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.
GUARANTEE - NOTE PAYABLE

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

Describe debtor's property that is subject to a lien

UNDETERMINED UNDETERMINED

Describe the lien

GUARANTEE - NOTE PAYABLE

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

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

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

☒ Contingent

☐ Unliquidated

☐ Disputed

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

BANC OF AMERICA LEASING & CAPITAL,
LLC
PO BOX 100918
ATLANTA GA 30384-0918

Creditor's email address, if known

Date debt was incurred: 1/19/22

Last 4 digits of account number: 7303

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.
GUARANTEE - NOTE PAYABLE

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

Describe debtor's property that is subject to a lien

UNDETERMINED UNDETERMINED

Describe the lien

GUARANTEE - NOTE PAYABLE

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 **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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

BANC OF AMERICA LEASING & CAPITAL,
LLC
PO BOX 100918
ATLANTA GA 30384-0918

Creditor's email address, if known

Date debt was incurred: 12/20/2021

Last 4 digits of account number: 7302

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.
GUARANTEE - NOTE PAYABLE

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

Describe debtor's property that is subject to a lien

UNDETERMINED UNDETERMINED

Describe the lien

GUARANTEE - NOTE PAYABLE

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

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

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

☒ Contingent

☐ Unliquidated

☐ Disputed

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

BANC OF AMERICA LEASING & CAPITAL,
LLC
PO BOX 100918
ATLANTA GA 30384-0918

Creditor's email address, if known

Date debt was incurred: 11/19/2021

Last 4 digits of account number: 7300

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.
GUARANTEE - NOTE PAYABLE

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

Describe debtor's property that is subject to a lien

UNDETERMINED UNDETERMINED

Describe the lien

GUARANTEE - NOTE PAYABLE

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 **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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

BANK DIRECT CAPITAL FINANCE
150 NORTH FIELD DRIVE
SUITE 190
LAKE FOREST IL 60045

Creditor's email address, if known

Date debt was incurred: 4/1/22

Last 4 digits of account number: 0288

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.
NOTE PAYABLE

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

Describe debtor's property that is subject to a lien

\$4,718,062.43 UNDETERMINED

Describe the lien

FINANCING FOR ANNUAL INSURANCE POLICIES - BUSINESS, HEALTH, WORKERS COMP, ETC. GL ACCT 24826

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

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

BANK OF AMERICA NA
900 W. TRADE STREET
GATEWAY VLLAGE 900 BLDG
CHARLOTTE NC 28255

Creditor's email address, if known

Date debt was incurred: 5/26/2022

Last 4 digits of account number: 1721

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

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

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

Describe debtor's property that is subject to a lien

CASH DEPOSIT ACCOUNT WITH BANK OF AMERICA \$250,000.00 UNDETERMINED

Describe the lien

CREDIT CARD COLLATERAL

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 **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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

BANK OF AMERICA NA
NC 1-026-06-06
900 W. TRADE STREET
GATEWAY VLLAGE 900 BLDG
CHARLOTTE NC 28255

Creditor's email address, if known

Date debt was incurred: 2/18/2022

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

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

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

Describe debtor's property that is subject to a lien

ANY AND ALL ASSETS OF DEBTOR, INCLUDING, WITHOUT LIMITATION, THE FOLLOWING DESCRIBED PROPERTY NOW OWNED OR HEREAFTER ACQUIRED BY THE DEBTOR, ETC.

\$2,481,809.32 UNDETERMINED

Describe the lien

UCC-1 RECORDED IN STATEMENT OF CALIFORNIA 11/17/2016, AS DOCUMENT NO. 167557187774

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

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

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

☐ Contingent

☐ Unliquidated

☐ Disputed

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

BANK OF AMERICA NA
NC 1-026-06-06
900 W. TRADE STREET
GATEWAY VLLAGE 900 BLDG
CHARLOTTE NC 28255

Creditor's email address, if known

Date debt was incurred: 12/1/2016

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

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

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

Describe debtor's property that is subject to a lien

\$100,672.34 UNDETERMINED

Describe the lien

IRREVOCABLE STANDBY LETTER OF CREDIT NUMBER 68129135, DATED DECEMBER 1, 2016 (AS AMENDED) FOR THE BENEFIT OF LUMBERMAN'S MUTUAL CASUALTY COMPANY, IN LIQUIDATION

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 **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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

BANK OF AMERICA NA
NC 1-026-06-06
900 W. TRADE STREET
GATEWAY VLLAGE 900 BLDG
CHARLOTTE NC 28255

Creditor's email address, if known

Date debt was incurred: 12/2/2016

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

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

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

Describe debtor's property that is subject to a lien

\$6,590,000.00 UNDETERMINED

Describe the lien

IRREVOCABLE STANDBY LETTER OF CREDIT NUMBER 68129134 DATED DECEMBER 2, 2016 (AS AMENDED) FOR THE BENEFIT OF XL SPECIALTY INSURANCE COMPANY, GREENWICH INSURANCE COMPANY XL, AND INSURANCE AMERICA, INC.

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

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

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

☒ Contingent

☐ Unliquidated

☐ Disputed

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

BANK OF AMERICA NA
NC 1-026-06-06
900 W. TRADE STREET
GATEWAY VLLAGE 900 BLDG
CHARLOTTE NC 28255

Creditor's email address, if known

Date debt was incurred: 8/17/2021

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Have you already specified the relative priority?

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

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

Describe debtor's property that is subject to a lien

\$500,000.00 UNDETERMINED

Describe the lien

IRREVOCABLE STANDBY LETTER OF CREDIT NUMBER 68177138, DATED AUGUST 17, 2021 FOR THE BENEFIT OF BRIDGE POINT LONG BEACH, LLC C/O BRIDGE DEVELOPMENT PARTNERS, LLC

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 **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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

DELL FINANCIAL SERVICES L.L.C.
12234 NORTH I35 HWY
BLDG B
AUSTIN TX 78753

Creditor's email address, if known

Date debt was incurred: 6/12/2008

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.

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

Describe debtor's property that is subject to a lien

ALL COMPUTER EQUIPMENT AND PERIPHERALS (COLLECTIVELY "EQUIPMENT") WHEREVER LOCATED, FINANCED UNDER AND DESCRIBED IN THE MASTER LEASE AGREEMENT

Describe the lien

UCC-1 RECORDED IN STATEMENT OF CALIFORNIA 05/12/2008, AS DOCUMENT NO. 087157486864 AND AS CONTINUED 03/04/2013 AND 03/26/2016 DOCUMENT NOS. 1373504851 AND 1876400880

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes

Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

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

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

UNDETERMINED UNDETERMINED

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

DELL FINANCIAL SERVICES L.L.C.
ONE DELL WAY
MAIL STOP PS2DF-23
ROUND ROCK TX 78682

Creditor's email address, if known

Date debt was incurred: 7/7/2020

Last 4 digits of account number:

Do multiple creditors have an interest in the same property?

- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.

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

Describe debtor's property that is subject to a lien

AGREEMENT NO. 012-8143377-037 COVERS COMPUTER EQUIPMENT

Describe the lien

UCC-1 RECORDED IN STATEMENT OF CALIFORNIA 07/07/2020, AS DOCUMENT NO. 207803227546

Is the creditor an insider or related party?

- ☒ No
- ☐ Yes

Is anyone else liable on this claim?

- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

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

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

UNDETERMINED UNDETERMINED

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

- 2.14. **Creditor's name and address**
- US BANK EQUIPMENT FINANCE
DIVISION OF US BANK NATIONAL
ASSOCIATION
1310 MADRID ST
MARSHALL MN 56258
- Creditor's email address, if known**
- _____
- Date debt was incurred:** 7/31/2018
- Last 4 digits of account number:**
- Do multiple creditors have an interest in the same property?**
- ☒ No
- ☐ Yes. Have you already specified the relative priority?
- ☐ No. Specify each creditor, including this creditor, and its relative priority.
- _____
- ☐ Yes. The relative priority of creditors is specified on lines: _____
- Describe debtor's property that is subject to a lien**
- 100-EVENT RECORDER, SENSOR FUSION, 64GB LTE
- Describe the lien**
- UCC-1 RECORDED IN STATEMENT OF CALIFORNIA 07/31/2018, AS DOCUMENT NO. 187661592611
- 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.** **\$14,640,544.09**

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. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.1 | _____ |
| 3.2. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.2 | _____ |
| 3.3. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.3 | _____ |

| Debtor | Matheson Trucking, Inc. | Case number (if known) | 22-21758 |
|--------|---|------------------------|----------|
| 3.4. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.4 | _____ |
| 3.5. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.5 | _____ |
| 3.6. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.1 | _____ |
| 3.7. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.2 | _____ |
| 3.8. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.3 | _____ |
| 3.9. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.4 | _____ |
| 3.10. | BANC OF AMERICA LEASING & CAPITAL, LLC PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.5 | _____ |
| 3.11. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.8 | _____ |
| 3.12. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.9 | _____ |
| 3.13. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.10 | _____ |
| 3.14. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.11 | _____ |

| Debtor | Matheson Trucking, Inc. | Case number (if known) | 22-21758 |
|--------|---|------------------------|----------|
| 3.15. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP CLAIRE K WU 725 SOUTH FIGUEROA ST.,36TH FLOOR LOS ANGELES CA 90017-5524 | Line 2.7 | _____ |
| 3.16. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.8 | _____ |
| 3.17. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.9 | _____ |
| 3.18. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.10 | _____ |
| 3.19. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.11 | _____ |
| 3.20. | BANK OF AMERICA NA PILLSBURY WINTHROP SHAW PITTMAN LLP JONATHAN DOOLITTLE FOUR EMBARCADERO CENTER 22ND FLOOR SAN FRANCISCO CA 94111-5998 | Line 2.7 | _____ |

Fill in this information to identify the case:**Debtor name:** Matheson Trucking, Inc.**United States Bankruptcy Court for the:** Eastern District of California**Case number (if known):** 22-21758☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

| 2.1. | Priority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> | Total claim | Priority amount |
|------|---|--|-------------|-------------------------------------|
| | ARIZONA DEPARTMENT OF REVENUE PO BOX 29010 PHOENIX AZ 85038 | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$972.99 | \$972.99 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | |
| | Last 4 digits of account number: | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | | | Nonpriority amount \$0.00 |
| 2.2. | Priority creditor's name and mailing address | As of the petition filing date, the claim is: <i>Check all that apply.</i> | Total claim | Priority amount |
| | CALIFORNIA DEPT. OF TAX AND FEE ADMINISTRATION PO BOX 942879 SACRAMENTO CA 94279-6001 | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$158.04 | \$158.04 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | |
| | Last 4 digits of account number: | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| | Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | | | Nonpriority amount \$0.00 |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| | | | | |
|------|---|--|----------------------------------|--------------------------------------|
| 2.3. | Priority creditor's name and mailing address COLORADO DEPARTMENT OF REVENUE 1375 SHERMAN STREET DENVER CO 80261 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Total claim \$3,044.72 | Priority amount \$3,044.72 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | Nonpriority amount \$0.00 |
| | Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

| | | | | |
|------|--|--|----------------------------------|--------------------------------------|
| 2.4. | Priority creditor's name and mailing address DEPARTMENT OF REVENUE SERVICES - CONNECTICUT PO BOX 5030 HARTFORD CT 06102-5030 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Total claim \$1,165.59 | Priority amount \$1,165.59 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | Nonpriority amount \$0.00 |
| | Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

| | | | | |
|------|--|---|------------------------------------|--|
| 2.5. | Priority creditor's name and mailing address EMPLOYEES OF MATHESON TRUCKING 9785 GOETHE RD SACRAMENTO CA 95827 | 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 | Total claim \$111,753.24 | Priority amount \$111,753.24 |
| | Date or dates debt was incurred 7/11/22-7/14/22 | Basis for the claim: UNPAID WAGES | | Nonpriority amount \$0.00 |
| | Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| 2.6. | Priority creditor's name and mailing address IDAHO STATE TAX COMMISSION PO BOX 56 BOISE ID 83756-0056 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$3,346.33</td> </tr> </table> | Total claim | \$3,346.33 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$3,346.33</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table> | Priority amount | \$3,346.33 | Nonpriority amount | \$0.00 |
|--------------------|--|--|---|-------------|------------|---|-----------------|------------|--------------------|--------|
| Total claim | | | | | | | | | | |
| \$3,346.33 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$3,346.33 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.7. | Priority creditor's name and mailing address KANSAS DEPARTMENT OF REVENUE PO BOX 750680 TOPEKA KS 66625-0680 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$123.25</td> </tr> </table> | Total claim | \$123.25 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$123.25</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table> | Priority amount | \$123.25 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$123.25 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$123.25 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.8. | Priority creditor's name and mailing address KENTUCKY DEPARTMENT OF REVENUE PO BOX 181 FRANKFORT KY 40602-0181 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td>\$23.94</td> </tr> </table> | Total claim | \$23.94 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td>\$23.94</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td>\$0.00</td> </tr> </table> | Priority amount | \$23.94 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$23.94 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$23.94 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| 2.9. | Priority creditor's name and mailing address MICHIGAN DEPARTMENT OF TREASURY MICHIGAN DEPARTMENT OF TREASURY LANSING MI 48922 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Total claim | \$0.00 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Priority amount | \$0.00 | Nonpriority amount | \$0.00 |
|--------------------|---|--|---|-------------|----------|---|-----------------|----------|--------------------|--------|
| Total claim | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.10. | Priority creditor's name and mailing address MISSOURI DEPARTMENT OF REVENUE 301 WEST HIGH ST JEFFERSON CITY MO 65101 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$954.60</td> </tr> </table> | Total claim | \$954.60 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$954.60</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Priority amount | \$954.60 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$954.60 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$954.60 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.11. | Priority creditor's name and mailing address NEVADA DEPARTMENT OF TAXATION 2550 PASEO VERDE PKWY STE 180 HENDERSON NV 89074 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$81.66</td> </tr> </table> | Total claim | \$81.66 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$81.66</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Priority amount | \$81.66 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$81.66 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$81.66 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| 2.12. | Priority creditor's name and mailing address NEW MEXICO DEPARTMENT OF TAXATION AND REVENUE 1200 SOUTH ST. FRANCIS DRIVE SANTA FE NM 87505 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$45.38</td> </tr> </table> | Total claim | \$45.38 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$45.38</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Priority amount | \$45.38 | Nonpriority amount | \$0.00 |
|--------------------|--|--|---|-------------|----------|---|-----------------|----------|--------------------|--------|
| Total claim | | | | | | | | | | |
| \$45.38 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$45.38 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.13. | Priority creditor's name and mailing address NORTH CAROLINA DEPARTMENT OF REVENUE PO BOX 25000 RALEIGH NC 27460-0640 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Total claim | \$0.00 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Priority amount | \$0.00 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.14. | Priority creditor's name and mailing address NYS DEPARTMENT OF TXATION AND FINANCE NYS TAX DEPARTMENT, TAXPAYER ASSISTANCE BUREAU, W A HARRIMAN CAMPUS ALBANY NY 12227 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Total claim</th> </tr> <tr> <td style="text-align: center;">\$147.54</td> </tr> </table> | Total claim | \$147.54 | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Priority amount</th> </tr> <tr> <td style="text-align: center;">\$147.54</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #d3d3d3;">Nonpriority amount</th> </tr> <tr> <td style="text-align: center;">\$0.00</td> </tr> </table> | Priority amount | \$147.54 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$147.54 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$147.54 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| | | | | |
|-------|--|--|----------------------------------|---|
| 2.15. | Priority creditor's name and mailing address OKLAHOMA TAX COMMISSION 300 N BROADWAY AVE OKLAHOMA CITY OK 73102 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Total claim \$7.04 | Priority amount \$7.04 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | Nonpriority amount \$0.00 |
| | Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

| | | | | |
|-------|--|--|-----------------------------------|---|
| 2.16. | Priority creditor's name and mailing address PHILADELPHIA DEPARTMENT OF REVENUE 1401 JFK BOULEVARD PHILADELPHIA PA 19102 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Total claim \$12.47 | Priority amount \$12.47 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | Nonpriority amount \$0.00 |
| | Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

| | | | | |
|-------|--|--|-----------------------------------|---|
| 2.17. | Priority creditor's name and mailing address SOUTH DAKOTA DEPARTMENT OF REVENUE 1520 HAINES AVE #3 RAPID CITY SD 57701 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Total claim \$25.06 | Priority amount \$25.06 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE 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 | | |

Debtor **Matheson Trucking, Inc.**

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| 2.18. | Priority creditor's name and mailing address TENNESSEE DEPARTMENT OF REVENUE 500 DEADERICK STREET NASHVILLE TN 37242 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$0.00</td></tr></table> | Total claim | \$0.00 | <table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$0.00</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table> | Priority amount | \$0.00 | Nonpriority amount | \$0.00 |
|--------------------|--|--|---|-------------|-------------|--|-----------------|-------------|--------------------|--------|
| Total claim | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.19. | Priority creditor's name and mailing address TEXAS COMPTROLLER 111 EAST 17TH STREET AUSTIN TX 78774 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$269.18</td></tr></table> | Total claim | \$269.18 | <table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$269.18</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table> | Priority amount | \$269.18 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$269.18 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$269.18 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |
| 2.20. | Priority creditor's name and mailing address UTAH STATE TAX COMMISSION 210 N 1950 W SALT LAKE CITY UT 84134 Date or dates debt was incurred 2015-2022 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: SALES & USE TAX Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | <table border="1" style="width: 100%;"><tr><th>Total claim</th></tr><tr><td>\$14,237.36</td></tr></table> | Total claim | \$14,237.36 | <table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$14,237.36</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table> | Priority amount | \$14,237.36 | Nonpriority amount | \$0.00 |
| Total claim | | | | | | | | | | |
| \$14,237.36 | | | | | | | | | | |
| Priority amount | | | | | | | | | | |
| \$14,237.36 | | | | | | | | | | |
| Nonpriority amount | | | | | | | | | | |
| \$0.00 | | | | | | | | | | |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| | | | | |
|-------|---|--|--------------------------------|-------------------------------------|
| 2.21. | Priority creditor's name and mailing address VIRGINIA DEPARTMENT OF TAXATION 1957 WESTMORELAND STREET RICHMOND VA 23230 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Total claim \$261.07 | Priority amount \$261.07 |
| | | | | Nonpriority amount \$0.00 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | |
| | Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

| | | | | |
|-------|--|--|----------------------------------|--------------------------------------|
| 2.22. | Priority creditor's name and mailing address WASHINGTON DEPARTMENT OF REVENUE PO BOX 47450 OLYMPIA WA 98504-7450 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | Total claim \$1,858.54 | Priority amount \$1,858.54 |
| | | | | Nonpriority amount \$0.00 |
| | Date or dates debt was incurred 2015-2022 | Basis for the claim: SALES & USE TAX | | |
| | 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 | | |

Debtor **Matheson Trucking, Inc.**

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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.

| | | |
|--|---|---|
| <p>3.1. Nonpriority creditor's name and mailing address</p> <p>121 WAWARME INVESTMENT PARTNERS C/O COHN BIRNBAUM & SHEA P.C. 100 PEARL ST. 12TH FLOOR HARTFORD CT 06103</p> <p>Date or dates debt was incurred</p> <p>_____</p> <p>Last 4 digits of account number:</p> | <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>LEGAL CLAIM</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p> | <p>Amount of claim</p> <p>\$1,392,857.04</p> |
| <p>3.2. Nonpriority creditor's name and mailing address</p> <p>1-800-RADIATOR & AC - DENVER 5549 PEARL STREET DENVER CO 80216</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p> | <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Amount of claim</p> <p>\$234.89</p> |
| <p>3.3. Nonpriority creditor's name and mailing address</p> <p>ABSOLUTE REPAIR 401 N 44TH ST. CUMMING IA 50061</p> <p>Date or dates debt was incurred</p> <p>VARIOUS</p> <p>Last 4 digits of account number:</p> | <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>TRADE PAYABLE</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Amount of claim</p> <p>\$730.28</p> |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| | | | |
|------|---|---|--------------------------------------|
| 3.4. | Nonpriority creditor's name and mailing address AFLAC PREMIUM HOLDING P.O. BOX 84069 COLUMBUS GA 31908-4069 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,377.26 |
| 3.5. | Nonpriority creditor's name and mailing address AIRGAS USA, LLC - DALLAS PO BOX 734671 DALLAS TX 75373-4671 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$135.99 |
| 3.6. | Nonpriority creditor's name and mailing address AIRGAS USA, LLC - PASADENA P.O. BOX 102289 PASADENA CA 91189-2289 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$540.60 |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| | | | |
|------|--|---|--------------------------------------|
| 3.7. | Nonpriority creditor's name and mailing address ALHAMBRA & SIERRA SPRINGS P.O. BOX 660579 DALLAS TX 75266-0579 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$53.98 |
| 3.8. | Nonpriority creditor's name and mailing address ALLSTREAM PO BOX 734521 CHICAGO IL 60673-4521 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,310.92 |
| 3.9. | Nonpriority creditor's name and mailing address ALTERNATIVE HOSE INC. 20 N 48TH AVE. PHOENIX AZ 85043 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$177.58 |

Debtor **Matheson Trucking, Inc.**

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| | | | |
|-------|--|---|--------------------------------------|
| 3.10. | Nonpriority creditor's name and mailing address AMBEST SERVICE CENTERS CORPORATE BILLING DEPT 100 P.O. BOX 830604 BIRMINGHAM AL 35283 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$5,109.18 |
| 3.11. | Nonpriority creditor's name and mailing address AMERICAN EXPRESS P.O. BOX 0001 LOS ANGELES CA 90096-8000 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$1,662.36 |
| 3.12. | Nonpriority creditor's name and mailing address AMERICAN FLEET SERVICES SOLUTIONS 1170 DADASH STREET BEAUMONT CA 92223 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,185.01 |

Debtor **Matheson Trucking, Inc.**

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| | | | |
|-------|---|---|---------------------------------------|
| 3.13. | Nonpriority creditor's name and mailing address AMS TOWING 233 WASHINGTON BLVD. OGDEN UT 84404 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$6,933.11 |
| 3.14. | Nonpriority creditor's name and mailing address ANAGO FRANCHISING INC ANAGO OF UTAH 3195 S MAIN ST #130 SALT LAKE CITY UT 84115 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$590.00 |
| 3.15. | Nonpriority creditor's name and mailing address ANDRE DE OLIVEIRA 10599 CLERMONT WAY THORNTON CO 80233 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$93,750.02 |

Debtor **Matheson Trucking, Inc.**

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| | | | |
|-------|---|---|---------------------------------------|
| 3.16. | Nonpriority creditor's name and mailing address ARCO TOW SERVICE 29303 PACIFIC ST. HAYWARD CA 94544 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$615.00 |
| 3.17. | Nonpriority creditor's name and mailing address ARDITH L DUKE 4495 ANDES ST DENVER CO 80249 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black;"/> 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: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$93,750.02 |
| 3.18. | Nonpriority creditor's name and mailing address ASBURY ENVIRONMENTAL SERVICES 9302 GARFIELD AVENUE SOUTH GATE CA 90280 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,751.91 |

Debtor **Matheson Trucking, Inc.**

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| | | | |
|-------|---|---|--------------------------------------|
| 3.19. | Nonpriority creditor's name and mailing address ASURINT 1801 W OLYMPIC BLVD PASADENA CA 91199-2418 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$9,494.73 |
| 3.20. | Nonpriority creditor's name and mailing address AT&T MOBILITY - 6463 PO BOX 6463 CAROL STREAM IL 60197-6463 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,342.22 |
| 3.21. | Nonpriority creditor's name and mailing address AUTOZONE PARTS, INC. P.O. BOX 116067 ATLANTA GA 30368-6067 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,466.31 |

Debtor **Matheson Trucking, Inc.**

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| | | | |
|-------|--|---|---------------------------------------|
| 3.22. | Nonpriority creditor's name and mailing address BARNETT'S TOWING SERVICE 1498 E. FRY BLVD. SIERRA VISTA AZ 85635 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$0.00 |
| 3.23. | Nonpriority creditor's name and mailing address BELL EQUIPMENT, INC. PO BOX 249 NEZPERCE ID 83543 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$70.72 |
| 3.24. | Nonpriority creditor's name and mailing address BEMBA DIALLO 5055 PERTH COURT DENVER CO 80249 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$93,750.02 |

Debtor **Matheson Trucking, Inc.**

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| | | | |
|-------|--|--|---------------------------------------|
| 3.25. | Nonpriority creditor's name and mailing address BENTLEY TRUCK SERVICES, INC. 307 HERON DRIVE LOGAN TWP NJ 08085 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,489.20 |
| 3.26. | Nonpriority creditor's name and mailing address BERUMEN LAW FIRM, P.C. 1873 S BELLAIRE ST STE 1010 DENVER CO 80222 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LITIGATION SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$12,727.26 |
| 3.27. | Nonpriority creditor's name and mailing address BETTS TRUCK PARTS PO BOX 102165 PASADENA CA 91189-2165 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,392.48 |

Debtor **Matheson Trucking, Inc.**

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| | | | |
|-------|--|---|--------------------------------------|
| 3.28. | Nonpriority creditor's name and mailing address BOISE CITY UTILITY BILLING P.O. BOX 2600 BOISE ID 83701-2600 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$81.83 |
| 3.29. | Nonpriority creditor's name and mailing address BOISE PETERBILT PO BOX 27634 SALT LAKE CITY ID 84127 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$8,258.55 |
| 3.30. | Nonpriority creditor's name and mailing address BOSSELMAN P.O. BOX 830604 BIRMINGHAM AL 35283 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$147.08 |

Debtor **Matheson Trucking, Inc.**

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| 3.31. | Nonpriority creditor's name and mailing address BRIANNA COOPER C/O NORDEAN LAW APC ATTN SAM NORDEAN 245 FISCHER AVE SUITE D1 COSTA MESA CA 92626 Date or dates debt was incurred 7/11/2021 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 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 |
| 3.32. | Nonpriority creditor's name and mailing address BRIDGESTONE AMERICAS TIRE CORP 200 4TH AVE SOUTH SUITE 100 NASHVILLE TN 37201 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,193.06 |
| 3.33. | Nonpriority creditor's name and mailing address BRIDGESTONE RETAIL OPERATIONS, LLC BSRO NATIONAL ACCOUNTS 28772 NETWORK PLACE CHICAGO IL 60673-1287 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$67.74 |

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| 3.34. | Nonpriority creditor's name and mailing address BRITEVISION GLASS INC 7707 46TH AVE E. TACOMA WA 98443 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,162.50 |
| 3.35. | Nonpriority creditor's name and mailing address BROOMALL TRUCK & AUTO 3101 W. 6TH STREET CHESTER PA 19013 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$8,298.08 |
| 3.36. | Nonpriority creditor's name and mailing address BUCKEYE WELDING SUPPLY CO., INC. PO BOX 1522 GREELEY CO 80632-1522 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,333.70 |

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| 3.37. | Nonpriority creditor's name and mailing address CALIFORNIA AMERICAN WATER PO BOX 7150 PASADENA CA 91106-7150 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,888.66 |
| 3.38. | Nonpriority creditor's name and mailing address CAMPBELL LITIGATION, P.C. 1410 N HIGH STREET DENVER CO 80218 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LITIGATION SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$6,887.16 |
| 3.39. | Nonpriority creditor's name and mailing address CAPITOL CLUTCH & BRAKE 3100 DULUTH STREET WEST SACRAMENTO CA 95691 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$300.16 |

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| 3.40. | Nonpriority creditor's name and mailing address CARDMEMBER SERVICE PO BOX 6294 CAROL STREAM IL 60197-6294 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$46,230.79 |
| 3.41. | Nonpriority creditor's name and mailing address CAROLINA HANDLING LLC PO BOX 890352 CHARLOTTE NC 28289-0352 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$6,662.25 |
| 3.42. | Nonpriority creditor's name and mailing address CDW DIRECT, LLC PO BOX 75723 CHICAGO IL 60675-5723 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$285.00 |

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| 3.43. | Nonpriority creditor's name and mailing address CENTERLINE HEAVY DUTY ALIGNMENTS LLC 4935 MONACO ST. COMMERCE CITY CO 80022 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 |
| 3.44. | Nonpriority creditor's name and mailing address CENTRAL ANESTHESIA SERVICE 3315 WATT AVE. SACRAMENTO CA 95821 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$36.45 |
| 3.45. | Nonpriority creditor's name and mailing address CENTURYLINK - 91155 P.O. BOX 91155 SEATTLE WA 98111-9255 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$117.72 |

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| 3.46. | Nonpriority creditor's name and mailing address CERIDIAN HCM, INC. PO BOX 772830 CHICAGO IL 60677-2830 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$37,276.02 |
| 3.47. | Nonpriority creditor's name and mailing address CIGNA 5476 COLLECTIONS CENTER DR. CHICAGO IL 60693 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$2,818.24 |
| 3.48. | Nonpriority creditor's name and mailing address CINTAS P.O. BOX 29059 PHOENIX AZ 85038-9059 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$9,979.13 |

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| 3.49. | Nonpriority creditor's name and mailing address CIVIC CENTER AUTO CARE 1880 GARDEN TRACT ROAD RICHMOND CA 94801 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,931.67 |
| 3.50. | Nonpriority creditor's name and mailing address CLIFTON LARSON ALLEN LLP PO BOX 31001-2443 PASADENA CA 91110-2443 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$13,781.25 |
| 3.51. | Nonpriority creditor's name and mailing address CLYDE MACHINES, INC. P.O. BOX 194 GLENWOOD MN 56334 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,823.50 |

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| 3.52. | Nonpriority creditor's name and mailing address COLLEGE OAK TOWING 4125 WINTERS STREET SACRAMENTO CA 95838 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$1,557.00 |
| 3.53. | Nonpriority creditor's name and mailing address COMMERCIAL BRAKE & CLUTCH INC 2525 PACIFIC HIGHWAY EAST TACOMA WA 98424 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$948.65 |
| 3.54. | Nonpriority creditor's name and mailing address COMMERCIAL TIRE-MERIDIAN P.O. BOX 970 MERIDIAN ID 83680-0970 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$376.25 |

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| 3.55. | Nonpriority creditor's name and mailing address CORPORATE FILINGS, INC. 30 N GOULD ST, STE 7001 SHERIDAN WY 82801 | 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 \$200.00 |
| | Date or dates debt was incurred VARIOUS | Basis for the claim: TRADE PAYABLE | |
| | Last 4 digits of account number: | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |
| | | | |
| 3.56. | Nonpriority creditor's name and mailing address CRESCENCIO SANCHEZ 5400 W MISSISSIPPI AVE APT 6 LAKEWOOD CO 80226 | 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 | Amount of claim \$17,727.25 |
| | Date or dates debt was incurred <hr/> | Basis for the claim: LITIGATION SETTLEMENT | |
| | 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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| 3.57. | Nonpriority creditor's name and mailing address CROWN LIFT TRUCKS PO BOX 641173 CINCINNATI OH 45264-1173 | 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 \$5,653.30 |
| | Date or dates debt was incurred VARIOUS | Basis for the claim: TRADE PAYABLE | |
| | Last 4 digits of account number: | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | |

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| 3.58. | Nonpriority creditor's name and mailing address CRUS OIL, INC 2260 SOUTH WEST TEMPLE SALT LAKE CITY UT 84165-0438 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$895.65 |
| 3.59. | Nonpriority creditor's name and mailing address CRUZ INDUSTRIAL TRUCK, INC. 1300 EAST RAMSEY ST. BANNING CA 92220 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$585.75 |
| 3.60. | Nonpriority creditor's name and mailing address CUMMINS SALES AND SERVICE - DETROIT PO BOX 772639 DETROIT MI 48277-2639 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$18,131.14 |

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| 3.61. | Nonpriority creditor's name and mailing address DANA LIMITED PO BOX 910230 DALLAS TX 75391-0230 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,540.70 |
| 3.62. | Nonpriority creditor's name and mailing address DEAN PATRICELLI 2182 S YANK WAY LAKEWOOD CO 80228 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$93,750.02 |
| 3.63. | Nonpriority creditor's name and mailing address DEEP ROCK PO BOX 660579 DALLAS TX 75266 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$10.00 |

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| 3.64. | Nonpriority creditor's name and mailing address DELL FINANCIAL SERVICES LLC P.O. BOX 6547 CAROL STREAM IL 60197-6547 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$20,351.96 |
| 3.65. | Nonpriority creditor's name and mailing address DELL USA LP P.O. BOX 910916 PASADENA CA 91110-0916 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$0.01 |
| 3.66. | Nonpriority creditor's name and mailing address DELTA LANDSCAPE SERVICES, INC. PO BOX 2028 RANCHO CORDOVA CA 95741 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,716.67 |

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| 3.67. | Nonpriority creditor's name and mailing address DENTONI'S WELDING WORKS INC. 801 S. AIRPORT WAY STOCKTON CA 95205 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$409.17 |
| 3.68. | Nonpriority creditor's name and mailing address DESERT FLEET SERV AKA WW WILLIAMS CO 7028 W VAN BUREN ST PHOENIX AZ 85043 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$18,914.59 |
| 3.69. | Nonpriority creditor's name and mailing address Docusign Inc PO BOX 735445 DALLAS TX 75373-5445 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$30,518.05 |

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| 3.70. | Nonpriority creditor's name and mailing address DOMINION ENERGY P.O. BOX 27031 RICHMOND VA 23261-7031 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$96.39 |
| 3.71. | Nonpriority creditor's name and mailing address DORAN MANUFACTURING, LLC. 2851 MASSACHUSETTS AVENUE CINCINNATI OH 45225 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$396.47 |
| 3.72. | Nonpriority creditor's name and mailing address E-10 AUTO SERVICE - THOMAS ETEN JR. 5 STONEGATE DRIVE ALEXANDRIA KY 41001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,240.20 |

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| 3.73. | Nonpriority creditor's name and mailing address EAGLE ROAD SERVICE & TIRE 3011 E. LA CADENA RIVERSIDE CA 92507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$16,379.77 |
| 3.74. | Nonpriority creditor's name and mailing address EARNEST WILLIAMS 2586 S FLANDERS CT AURORA CO 80013 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LITIGATION SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$16,363.62 |
| 3.75. | Nonpriority creditor's name and mailing address ECOLUBE RECOVERY, LLC PO BOX 94421 SEATTLE WA 98124-6721 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$130.00 |

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| 3.76. | Nonpriority creditor's name and mailing address EMERALD SERVICES, INC. PO BOX 975201 DALLAS TX 75397-5201 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$285.34 |
| 3.77. | Nonpriority creditor's name and mailing address EMPLOYBRIDGE, LLC C/O WILKE FLEURY LLP 400 CAPITOL MALL 22ND FLOOR SACRAMENTO CA 95814 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black;"/> 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: LEGAL CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$5,250,443.10 |
| 3.78. | Nonpriority creditor's name and mailing address ENTERPRISE RENT-A-CAR-PRM DAMAGE RECOVERY UNIT- BOB P.O. BOX 801988 KANSAS CITY MO 64180 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black;"/> 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: POTENTIAL CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |

Debtor **Matheson Trucking, Inc.**

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| 3.79. | Nonpriority creditor's name and mailing address FAST GLASS P.O. BOX 3989 SPARKS NV 89432 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,215.00 |
| 3.80. | Nonpriority creditor's name and mailing address FEDEX - PASADENA P.O. BOX 7221 PASADENA CA 91109-7321 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,017.51 |
| 3.81. | Nonpriority creditor's name and mailing address FIDELITY AND DEPOSIT COMPANY OF MARYLAND HELEN RASMUSSEN SENIOR CLAIMS PROFESSIONAL PO BOX 968036 SCHAUMBURG IL 60196 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: SURETY BOND Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |

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| 3.82. | Nonpriority creditor's name and mailing address FIRST CHOICE SERVICES - ONTARIO 4471 SANTA ANA, STE. A ONTARIO CA 91761 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$37.00 |
| 3.83. | Nonpriority creditor's name and mailing address FLEET SERVICES INC 3520 MIRA LOMA AVE ANAHEIM CA 92806 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$849.18 |
| 3.84. | Nonpriority creditor's name and mailing address FLEETPRIDE-DALLAS P O BOX 847118 DALLAS TX 75284-7118 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,181.42 |

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| 3.85. | Nonpriority creditor's name and mailing address FM GRAPHICS, INC 3782 BRADVIEW DRIVE SUITE 100 SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,106.59 |
| 3.86. | Nonpriority creditor's name and mailing address FREEDOM TRUCK & TRAILER PARTS OF UTAH 1153 SOUTH 3600 WEST SALT LAKE CITY UT 84104 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$93.51 |
| 3.87. | Nonpriority creditor's name and mailing address FROG ENVIRONMENTAL 24426 SOUTH MAIN STREET SUITE 701 CARSON CA 90745 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,400.00 |

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| 3.88. | Nonpriority creditor's name and mailing address FUSION CLOUD SERVICES, LLC. P.O. BOX 51341 LOS ANGELES CA 90051-5641 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,523.09 |
| 3.89. | Nonpriority creditor's name and mailing address GARY VORCE YORK LAW CORPORATION WENDY C. YORK & JOHN G. NOWAKOWSKI 1111 EXPOSITION BLVD BLDG 500 SACRAMENTO CA 95815 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |
| 3.90. | Nonpriority creditor's name and mailing address GLASSDOOR DEPT 3436 P.O. BOX 123436 DALLAS TX 75312-3436 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$13,300.00 |

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| 3.91. | Nonpriority creditor's name and mailing address GLOBAL AVIATION SERVICES PO BOX 22689 NEW YORK NY 10087-2689 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,015.43 |
| 3.92. | Nonpriority creditor's name and mailing address GRAINGER DEPT. 809309586 PALATINE IL 60038-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$113.94 |
| 3.93. | Nonpriority creditor's name and mailing address GREENFIELD COMMUNICATIONS 34112 VIOLET LANTERN, SUITE C DANA POINT CA 92629-6519 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$239.34 |

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| 3.94. | Nonpriority creditor's name and mailing address GRIFFIN REED EYE CARE 651 FULTON AVE SACRAMENTO CA 95825-4813 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$174.92 |
| 3.95. | Nonpriority creditor's name and mailing address GRS DRIVELINES 930 WEST 2100 SOUTH SALTY LAKE CITY UT 84119 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$87.55 |
| 3.96. | Nonpriority creditor's name and mailing address HANDIQUIP GSE NY LLC 5504 16TH AVENUE BROOKLYN NY 11204 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,206.90 |

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| 3.97. | Nonpriority creditor's name and mailing address HD DISTRIBUTION CO 2600 INDUSTRIAL BLVD. WEST SACRAMENTO CA 95691 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$178.25 |
| 3.98. | Nonpriority creditor's name and mailing address HEER'S AUTO & DIESEL 5661 DA VINCI WAY SACRAMENTO CA 95835 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,608.50 |
| 3.99. | Nonpriority creditor's name and mailing address HERBERT & ANITA RENDEL, LLC 6202 SOUTH TACOMA WAY TACOMA WA 98409 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$971.49 |

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| 3.100. | Nonpriority creditor's name and mailing address HILLYARD / DENVER P.O. BOX 843117 KANSAS CITY MO 64184-3117 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$33.89 |
| 3.101. | Nonpriority creditor's name and mailing address HODGE PRODUCTS INC PO BOX 1326 EL CAJON CA 92022-1326 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$357.76 |
| 3.102. | Nonpriority creditor's name and mailing address HORIZON GLASS INC. 4555 AUBURN BLVD UNIT 4 SACRAMENTO CA 95841 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,820.00 |

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| 3.103. | Nonpriority creditor's name and mailing address HUBSPOT INC PO BOX 419842 BOSTON MA 02241-9842 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$12,258.01 |
| 3.104. | Nonpriority creditor's name and mailing address IDATAWORKS, INC. C/O STEVEN KHASKY 5708 REGAL OAK LN PARKER CO 80134 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$6,000.00 |
| 3.105. | Nonpriority creditor's name and mailing address IMPERIAL SUPPLIES LLC PO BOX 5362 JANESVILLE WI 53547-5362 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$10,798.71 |

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| 3.106. | Nonpriority creditor's name and mailing address INDEED INC. PO BOX 660367 MAIL CODE 5160 DALLAS TX 75266-0367 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,236.25 |
| 3.107. | Nonpriority creditor's name and mailing address INLAND KENWORTH, INC - FONTANA 8314 W. ROOSEVELT STREET, 2ND FLR TOLLESON AZ 85353 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$14,830.18 |
| 3.108. | Nonpriority creditor's name and mailing address INTEGRATED DEICING SERVICES, LLC. 175 AMMON DR. MANCHESTER NH 03054 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$332.89 |

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| 3.109. | Nonpriority creditor's name and mailing address INTEGRITY ELECTRICAL SOLUTIONS 221 CORPORATE CIRCLE, UNIT L GOLDEN CO 80401 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$219.50 |
| 3.110. | Nonpriority creditor's name and mailing address INTEGRITY FLEET SERVICES, INC. P.O. BOX 2069 MILTON WA 98354 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,328.05 |
| 3.111. | Nonpriority creditor's name and mailing address INTERMOBILE FLEET MAINTENANCE 3704 REMUDA WAY PINOLE CA 94564 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$15,511.74 |

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| 3.112. | Nonpriority creditor's name and mailing address INTERMOUNTAIN GAS COMPANY PO BOX 5600 BISMARCK ND 58506-5600 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$84.64 |
| 3.113. | Nonpriority creditor's name and mailing address INTERMOUNTAIN TRAILER 5510 W LAMPERT LANE WEST VALLEY CITY UT 84120 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$13,978.23 |
| 3.114. | Nonpriority creditor's name and mailing address INTERMOUNTAIN TRANSMISSION EXCHANGE 1494 SOUTH WEST TEMPLE SALT LAKE CITY UT 84115 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$7,848.83 |

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| 3.115. | Nonpriority creditor's name and mailing address INTERSTATE BATTERIES 1730 SOUTH E ST. SAN BERNARDINO CA 92408 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,632.89 |
| 3.116. | Nonpriority creditor's name and mailing address JACK'S TIRE & OIL MANAGEMENT CO INC PO BOX 6337 N. LOGAN UT 84341 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$5,170.79 |
| 3.117. | Nonpriority creditor's name and mailing address JB TRAILER SERVICES, INC. PO BOX 310095 FONTANA CA 92331 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,082.46 |

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| 3.118. | Nonpriority creditor's name and mailing address JEFF'S TRUCK SERVICE 13514 HWY 99 NORTH CHICO CA 95973 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$178.89 |
| 3.119. | Nonpriority creditor's name and mailing address JOSHUA AGUILAR MCELFISH LAW FIRM RAYMOND D. MCELFISH 1112 N. SHERBOURNE DR. WEST HOLLYWOOD CA 90069 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |
| 3.120. | Nonpriority creditor's name and mailing address KENWORTH SALES COMPANY DEPT # 001 P.O. BOX 27088 SALT LAKE CITY UT 84127-0088 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$24,647.58 |

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| 3.121. | Nonpriority creditor's name and mailing address KODIAK ROOFING & WATERPROOFING CO. 8825 WASHINGTON BLVD, SUITE 100 ROSEVILLE CA 95678 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$875.00 |
| 3.122. | Nonpriority creditor's name and mailing address LEGACY MOBILE TRUCK REPAIR LLC 661 SOUTH 450 EAST BURLEY ID 83318 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$291.05 |
| 3.123. | Nonpriority creditor's name and mailing address LEGAL SHIELD PO BOX 2629 ADA OK 74821-2629 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$19.50 |

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| 3.124. | Nonpriority creditor's name and mailing address LES SCHWAB TIRE - SEATTLE 13609 1ST AVENUE, SOUTH SEATTLE WA 98168 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$961.94 |
| 3.125. | Nonpriority creditor's name and mailing address LEVY WILSON MARA LAW FIRM, PC DAVID MARA & JAMIE SERB 2650 CAMINO DEL RIO NORTH SUITE 205 SAN DIEGO CA 92108 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION 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 LIFT SOLUTIONS, INC. 14616 SHEPARD STREET OMAHA NE 68138 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,309.58 |

Debtor **Matheson Trucking, Inc.**

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| 3.127. | Nonpriority creditor's name and mailing address LITTLER MENDELSON PC PO BOX 207137 DALLAS TX 75320-7137 Date or dates debt was incurred <hr/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$100,026.43 |
| 3.128. | Nonpriority creditor's name and mailing address LOHF SHAIMAN JACOBS HYMAN & FEIGER PC 950 SO CHERRY ST SUITE 900 DENVER CO 80246 Date or dates debt was incurred <hr/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$475,682.20 |
| 3.129. | Nonpriority creditor's name and mailing address M W SUPPLY, INC. 100 PROGRESS ST. GLEN ROSE TX 76043 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,013.29 |

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| 3.130. | Nonpriority creditor's name and mailing address MACIRE DIARRA 11149 E 6TH PLACE AURORA CO 80010 Date or dates debt was incurred <hr/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$93,750.02 |
| 3.131. | Nonpriority creditor's name and mailing address MADDOCK MACHINERY 4795 S JULIAN TUCSON AZ 85714 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$29,138.49 |
| 3.132. | Nonpriority creditor's name and mailing address MAHAMET CAMARA 3782 S GENOA CIRCLE UNIT A AURORA CO 80013 Date or dates debt was incurred <hr/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$93,750.02 |

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| 3.133. | Nonpriority creditor's name and mailing address MARINI DIESEL, INC INTERSTATE BILLING PO BOX 2208 DECATUR AL 35609 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,525.46 |
| 3.134. | Nonpriority creditor's name and mailing address MATHESON AIR SERVICES LLC 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$1,072,046.57 |
| 3.135. | Nonpriority creditor's name and mailing address MATHESON FLIGHT AND POSTAL SERVICES - NOTES PAYABLE OLD LOAN 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY NOTE OLD AS OF 7/14/22 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$26,233,066.73 |

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| 3.136. | Nonpriority creditor's name and mailing address MATHESON FLIGHT EXTENDERS, INC. 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE DUE AS OF 5/6/2022 - 7/14/2022 Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$11,557,772.68 |
| 3.137. | Nonpriority creditor's name and mailing address MATHESON FLIGHT EXTENDERS, INC. 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE DUE AS OF 5/5/2022 Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$38,309,861.00 |
| 3.138. | Nonpriority creditor's name and mailing address MATHESON FLIGHT EXTENDERS, INC. 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY LOAN PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$66,851,447.57 |

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| 3.139. | Nonpriority creditor's name and mailing address MATHESON MAIL TRANSPORTATION 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$1,819,971.49 |
| 3.140. | Nonpriority creditor's name and mailing address MATHESON POSTAL SERVICES, INC. 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE DUE AS OF 5/6/2022 - 7/14/2022 Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$2,627,675.35 |
| 3.141. | Nonpriority creditor's name and mailing address MATHESON POSTAL SERVICES, INC. 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY PAYABLE DUE AS OF 5/5/2022 Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$62,806,290.73 |

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| 3.142. | Nonpriority creditor's name and mailing address MATHESON POSTAL SERVICES, INC. 9785 GOETHE ROAD SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: INTERCOMPANY LOAN PAYABLE Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | Amount of claim \$79,364,059.33 |
| 3.143. | Nonpriority creditor's name and mailing address MAXX FLEET SERVICE 7070 SMITH RD. DENVER CO 80207 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,316.18 |
| 3.144. | Nonpriority creditor's name and mailing address MEDCOR, INC. PO BOX 75570 CLEVELAND OH 44101-4755 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$360.00 |

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| 3.145. | Nonpriority creditor's name and mailing address MERCEDES-BENZ OF EL DORADO HILLS 1000 MERCEDES LANE EL DORADO HILLS CA 95762 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,227.39 |
| 3.146. | Nonpriority creditor's name and mailing address METROWEST SWEEPING, INC. 5246 SILVER PEAK LANE ROCKLIN CA 95765-5078 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$145.00 |
| 3.147. | Nonpriority creditor's name and mailing address MHC KENWORTH PO BOX 879269 KANSAS CITY MO 64187-9269 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$24,805.69 |

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| 3.148. | Nonpriority creditor's name and mailing address MICHELE ELLIS PERKINS, ASBILL, APLC NATALIA D. ASBILL-BEAROR 300 CAPITOL MALL SUITE 1800 SACRAMENTO CA 95814 Date or dates debt was incurred <hr/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |
| 3.149. | Nonpriority creditor's name and mailing address MICHELIN 12398 COLLECTIONS CENTER DR CHICAGO IL 60693 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$109,347.56 |
| 3.150. | Nonpriority creditor's name and mailing address MIDWEST POWER INDUSTRIES 2103 FOREST AVE KANSAS CITY MO 64108 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$11,610.00 |

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| 3.151. | Nonpriority creditor's name and mailing address MIDWEST TRUCK PARTS & SERVICE 5075 COOK ST DENVER CO 80216 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$844.55 |
| 3.152. | Nonpriority creditor's name and mailing address MILLENNIUM TERMITE & PEST 9900 HORN ROAD, SUITE 5 SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$62.50 |
| 3.153. | Nonpriority creditor's name and mailing address MINUTEMAN SECURITY SYSTEMS P.O. BOX 942 TRABUCO CANYON CA 92678 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$165.00 |

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| 3.154. | Nonpriority creditor's name and mailing address MOUSSA DEMBELE 1475 JESUP AVE 3B BRONX NY 10452 Date or dates debt was incurred <hr/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LITIGATION SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$17,727.25 |
| 3.155. | Nonpriority creditor's name and mailing address MURREYS DISPOSAL CO, INC. PO BOX 7428 PASADENA CA 91109-7428 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$389.35 |
| 3.156. | Nonpriority creditor's name and mailing address NAPA AUTO PARTS - DALLAS P.O. BOX 848033 DALLAS TX 75284-8033 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,151.07 |

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| 3.157. | Nonpriority creditor's name and mailing address NAPA AUTO PARTS - L.A. FILE 56893 LOS ANGELES CA 90074-6893 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,006.37 |
| 3.158. | Nonpriority creditor's name and mailing address NAPA AUTO PARTS - TWIN FALLS PO BOX 1425 TWIN FALLS ID 83303-1425 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$686.66 |
| 3.159. | Nonpriority creditor's name and mailing address NAPA AUTO PARTS-TUKWILA 11011 TUKWILA INTL BLVD TUKWILA WA 98168 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$536.00 |

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| 3.160. | Nonpriority creditor's name and mailing address NEW ENGLAND FLEET SERVICES 42 RUSSELL ROAD EAST GRANBY CT 06026 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,522.70 |
| 3.161. | Nonpriority creditor's name and mailing address NEXTRAN TRUCK CENTERS 7250 E 56TH AVE COMMERCE CITY CO 80022 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,398.71 |
| 3.162. | Nonpriority creditor's name and mailing address NUOVEA, INC. 1508 14TH STREET APT A SACRAMENTO CA 95814 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$6,250.00 |

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| 3.163. | Nonpriority creditor's name and mailing address OCCUPATIONAL HEALTH CENTERS-RANCHO OF CALIFORNIA PO BOX 4300 RANCHO CUCAMONGA CA 91729-4300 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$113.50 |
| 3.164. | Nonpriority creditor's name and mailing address OLD WORLD INDUSTRIES, LLC PO BOX 204549 DALLAS TX 75320-4549 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,500.78 |
| 3.165. | Nonpriority creditor's name and mailing address ORIGAMI RISK LLC PO BOX 74751 CHICAGO IL 60694-4751 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$84,600.00 |

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| 3.166. | Nonpriority creditor's name and mailing address OXARC, INC. 4003 E BROADWAY AVE SPOKANE WA 99202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$348.97 |
| 3.167. | Nonpriority creditor's name and mailing address PACCAR PARTS P.O. BOX 731165 DALLAS TX 75373 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$11,495.36 |
| 3.168. | Nonpriority creditor's name and mailing address PACIFIC POWER GROUP, LLC PO BOX 748720 LOS ANGELES CA 90074-8720 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$95.88 |

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| 3.169. | Nonpriority creditor's name and mailing address PACIFIC TORQUE 18060 DES MOINES MEMORIAL DR. SEATTLE WA 98148-1950 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,161.22 |
| 3.170. | Nonpriority creditor's name and mailing address PACIFIC WELDING SUPPLY PO BOX 111240 TACOMA WA 98411-1240 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$188.12 |
| 3.171. | Nonpriority creditor's name and mailing address PATRICK KUHNS MARA LAW FIRM DAVID MARA 2650 CAMINO DEL RIO NORTH SUITE 205 SAN DIEGO CA 92108 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |

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| 3.172. | Nonpriority creditor's name and mailing address PENSKE TRUCK LEASING - PA PO BOX 827380 PHILADELPHIA PA 19182-7380 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$6,941.34 |
| 3.173. | Nonpriority creditor's name and mailing address PERFORMANCE SYSTEMS INTEGRATION LLC 7324 SW DURHAM RD PORTLAND OR 97224 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$174.38 |
| 3.174. | Nonpriority creditor's name and mailing address PETERBILT OF UTAH P.O. BOX 27634 SALT LAKE CITY UT 84127 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$30,028.23 |

Debtor **Matheson Trucking, Inc.**

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| 3.175. | Nonpriority creditor's name and mailing address PETE'S TOWING SERVICE P.O. BOX 98783 DES MOINES WA 98198-0783 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$640.98 |
| 3.176. | Nonpriority creditor's name and mailing address PHILLIPS 66 CO./SYNCB P.O. BOX 530970 ATLANTA GA 30353-0970 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$254.02 |
| 3.177. | Nonpriority creditor's name and mailing address PLUMBING SERVICE CO 6400 ELVAS AVENUE, STE. B SACRAMENTO CA 95819 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$844.43 |

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| 3.178. | Nonpriority creditor's name and mailing address PM TRUCK REPAIR, INC PO BOX 403 WEST SACRAMENTO CA 95691 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,277.39 |
| 3.179. | Nonpriority creditor's name and mailing address POINT & CLICK LLC 3833 N. CENTRAL AVE. STE 1710 PHOENIX AZ 85012 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,312.50 |
| 3.180. | Nonpriority creditor's name and mailing address PRIME GLASS 9668 MILLIKEN AVENUE 104-291 RANCHO CUCAMONGA CA 91730 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$497.82 |

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| 3.181. | Nonpriority creditor's name and mailing address PYE-BARKER FIRE & SAFETY LLC PO BOX 735358 DALLAS TX 75373-5358 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$561.10 |
| 3.182. | Nonpriority creditor's name and mailing address QUADIENT FINANCE USA INC PO BOX 6813 CAROL STREAM IL 60197-6813 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$141.30 |
| 3.183. | Nonpriority creditor's name and mailing address QUALITY TOWING - NORTH LAS VEGAS PO BOX 365079 NORTH LAS VEGAS NV 89036 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$855.53 |

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| 3.184. | Nonpriority creditor's name and mailing address QUEST DIAGNOSTICS - ATLANTA P. O. BOX 740709 ATLANTA GA 30374-0709 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$12,154.65 |
| 3.185. | Nonpriority creditor's name and mailing address QUICK-SET AUTO GLASS 10655 EAST 120TH COURT HENDERSON CO 80640 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,972.01 |
| 3.186. | Nonpriority creditor's name and mailing address REDMARK CNG SERVICES, LLC. 5660 E 58TH AVE, UNIT B COMMERCE CITY CO 80022-3976 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$287.61 |

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| 3.187. | Nonpriority creditor's name and mailing address RELX INC DBA LEXISNEXIS 28544 NETWORK PLACE CHICAGO IL 60673-1285 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$50.00 |
| 3.188. | Nonpriority creditor's name and mailing address REVOLUTION GEAR & TRUCK PARTS, LLC. 670 NORTH REDWOOD ROAD NORTH SALT LAKE UT 84054 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$19,730.02 |
| 3.189. | Nonpriority creditor's name and mailing address RING CENTRAL, INC. P.O. BOX 734232 DALLAS TX 75373-4232 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$7,276.60 |

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| 3.190. | Nonpriority creditor's name and mailing address RND AUTO & TRUCK, LLC PO BOX 329 HIBERNIA NJ 07842 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,226.44 |
| 3.191. | Nonpriority creditor's name and mailing address ROAD KING DIESEL PO BOX 3640 ALHAMBRA CA 91803 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,564.29 |
| 3.192. | Nonpriority creditor's name and mailing address ROBS AUTOMOTIVE & COLLISION CENTER PO BOX 1619 LEVITTOWN PA 19058-1619 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$3,860.44 |

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| 3.193. | Nonpriority creditor's name and mailing address ROMAINE ELECTRIC CORP PO BOX 5069 KENT WA 98064-5069 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,537.45 |
| 3.194. | Nonpriority creditor's name and mailing address RUSH TRUCK CENTERS OF COLORADO P.O. BOX 2208 DECATUR AL 35609-2208 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$15,075.82 |
| 3.195. | Nonpriority creditor's name and mailing address S & H TERMINAL 323 WEST 1410 SOUTH SALT LAKE CITY UT 84115 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$134.58 |

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| 3.196. | Nonpriority creditor's name and mailing address S & P BRAKE SUPPLY, INC. PO BOX 30296 BILLINGS MT 59107 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$7,133.40 |
| 3.197. | Nonpriority creditor's name and mailing address SACRAMENTO COUNTY SHERIFF'S DEPT ALARM 4500 ORANGE GROVE AVE. SACRAMENTO CA 95841-4205 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$75.00 |
| 3.198. | Nonpriority creditor's name and mailing address SAFETY-KLEEN SYSTEMS, INC. PO BOX 975201 DALLAS TX 75397-5201 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$584.15 |

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| 3.199. | Nonpriority creditor's name and mailing address SAGE PARTS PLUS 30 HUB DR. MELVILLE NY 11747 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$10,070.68 |
| 3.200. | Nonpriority creditor's name and mailing address SALERNO TIRE CORP 1400 CALCON HOOD RD. SHARON HILL PA 19079 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$61.48 |
| 3.201. | Nonpriority creditor's name and mailing address SALIF DIALLO 5055 PERTH COURT DENVER CO 80249 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$36,000.02 |

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| 3.202. | Nonpriority creditor's name and mailing address SALT LAKE CITY CORPORATION - LOS ANGELES PUBLIC UTILITIES P.O. BOX 840173 LOS ANGELES CA 90084-0173 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$90.08 |
| 3.203. | Nonpriority creditor's name and mailing address SAMSARA NETWORKS INC. PO BOX 735462 DALLAS TX 75373-5462 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$25,215.86 |
| 3.204. | Nonpriority creditor's name and mailing address SANDERS MOBILE TRUCK REPAIR PO BOX 401 OREGON CITY OR 97045 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,315.66 |

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| 3.205. | Nonpriority creditor's name and mailing address SECRETARY OF STATE - SACRAMENTO BUSINESS PROGRAMS DIVISION P.O. BOX 944230 SACRAMENTO CA 94244 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$25.00 |
| 3.206. | Nonpriority creditor's name and mailing address SECURITAS SECURITY SERVICES USA, INC. TATIA DECAMBRE-ELLIS/DISTRICT MANAGER 255 PITKIN ST. 155 FOUNDERS PLAZA EAST HARFORD CT 06108 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |
| 3.207. | Nonpriority creditor's name and mailing address SELLY BA 9100 E FLORIDA AVE APT 4-103 DENVER CO 80247 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEGAL SETTLEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$57,750.00 |

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| 3.208. | Nonpriority creditor's name and mailing address SHIRLEY CURRAN 1231 HALIDON WAY FOLSOM CA 95630 Date or dates debt was incurred 10/22/2021 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: SEVERANCE AGREEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$357,992.96 |
| 3.209. | Nonpriority creditor's name and mailing address SHOPPAS MID AMERICA LLC 1301 N CORRINGTON AVE KANSAS CITY MO 64120 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,644.18 |
| 3.210. | Nonpriority creditor's name and mailing address SINDY BUFORD YORK LAW CORPORATION WENDY C. YORK & JOHN G. NOWAKOWSKI 1111 EXPOSITION BLVD BLDG 500 SACRAMENTO CA 95815 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |

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| 3.211. | Nonpriority creditor's name and mailing address SONITROL OF SACRAMENTO LLC 1334 BLUE OAKS BLVD ROSEVILLE CA 95678 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$832.12 |
| 3.212. | Nonpriority creditor's name and mailing address SOUTH SACRAMENTO PARTS, LLC 8622 ELDER CREEK ROAD SACRAMENTO CA 95828 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,759.06 |
| 3.213. | Nonpriority creditor's name and mailing address SOUTH VALLEY AUTO GLASS LLC 2971 W 10460 S SOUTH JORDAN UT 84095 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$431.00 |

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| 3.214. | Nonpriority creditor's name and mailing address SOUTH WEST TIRE SHOP INC. 6420 MARTIN LUTHER KING JR BLVD SACRAMENTO CA 95823 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$790.00 |
| 3.215. | Nonpriority creditor's name and mailing address SOUTHERN CALIFORNIA EDISON P.O. BOX 300 ROSEMEAD CA 91772-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$94.84 |
| 3.216. | Nonpriority creditor's name and mailing address SOUTHERN TIRE MART PO BOX 1000 DEPT 143 MEMPHIS TN 38148-0143 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,161.67 |

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| 3.217. | Nonpriority creditor's name and mailing address SOUTHWEST AIRPORT SERVICES, INC 2600 E. LOS REALES RD #4 TUCSON AZ 85756-6955 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,039.72 |
| 3.218. | Nonpriority creditor's name and mailing address SOUTHWEST LOCK AND SAFE LLC 3225 S WADSWORTH BLVD UNIT D LAKEWOOD CO 80227 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$108.28 |
| 3.219. | Nonpriority creditor's name and mailing address SPECIALTY FLEET SERVICES, LLC PO BOX 827 LOCKEFORD CA 95237 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$11,120.67 |

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| 3.220. | Nonpriority creditor's name and mailing address SSMB PACIFIC HOLDING CO. 598 DISPLAY WAY SACRAMENTO CA 95838 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$239.78 |
| 3.221. | Nonpriority creditor's name and mailing address STANDARD PARTS CORP P.O. BOX 44250 TACOMA WA 98448 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$970.12 |
| 3.222. | Nonpriority creditor's name and mailing address STAPLES BUSINESS ADVANTAGE PO BOX 660409 DALLAS TX 75266-0412 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,747.78 |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

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| 3.223. | Nonpriority creditor's name and mailing address STAR INDUSTRIES 3780 A HAPPY LANE SACRAMENTO CA 95827 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$11,910.00 |
| 3.224. | Nonpriority creditor's name and mailing address STAUFFER'S TOWING LLC 1960 PAINTER LANE WEST HAVEN UT 84401 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$568.68 |
| 3.225. | Nonpriority creditor's name and mailing address STERLING TALENT SOLUTIONS PO BOX 35626 NEWARK NJ 07193-5626 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,139.75 |

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| 3.226. | Nonpriority creditor's name and mailing address STEVEN RAY AGUILAR MCELFISH LAW FIRM RAYMOND D. MCELFISH 1112 N. SHERBOURNE DR. WEST HOLLYWOOD CA 90069 Date or dates debt was incurred <hr style="width: 30%; margin-left: 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PENDING LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim UNDETERMINED |
| 3.227. | Nonpriority creditor's name and mailing address STREAMLINE SUPPLY INC 460 NORTH 1000 WEST CENTERVILLE UT 84014 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$189.97 |
| 3.228. | Nonpriority creditor's name and mailing address SUEZ WATER IDAHO PAYMENT CENTER PO BOX 371804 PITTSBURGH PA 15250-7804 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <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 \$30.33 |

Debtor **Matheson Trucking, Inc.**

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| 3.229. | Nonpriority creditor's name and mailing address SUMMIT AIRWORKS 4223 DULUTH AVENUE ROCKLIN CA 95765 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,910.68 |
| 3.230. | Nonpriority creditor's name and mailing address SUNSTATE EQUIPMENT CO. PO BOX 208439 DALLAS TX 75320-8439 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,165.87 |
| 3.231. | Nonpriority creditor's name and mailing address SUPERIOR AUTOMOTIVE WAREHOUSE 2021 RANCHO DR. STE 2 REDLANDS CA 92373 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$393.94 |

Debtor **Matheson Trucking, Inc.**

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| 3.232. | Nonpriority creditor's name and mailing address SUPERIOR PAINT SUPPLY 1388 SOUTH 700 WEST SALT LAKE CITY UT 84104 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$612.00 |
| 3.233. | Nonpriority creditor's name and mailing address SWIPEJOBS PREMIER EMPLOYEE SOLUTIONS PO BOX 2380 VINEYARD UT 84059 Date or dates debt was incurred <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LEGAL CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$265,584.37 |
| 3.234. | Nonpriority creditor's name and mailing address TENSTREET LLC 5121 S WHEELING AVE, STE 200 TULSA OK 74105 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$49,415.22 |

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| 3.235. | Nonpriority creditor's name and mailing address TERMINIX 150 PEABODY PL MEMPHIS TN 38103 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$155.00 |
| 3.236. | Nonpriority creditor's name and mailing address THE CHOCHAN CONSULTING GROUP 116 ALLANMERE CT SAN RAMON CA 94582 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,350.00 |
| 3.237. | Nonpriority creditor's name and mailing address THERMO FLUIDS INC PO BOX 734867 DALLAS TX 75373-4867 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$56.50 |

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| 3.238. | Nonpriority creditor's name and mailing address TLD AMERICA 812 BLOOMFIELD AVENUE WINDSOR CT 06095 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$436.82 |
| 3.239. | Nonpriority creditor's name and mailing address TRACKER CORP 5001 PLAZA ON THE LAKE, STE 111 AUSTIN TX 78746 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$12,187.50 |
| 3.240. | Nonpriority creditor's name and mailing address TRACTION P O BOX 749986 LOS ANGELES CA 90074-9986 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,631.51 |

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| 3.241. | Nonpriority creditor's name and mailing address TRANSWEST P.O. BOX 335 BRIGHTON CO 80601 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,130.05 |
| 3.242. | Nonpriority creditor's name and mailing address TRAVELCENTERS OF AMERICA - CINCINNAT ATTN: CREDIT DEPARTMENT P.O. BOX 641906 CINCINNATI OH 45264-1906 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$779.61 |
| 3.243. | Nonpriority creditor's name and mailing address TRIMBLE TRANSPORTATION ENTERPRISE SOLUTIONS P.O. BOX 203455 DALLAS TX 75320-3455 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$9,598.45 |

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| 3.244. | Nonpriority creditor's name and mailing address TRIPLE S STEEL SUPPLY CO. PO BOX 301212 DALLAS TX 75303-1212 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$237.28 |
| 3.245. | Nonpriority creditor's name and mailing address TRU MAC FLEET SERVICE, INC. ASSIGNEE FOR TRU-MAC TOTAL FLEET P.O. BOX 848244 LOS ANGELES CA 90084-8244 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,129.00 |
| 3.246. | Nonpriority creditor's name and mailing address TRUCK ALIGN P.O. BOX 889 ROY WA 98580 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,997.50 |

Debtor **Matheson Trucking, Inc.**

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| 3.247. | Nonpriority creditor's name and mailing address TUG TECHNOLOGIES CORPORATION PO BOX 732854 DALLAS TX 75373-2854 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$841.30 |
| 3.248. | Nonpriority creditor's name and mailing address UNUM LIFE INSURANCE COMPANY OF AMERICA P.O. BOX 409548 ATLANTA GA 30384-9548 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,090.37 |
| 3.249. | Nonpriority creditor's name and mailing address UTAH CARENOW URGENT CARE LLC PO BOX 745681 ATLANTA GA 30384 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$65.00 |

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| 3.250. | Nonpriority creditor's name and mailing address UTILITY TRAILER SALES OF UTAH, INC 4970 WEST 2100 SOUTH SALT LAKE CITY UT 84120 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$5,698.62 |
| 3.251. | Nonpriority creditor's name and mailing address UTILITY TRAILER SALES OF WASHINGTON 904 WEST MAIN STREET PO BOX 1618 AUBURN WA 98001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$848.06 |
| 3.252. | Nonpriority creditor's name and mailing address VALVOLINE COMPANY PO BOX 74008513 CHICAGO IL 60674-8513 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,107.65 |

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| 3.253. | Nonpriority creditor's name and mailing address VASKO ELECTRIC 4300 ASTORIA STREET SACRAMENTO CA 95838 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$168.50 |
| 3.254. | Nonpriority creditor's name and mailing address VERIZON WIRELESS - 660108 PO BOX 660108 DALLAS TX 75266-0108 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Amount of claim \$14,524.90 |
| 3.255. | Nonpriority creditor's name and mailing address VISION SERVICE PLAN P.O. BOX 45210 SAN FRANCISCO CA 94145-5210 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$308.42 |

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| 3.256. | Nonpriority creditor's name and mailing address VITAL RECORDS CONTROL PO BOX 80493 CITY OF INDUSTRY CA 91716 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$197.32 |
| 3.257. | Nonpriority creditor's name and mailing address W&B SERVICE COMPANY PO BOX 165118 FORT WORTH TX 76161-5118 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,490.74 |
| 3.258. | Nonpriority creditor's name and mailing address W&S CHASSIS & TRAILER REPAIR, INC. PO BOX 4590 RANCHO CUCAMONGA CA 91729 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,666.65 |

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| 3.259. | Nonpriority creditor's name and mailing address WALKER'S OFFICE SUPPLIES 4041 ALVIS COURT ROCKLIN CA 95677 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$92.64 |
| 3.260. | Nonpriority creditor's name and mailing address WASTE MANAGEMENT OF DENVER PO BOX 7400 PASADENA CA 91109-7400 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,173.35 |
| 3.261. | Nonpriority creditor's name and mailing address WASTE MANAGEMENT OF UTAH P.O. BOX 7400 PASADENA CA 91109-7400 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,476.84 |

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| 3.262. | Nonpriority creditor's name and mailing address WATERLOGIC WEST, INC. PO BOX 677867 DALLAS TX 75267-7867 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$161.15 |
| 3.263. | Nonpriority creditor's name and mailing address WELLS FARGO FINANCIAL LEASING PO BOX 77096 MINNEAPOLIS MN 55480-7796 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$2,264.60 |
| 3.264. | Nonpriority creditor's name and mailing address WERRES CORPORATION 807 EAST SOUTH STREET FREDERICK MD 21701 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$1,035.25 |

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| 3.265. | Nonpriority creditor's name and mailing address WEST COAST FRAME & COLLISION REPAIR 3203-D WEST CAPITOL AVE WEST SACRAMENTO CA 95691 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$16,891.73 |
| 3.266. | Nonpriority creditor's name and mailing address WORKFORCE QA LLC 1430 SOUTH MAIN STREET SALT LAKE CITY UT 84115 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input 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 \$4,569.22 |

Debtor **Matheson Trucking, Inc.**

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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 |
|---|--|---|
| 121 WAWARME INVESTMENT PARTNERS 137 DANBURY ROAD PMB 300 NEW MILFORD CT 06776 | Part 2 line 3.1 | |
| CERIDIAN HCM INC 3311 EAST OLD SHAKOPEE RD MINNEAPOLIS MN 55425 | Part 2 line 3.46 | |
| ENTERPRISE RENT-A-CAR-PRM TRANSWORLD SYSTEMS, INC. COLLECTION AGENCY 500 VIRGINIA DR. SUITE 513 FT WASHINGTON PA 19034 | Part 2 line 3.78 | |
| MICHELIN ONE PKWY SOUTH GREENVILLE SC 29615 | Part 2 line 3.149 | |
| MISSOURI DEPT OF REVENUE STEVEN A GINTHER,SPECIAL ASST ATTORNEY GENERAL BANKRUPTCY UNIT P O BOX 475 JEFFERSON CITY MO 65105-0475 | Part 1 line 2.10 | |
| SAMSARA NETWORKS INC 350 RHODE ISLAND ST 4TH FL SOUTH BUILDING SAN FRANCISCO CA 94103 | Part 2 line 3.203 | |
| SECURITAS SECURITY SERVICES USA, INC. GLOBAL HAWK RESOURCES, LLC EILEENMEZZO P.O. BOX 2010 METHUEN MA 010844 | Part 2 line 3.206 | |
| TN DEPT OF REVENUE TN ATTORNEY GENERAL'S OFFICE BANKRUPTCY DIVISION P O BOX 20207 NASHVILLE TN 37202-0207 | Part 1 line 2.18 | |
| WILKE FLEURY LLP DANIEL L EGAN 621 CAPITOL MALL,9TH FLOOR SACRAMENTO CA 95814 | Part 2 line 3.77 | |
| WILKE FLEURY LLP JASON G ELDRED 621 CAPITOL MALL. 9TH FLOOR SACRAMENTO CA 95814 | Part 2 line 3.77 | |

Debtor

Matheson Trucking, Inc.

Case number (if known)

22-21758

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. | \$138,488.00 |
| 5b. Total claims from Part 2 | 5b. + | \$300,381,275.61 |
| 5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c. | 5c. | \$300,519,763.61 |

Fill in this information to identify the case:

Debtor name: Matheson Trucking, Inc.

United States Bankruptcy Court for the: Eastern District of California

Case number (if known): 22-21758

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

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

| 2. | List all contracts and unexpired leases | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
|------|---|--|
| 2.1. | <p>Title of contract BUSINESS INSURANCE</p> <p>State what the contract or lease is for EXCESS EMPLOYMENT PRACTICES LIABILITY INSURANCE, POLICY NO. MLX4263507-0</p> <p>Nature of debtor's interest INSURED</p> <p>State the term remaining 03/01/2023</p> <p>List the contract number of any government contract _____</p> | <p>ARGONAUT INSURANCE CO. RISK PLACEMENT SERVICES 525 WEST VAN BUREN STE 1325 CHICAGO IL 60607</p> |
| 2.2. | <p>Title of contract AWARDCO SERVICE ORDER</p> <p>State what the contract or lease is for SERVICES AGREEMENT</p> <p>Nature of debtor's interest SERVICE RECIPIENT</p> <p>State the term remaining 9/15/2022</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>AWARDCO, LLC 727 NORTH 1550 EAST SUITE 125 OREM UT 84097</p> |
| 2.3. | <p>Title of contract BUSINESS INSURANCE</p> <p>State what the contract or lease is for MANAGEMENT LIABILITY PRACTICES INSURANCE, POLICY NO. P-001-000521747-02</p> <p>Nature of debtor's interest INSURED</p> <p>State the term remaining 3/1/2023</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>AXIS INSURANCE COMPANY 1000 AVALON BLVD STE 200 ALPHARETTA GA 30009</p> |

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

- 2.4. **Title of contract** COMMERCIAL CREDIT CARD AGREEMENT AND AMENDMENTS
- State what the contract or lease is for** SERVICES
- Nature of debtor's interest** CONTRACT PARTY
- State the term remaining** ON NOTICE
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- BANK OF AMERICA, N.A.
PILLSBURY WINTHROP SHAW
PITTMAN
JONATHAN DOOLITTLE
FOUR EMBARCADERO CENTER
22ND FLOOR
SAN FRANCISCO CA 94111-5998
- 2.5. **Title of contract** INDUSTRIAL LEASE
- State what the contract or lease is for** SO CA STC - LGB STC - FACILITY LEASE - 2400 WEST ARTESIA BLVD, LONG BEACH, CA 90805
- Nature of debtor's interest** LESSEE
- State the term remaining** 11/30/2026 WITH 1 - 5 YEAR OPTION TO RENEW
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- BRIDGE POINT LONG BEACH, LLC
9528 W. BRYN MAWR AVE.
SUITE 700
ROSEMEONG IL 60018
- 2.6. **Title of contract** EQUIPMENT LEASE
- State what the contract or lease is for** COPIER LEASE
- Nature of debtor's interest** LESSEE
- State the term remaining** 9/15/2024
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- CALTRONICS BUSINESS SYSTEMS
ATTN MIKE MURDOCH
301 UNIVERSITY AVENUE
SUITE 150
SACRAMENTO CA 95825
- 2.7. **Title of contract** CERIDIAN ORDER
- State what the contract or lease is for** SERVICES AGREEMENT
- Nature of debtor's interest** SERVICE RECIPIENT
- State the term remaining** 5/30/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- CERIDIAN HCM, INC.
3311 EAST OLD SHAKOPEE RD.
MINNEAPOLIS MN 55425
- 2.8. **Title of contract** BUSINESS INSURANCE
- State what the contract or lease is for** EXCESS LIABILITY INSURANCE, POLICY NO. XOOG72566580001
- Nature of debtor's interest** INSURED
- State the term remaining** 03/01/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- CHUBB FEDERAL INSURANCE CO.
PO BOX 4700
CHESAPEAKE VA 23327-4700

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

- | | | | |
|-------|---|---|---|
| 2.9. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | EMPLOYEE BENEFIT INSURANCE EMPLOYEE MEDICAL/DENTAL INSURANCE CONTRACT PARTY | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease CIGNA 5476 COLLECTIONS CENTER DR. CHICAGO IL 60693 |
| 2.10. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | LEASE AGREEMENT SEA UPS - COMMERCIAL OFFICE BUILDING - 6729 EAST MARGINAL WAY S, SEATTLE WA 98108 LESSEE 3/30/2027 | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease CLPF-SEATTLE DISTRIBUTION CENTER, L.P. C/O CLARION PARTNERS ATTN: ANDREW LOWE 1717 MCKINNEY AVENUE SUITE 1900 DALLAS TX 75202 |
| 2.11. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | OFFICE/INDUSTRIAL LEASE AND ADDENDUM BOI SHOP & TERMINAL - COMMERCIAL OFFICE BUILDING - 7801 W LEMHI LANE STE 5, BOISE, ID 83709 LESSEE MO TO MO | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease DALE E. PIPKIN 8997 MANDAN COURT BOISE ID 83709 |
| 2.12. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | DELL LEASE AGREEMENT HARDWARE/SOFTWARE LEASE LESSEE 8/26/24 | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease DELL 1 DELL WAY ROUND ROCK TX 78682 |
| 2.13. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | SURETY BOND | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease FIDELITY AND DEPOSIT COMPANY OF MARYLAND HELEN RASMUSSEN SENIOR CLAIMS PROFESSIONAL PO BOX 968036 SCHAUMBURG IL 60196 |

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

- 2.14. **Title of contract** MASTER SERVICE AGREEMENT
State what the contract or lease is for CONTRACTOR SERVICES
Nature of debtor's interest CONTRACT PARTY
State the term remaining 1/22/2023
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 GARY D. NELSON ASSOCIATES, INC.
 19080 LOMITA AVE
 SONOMA CA 95476
- 2.15. **Title of contract** BUSINESS INSURANCE
State what the contract or lease is for CIGNA STOP LOSS INSURANCE
Nature of debtor's interest CONTRACT PARTY
State the term remaining _____
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 GRANULAR INSURANCE COMPANY
 269 EAST GRAND AVENUE
 SOUTH SAN FRANCISCO CA 94080
- 2.16. **Title of contract** BUSINESS INSURANCE
State what the contract or lease is for LIABILITY INSURANCE, POLICY NO. RAD943505218 & AND RAD500019513
Nature of debtor's interest INSURED
State the term remaining 03/01/2023
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 GREENWICH INSURANCE CO.
 70 SEAVIEW AVE
 SEAVIEW HOUSE
 STAMFORD CT 06902-6040
- 2.17. **Title of contract** BUSINESS INSURANCE
State what the contract or lease is for AUTOMOBILE LIABILITY - AXA XL INSURANCE, POLICY NO. RAD50000195-13
Nature of debtor's interest INSURED
State the term remaining 3/1/2023
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 GREENWICH INSURANCE CO.
 70 SEAVIEW AVE
 SEAVIEW HOUSE
 STAMFORD CT 06902-6040
- 2.18. **Title of contract** SUBLEASE AGREEMENT
State what the contract or lease is for CBR STC - COMMERCIAL OFFICE BUILDING - 14301 MATTAWOMAN DRIVE, BRANDYWINE, PRINCE GEORGE'S COUNTY, MD 20613
Nature of debtor's interest LESSEE
State the term remaining 8/30/2026
List the contract number of any government contract _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
 GXO LOGISTICS SUPPLY CHAIN, INC
 FORMERLY XPO LOGISTICS
 SUPPLY CHAIN INC
 4035 PIEDMONT PARKWAY
 HIGH POINT NC 27265

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

- 2.19. **Title of contract** SUBLEASE AGREEMENT
- State what the contract or lease is for** ATL STC - FACILITY LEASE - 1970 MAPLE AVENUE, ATLANTA, FULTON COUNTY, GA 30336
- Nature of debtor's interest** SUBLESSEE
- State the term remaining** 9/15/2026
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
GXX LOGISTICS SUPPLY CHANIN, INC
ATTN: LEASE ADMINISTRATION
4035 PIEDMONT PARKWAY
HIGH POINT NC 27265
- 2.20. **Title of contract** BUSINESS INSURANCE
- State what the contract or lease is for** 401(K) PLAN
- Nature of debtor's interest** INSURED
- State the term remaining** 1/31/2024
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
HARTFORD FIRE INSURANCE COMPANY
2 N LA SALLE ST
26TH FLOOR
CHICAGO IL 60602-5700
- 2.21. **Title of contract** BUSINESS INSURANCE
- State what the contract or lease is for** KIDNAP AND RANSOM INSURANCE, POLICY NO. UKA3005332 .22
- Nature of debtor's interest** INSURED
- State the term remaining** 03/01/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
HISCOX
520 MADISON AVE
32ND FLOOR
NEW YORK NY 10022
- 2.22. **Title of contract** HUBSPOT ORDER
- State what the contract or lease is for** SERVICES AGREEMENT
- Nature of debtor's interest** SERVICE RECIPIENT
- State the term remaining** 6/14/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
HUBSPOT INC.
25 FIRST STREET
CAMBRIDGE MA 02141
- 2.23. **Title of contract** REAL PROPERTY LEASE
- State what the contract or lease is for** SNB - HIGHLAND SHOP - COMMERCIAL OFFICE BUILDING - 27236 3RD STREET, BLDG "B", HIGHLAND , CA 92346
- Nature of debtor's interest** LESSEE
- State the term remaining** 10/1/2023
- List the contract number of any government contract** _____
- State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
JAMAL SALEH
C/O SHOWCASE MANAGEMENT INC
ATTN DALE LOPEZ
7835 CHURCH STREET
HIGHLAND CA 92346

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

| | | | |
|-------|--|--|--|
| 2.24. | Title of contract | LENOVO 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 | HARDWARE/SOFTWARE LEASE | |
| | Nature of debtor's interest | LESSEE | LENOVO GROUP LIMITED 1009 THINK PL MORRISVILLE NC 27560 |
| | State the term remaining | 10/4/22 | |
| | List the contract number of any government contract | _____ | |
| 2.25. | Title of contract | STANDARD INDUSTRIAL REAL ESTATE LEASE 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 | RNO THS - RENO PEAK ANNEX - FACILITY LEASE - 9499 N. VIRGINIA ST, RENO NV 89506; WASHOE COUNTY | |
| | Nature of debtor's interest | LESSEE | MAJESTIC LIBERTY, LLC MAJESTIC REALTY CO. ATTN: PROPERTY MANAGEMENT 13191 CROSSROADS PARKWAY NORTH SIXTH FLOOR CITY OF INDUSTRY CA 91746 |
| | State the term remaining | 07/01/2027 WITH 1- 5 YEAR OPTION TO RENEW | |
| | List the contract number of any government contract | _____ | |
| 2.26. | Title of contract | PROFESSIONAL SERVICES AGREEMENT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | INTERCOMPANY AGREEMENT | |
| | Nature of debtor's interest | CONTRACT PARTY | MATHESON FLIGHT EXTENDERS, INC. 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | INDEFINITE | |
| | List the contract number of any government contract | _____ | |
| 2.27. | Title of contract | COMMERCIAL CREDIT CARD AGREEMENT AND AMENDMENTS | 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 | SERVICES | |
| | Nature of debtor's interest | CONTRACT PARTY | MATHESON FLIGHT EXTENDERS, INC. 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | ON NOTICE | |
| | List the contract number of any government contract | _____ | |
| 2.28. | 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 | SLC SHOP LEASE - FACILITY LEASE SLC - 588 GLADIOLA STREET SALT LAKE CITY, UTAH 84104 | |
| | Nature of debtor's interest | LESSEE | MATHESON HOLDINGS, GP ATTN: CHARLES MELLOR 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | 1/1/2030 | |
| | List the contract number of any government contract | _____ | |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

| | | | |
|-------|--|---|---|
| 2.29. | 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 | DEN SHOP LEASE - FACILITY LEASE - 6875 EAST 54TH PLACE, COMMERCE CITY, CO 80022 | |
| | Nature of debtor's interest | LESSEE | MATHESON HOLDINGS, GP ATTN: CHARLES MELLOR 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | 1/1/2030 | |
| | List the contract number of any government contract | _____ | |
| 2.30. | 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 | OAK SHOP LEASE - FACILITY LEASE - 2500 POPLAR STREET OAKLAND, CA 94607 | |
| | Nature of debtor's interest | LESSEE | MATHESON HOLDINGS, GP ATTN: CHARLES MELLOR 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | 1/1/2030 | |
| | List the contract number of any government contract | _____ | |
| 2.31. | 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 | SAC SHOP LEASE - COMMERCIAL OFFICE BUILDING - OPS OFFICE - 455 BANNON STREET SACRAMENTO, CA 95811 | |
| | Nature of debtor's interest | LESSEE | MATHESON HOLDINGS, GP ATTN: CHARLES MELLOR 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | 1/1/2030 | |
| | List the contract number of any government contract | _____ | |
| 2.32. | 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 | HQ - FACILITY LEASE HQ - 9785 GOETHE ROAD SACRAMENTO, CA 95827 | |
| | Nature of debtor's interest | LESSEE | MATHESON HOLDINGS, GP ATTN:CHARLES MELLOR 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | 1/1/2030 | |
| | List the contract number of any government contract | _____ | |
| 2.33. | Title of contract | PROFESSIONAL SERVICES AGREEMENT | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | INTERCOMPANY AGREEMENT | |
| | Nature of debtor's interest | CONTRACT PARTY | MATHESON MAIL TRANSPORTATION, INC. 9785 GOETHE RD. SACRAMENTO CA 95827 |
| | State the term remaining | INDEFINITE | |
| | List the contract number of any government contract | _____ | |

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

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|-------|---|---|--|
| 2.34. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | PROFESSIONAL SERVICES AGREEMENT INTERCOMPANY AGREEMENT CONTRACT PARTY INDEFINITE _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease MATHESON POSTAL SERVICES, INC. 9785 GOETHE RD. SACRAMENTO CA 95827 |
| 2.35. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | COMMERCIAL CREDIT CARD AGREEMENT AND AMENDMENTS SERVICES CONTRACT PARTY ON NOTICE _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease MATHESON POSTAL SERVICES, INC. 9785 GOETHE RD. SACRAMENTO CA 95827 |
| 2.36. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | LEASE AGREEMENT BNA - FACILITY LEASE - 807 SPACE PARK N, GOODLETTSVILLE, DAVIDSON COUNTY, TN 37072 LESSEE 7/31/2024 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease MILBURN SPN LLC ATTN: GIL CLARK 30 W. MONROE STREET SUITE 1700 CHICAGO IL 60603 |
| 2.37. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | BUSINESS INSURANCE LEAD EXCESS INSURANCE, POLICY NO. 42XSF30482505 INSURED 3/1/2023 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease NATIONAL FIRE & MARINE INSURANCE CO. RISK PLACEMENT SERVICES 525 WEST VAN BUREN STE 1325 CHICAGO IL 60607 |
| 2.38. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | SOFTWARE SUBSCRIPTION AGREEMENT SOFTWARE CLIENT 4/23/2021 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease ORIGAMI RISK LLC EARNEST BENTLEY 222 N. LASALLE ST. SUITE 2125 CHICAGO IL 60601 |

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

- | | | | |
|-------|---|---|---|
| 2.39. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | SUBSCRIPTION LICENSE AGREEMENT IMMIGRATION SOFTWARE LICENSEE MO TO MO _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease P.C. LEGAL TOOLS, INC. TRACKER CORP 559 SUTTER STREET SAN FRANCISCO CA 95827 |
| 2.40. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | SEPARATION AGREEMENT EMPLOYEE SEPARATION AGREEMENT EMPLOYER 7/31/23 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease PAUL MATHESON 1701 BRANDT ROAD WAY LODI CA 95240 |
| 2.41. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | REAL PROPERTY LEASE ATL - THS - COMMERCIAL OFFICE BUILDING - 775/795 ATLANTA SOUTH PARKWAY, SUITE 100, COLLEGE PARK, FULTON COUNTY, GA 30349 LESSEE 7/31/2024 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease PROLOGIS 3475 PIEDMONT RD NE SUITE 650 ATLANTA GA 30305 |
| 2.42. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | RAY MORGAN LEASE COPIER LEASE LESSEE UNDETERMINED _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease RAY MORGAN COMPANY 1580 VINEYARD RD ROSEVILLE CA 95678 |
| 2.43. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | BUSINESS INSURANCE STORAGE TANK LIABILITY - SCOTTSDALE INSURANCE, POLICY NO. VGS0002693 INSURED 3/1/2023 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease SCOTTSDALE UCPM ENVIRONMENTAL INSURANCE 335 E GERMANN RD STE 340 GILBERT AZ 85297 |

Debtor **Matheson Trucking, Inc.**

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|-------|---|---|--|
| 2.44. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | SEPARATION AGREEMENT EMPLOYEE SEPARATION AGREEMENT EMPLOYER 1/01/2025 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease SHIRLEY CURRAN 1231 HALIDON WAY FOLSOM CA 95630 |
| 2.45. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | REAL PROPERTY LEASE NE STC - COMMERCIAL OFFICE BUILDING - 2189 WESTOVER ROAD, CHICOPEE, HAMPDEN COUNTY, MA 01022 LESSEE 12/31/2026 WITH 2 - 5 YEAR OPTIONS TO RENEW _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease STAG INDUSTRIAL HOLDINGS, LLC C/O STAG INDUSTRIAL INC. ATTN: GENERAL COUNSEL ONE FEDERAL STREET 23RD FLOOR BOSTON MA 02110 |
| 2.46. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | PLACEMENT SERVICES AGREEMENT STAFFING SERVICES CLIENT MO TO MO _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease SWIPEJOBS LLC PREMIER EMPLOYEE SOLUTIONS 1ST CLASS STAFFING 1293 N. STATE ST. OREM UT 84057 |
| 2.47. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | CONSULTING AGREEMENT CONSULTING CLIENT MO TO MO _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease THREE PEAKS CONSULTING, LLC 5772 S. ORCHID WAY BOISE ID 83716 |
| 2.48. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | BUSINESS INSURANCE CASUALTY /PROPERTY - REPLACEMENT INSURANCE, POLICY NO. QT6303T36208ATIL22 INSURED 03/01/2023 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease TRAVELERS PROPERTY CASUALTY CO OF AMERICA ONE TOWER SQUARE HARTFORD CT 06187 |

Debtor **Matheson Trucking, Inc.**

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- | | | | |
|-------|---|---|--|
| 2.49. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | EMPLOYEE BENEFIT INSURANCE EMPLOYEE LONG TERM DISABILITY INSURANCE CONTRACT PARTY _____ _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease UNUM LIFE INSURANCE COMPANY OF AMERICA P.O. BOX 409548 ATLANTA GA 30384-9548 |
| 2.50. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | EMPLOYEE BENEFIT INSURANCE EMPLOYEE VISION INSURANCE CONTRACT PARTY _____ _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease VISION SERVICE PLAN 3333 QUALITY DRIVE RANCHO CORDOVA CA 95670 |
| 2.51. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | WELLS FARGO LEASE AGREEMENT COPIER LEASE LESSEE UNDETERMINED _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease WELLS FARGO & COMPANY 420 MONGOMERY STREET SAN FRANCISCO CA 94104 |
| 2.52. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | BUSINESS INSURANCE PREMISES POLLUTION LIABILITY INSURANCE, POLICY NO. G72556045001 INSURED 3/1/2023 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease WESTCHESTER INSURANCE COMPANY 11575 GREAT OAKS WAY STE 200 ALPHARETTA GA 30022 |
| 2.53. | Title of contract State what the contract or lease is for Nature of debtor's interest State the term remaining List the contract number of any government contract | BUSINESS INSURANCE EXCESS LIABILITY INSURANCE, POLICY NO. G71789597003 INSURED 03/01/2023 _____ | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease WESTCHESTER SURPLUS LINES INSURANCE CO RISK PLACEMENT SERVICES 525 WEST VAN BUREN STE 1325 CHICAGO IL 60607 |

Debtor **Matheson Trucking, Inc.**

Case number (if known) **22-21758**

- | | | | |
|-------|--|---|---|
| 2.54. | Title of contract | BUSINESS INSURANCE | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | WORKER'S COMPENSATION INSURANCE, POLICY NO. RWD9435054-18 | |
| | Nature of debtor's interest | INSURED | XL INSURANCE AMERICA, INC. 70 SEAVIEW AVE SEAVIEW HOUSE STAMFORD CT 06902-6040 |
| | State the term remaining | 03/01/2023 | |
| | List the contract number of any government contract | _____ | |
-
- | | | | |
|-------|--|--|---|
| 2.55. | Title of contract | BUSINESS INSURANCE | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease |
| | State what the contract or lease is for | AIRPORT LIABILITY, POLICY NO. UA0010968AV22A | |
| | Nature of debtor's interest | INSURED | XL SPECIALITY INSURANCE COMPANY 70 SEAVIEW AVE SEAVIEW HOUSE STAMFORD CT 06902-6040 |
| | State the term remaining | 3/1/2023 | |
| | List the contract number of any government contract | _____ | |

Fill in this information to identify the case:**Debtor name:** Matheson Trucking, Inc.**United States Bankruptcy Court for the:** Eastern District of California**Case number (if known):** 22-21758☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

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

1. Does the debtor have any codebtors?

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

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

| Column 1: Codebtor | | Column 2: Creditor | |
|---|---|---|--|
| Name | Mailing address | Name | Check all schedules that apply: |
| 2.1. MARK B. MATHESON | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANK OF AMERICA, N.A. | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.2. MARK B. MATHESON | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANC OF AMERICA LEASING & CAPITAL, LLC | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.3. MARK B. MATHESON AS TRUSTEE FOR THE MARK B. MATHESON 2009 IRREVOCABLE TRUST | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANK OF AMERICA, N.A. | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.4. MARK B. MATHESON AS TRUSTEE FOR THE MARK B. MATHESON 2009 IRREVOCABLE TRUST | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANC OF AMERICA LEASING & CAPITAL, LLC | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.5. MATHESON FLIGHT EXTENDERS, INC. | 9785 GOETHE RD. SACRAMENTO CA 95827 | BANK OF AMERICA, N.A. | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G |
| 2.6. MATHESON FLIGHT EXTENDERS, INC. | 9785 GOETHE RD. SACRAMENTO CA 95827 | BANC OF AMERICA LEASING & CAPITAL, LLC | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |

Debtor **Matheson Trucking, Inc.**Case number (if known) **22-21758**

| Column 1: Codebtor | | Column 2: Creditor | |
|--|---|--|--|
| Name | Mailing address | Name | Check all schedules that apply: |
| 2.7. MATHESON FLIGHT EXTENDERS, INC. | 9785 GOETHE ROAD SACRAMENTO CA 95827 | 121 WAWARME INVESTMENT PARTNERS | <input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.8. MATHESON FLIGHT EXTENDERS, INC. | 9785 GOETHE ROAD SACRAMENTO CA 95827 | FIDELITY AND DEPOSIT COMPANY OF MARYLAND | <input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.9. MATHESON HOLDINGS GP | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANC OF AMERICA LEASING & CAPITAL, LLC | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.10. MATHESON HOLDINGS GP | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANK OF AMERICA, N.A. | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.11. MATHESON MAIL TRANSPORTATION, INC. | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANC OF AMERICA LEASING & CAPITAL, LLC | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.12. MATHESON MAIL TRANSPORTATION, INC. | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANK OF AMERICA, N.A. | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.13. MATHESON POSTAL SERVICES, INC. | 9785 GOETHE RD. SACRAMENTO CA 95827 | BANK OF AMERICA, N.A. | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G |
| 2.14. MATHESON POSTAL SERVICES, INC. | 9785 GOETHE RD. SACRAMENTO CA 95827 | BANC OF AMERICA LEASING & CAPITAL, LLC | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.15. MATHESON PROPERTIES LLC | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANC OF AMERICA LEASING & CAPITAL, LLC | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.16. MATHESON PROPERTIES LLC | 9785 GOETHE ROAD SACRAMENTO CA 95827 | BANK OF AMERICA, N.A. | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |

Fill in this information to identify the case:**Debtor name:** Matheson Trucking, Inc.**United States Bankruptcy Court for the:** Eastern District of California**Case number (if known):** 22-21758Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

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

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

Declaration and signature

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

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

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

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

Executed on 8/18/2022
MM/DD/YYYY

x

/s/ Charles Mellor

Signature of individual signing on behalf of debtor

Charles Mellor
Printed name

Chief Restructuring Officer
Position or relationship to debtor